

Who we are

- Richard Groden, GP and Clinical Director
- Willie Wilkie, Lead Optometrist
- Alan Harrison, Lead Pharmacist for Community Care
- Lorna Kelly, Head of Primary Care Support and Development

Aim

- Discuss primary care and how it is changing
- Consider links to the rest of the transformational programme
- Think about messages and communication

MFT – wider context

Specialist Care

Specialist Care

Hospital Based Care

Hospital Based Care

Accessing community and primary care

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Accessing community and primary care

Living at Home with support



Living at Home with support

Living at home independently



Living at home independently

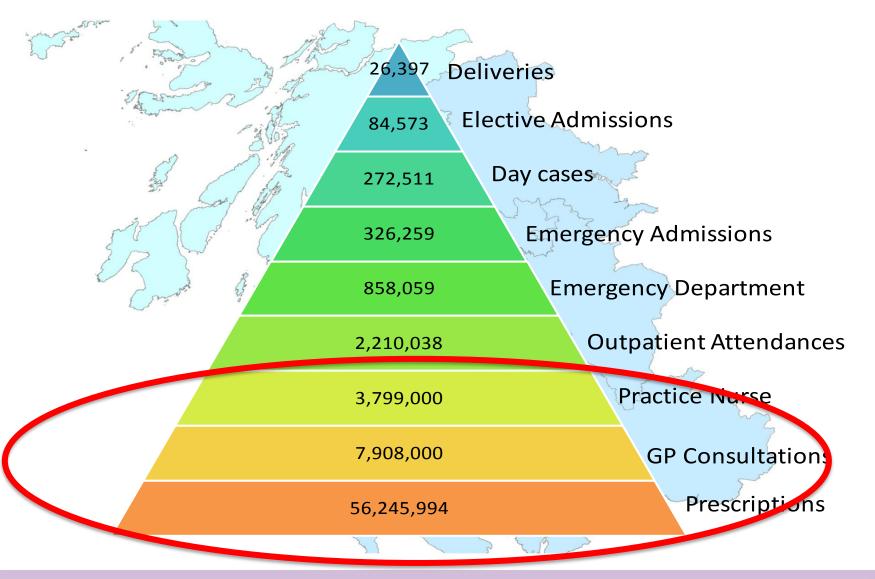
Today

- Overview of primary care in GGC
- General practice
- Optometry
- Community pharmacy
- Discussion

Primary care

- First point of contact
- Nearly everyone will access primary care over the course of a year
 - Over 5 million GP consultations a year across GGC
 - 2 million sight tests (Scotland)
 - Over 24 million dispensed prescription items per year (2016)
- Universal access
- Health systems with strong primary care are better
 - International evidence on outcomes and cost

West of Scotland



Primary Care in NHSGGC

- GPs 237 practices
- Dentistry 255
- Optometry 178
- Community Pharmacy 291

..working as part of a team

Social Work **Optometry Podiatry Nurse Specialists** Rheumatology, Dermatology, **Home Care** Pharmacy **Dental Services** Urology, Heart Failure... etc Citizens Advice **Health Visitors** Midwifery Community Mental Health Team **Benefits Agency** Child & Adolescent Mental Health Occupational District Nursing Therapy Housing Older People Sexual Health **Psychiatry School Nurses** Services General Speech & **Practice** Language Therapy **Community Paediatrics** Marie Curie Nurses **Scottish Ambulance Service** Macmillan Nurses **Adult Learning Disability Team**

Daytime and Out of Hours Services

- GP 8am to 6pm Mon-Fri
 - NHS 24 / GP out of hours evenings and weekends
- Community Pharmacy
 - Core hours are 9am to 5.30pm Mon- Fri and 9am to 1pm on a Saturday
 - 25 extended hours practices open on Sundays and beyond 6pm each night
- Optometrists
 - Most open Monday to Saturday
 - 41 open Monday to Sunday
 - Evening opening

General Practice

General Practice in GGC



Practices (working together in 40 'clusters')

Registered list of patients living in the practice catchment area. Patient Choice



Less than 2,000 patients



More than 10,000 patients

90 % of people visit their practice in a year

Core Services and team

- Open 8.30am 6pm
- Most offer some extended hours evenings or early mornings
- Urgent and routine appointments
- Telephone, online, email
- See people who are ill or think they are ill
- Advise, treat, refer / manage episode of care
- Practice Nurses, Health Care Support Workers
- Range of additional services and clinics

Range of services (examples)

- Annual comprehensive reviews
 - Heart Disease, Asthma, Stroke, Diabetes, COPD
- Child health surveillance and immunisations
- Regular monitoring
- Contraceptive services
- Cervical smears
- Travel Immunisation
- Annual flu immunisations
- Minor surgery
- Links to a wide range of other services

Challenges

- Changing population: age and deprivation
- 15% rise in demand for appointments
- More complex patients
- Pressure on time with patients (10 minute appointments)
- Challenges across Scotland: recruitment
- GP still seen as gate keeper to NHS and other services
- Variation in services

What's changing?

- New contract
- Free up GP time to focus on those who most need it – complex care
- More different roles in primary care:
 - Nurses, Paramedics, Mental Health, Pharmacy, bloods / treatment rooms
- Direct access to the person with the most appropriate skills - might not see GP
- In the practice or local area
 - Health Centre / Cluster
- More on line access
 - Appointments, prescriptions, advice

Lots already happening

- Anticipatory Care Planning with patients and wider multi-disciplinary team
- Pharmacist as part of Practice Team
- Physiotherapist attached to practice
- Community Link Worker attached to practice supporting individuals
- Community Respiratory Teams
- Community Rehabilitation Teams
- Direct access to some services
 - Podiatry, Physiotherapy, Midwifery

Looking ahead

- What else can be developed in the community and how does it link to general practice?
- Making sure people know where to go and how to access services
- Ensuring timely access to core services

Optometry

Evolution of Scottish Optometry

Optom accreditation
HES Training
70% retention
Quality
Peer Review
Communication
Rx Request
Networks / Systems
Joint Working



GIES

2000/08







Eyecare Review 2005/6 New GOS 2006 Enhanced - LENS (PGDs) - Grampian

2010/14
Delegated Care
IT Integration
IP
Px Pads

GOC Rules

Old GOS 1999











Optometry

First port of call for all eye problems

 Sore red eyes or vision changes all treated with no cost to the patient

Prescribing

 There are an increasing number of Independent Prescribing Optometrists and all other optometrists can treat many conditions

Referral, Discharge and Shared Care

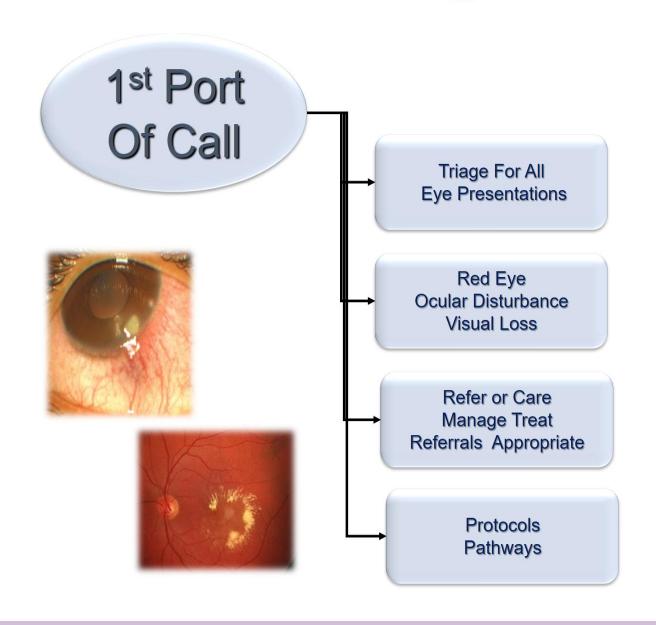
- Optometrists can refer direct to the Hospital eye service for both urgent and routine appointments.
- They will in future be more involved with patients being discharged from the hospital eye service











What can IP Optometrist Prescribe

Work within your recognised area of expertise & competence:-

 Any licensed medicine (except for controlled drugs or those for parenteral administration) for ocular condition affecting the eye and the tissues surrounding the eye

- Any drugs listed in BNF Section on the Eye PLUS
- Oral antibiotics
- Oral NSAIDs
- Oral Anti allergy products
- Oral Steroids
- Skin emollients
- Steroid skin creams / ointments



Optometry

Care of the Elderly

 Domiciliary and Care Home optometry services provided by high street practices; some companies provide mobile optometry services.

Low Vision Services

All high street opticians, in the Glasgow Low
 Vision service and in the Hospital Eye Service

Patients with Complex Needs

 RNIB provide support to optometry practices to improve access for patients with disabilities.





Portable equipment used in House and Care Home Consultations





Many magnifiers and other specialist aids are available







Community Pharmacy

Community Pharmacy



- Advice on common ailments and over the counter medication: coughs, colds, sore throat, stomach upsets
- No need for appointment
- Support to stop smoking
- Dispense prescriptions and supply emergency contraception
- Chronic Medication Service (CMS) increase the number of serial prescriptions supplied through the CMS



Pharmacy First

- Community Pharmacy prescribing Prescription-only medication for specified conditions e.g. UTI's, Impetigo, Shingles, Bridging contraception)
 - Are you a woman aged between 16 and 65 with any of the following?

Burning or stinging sensation on passing urine? Need to pass urine frequently? Need to pass urine urgently?

Q Impetigo - do you have any of the following?

- Minor skin infection on one area of the body?
- · Red sores that pop easily and leave a yellow crust?
- Fluid-filled blisters?
- Itchy rash?

Go to your Pharmacy First!

Minor Ailments

- Advice and supply of treatment for minor ailments – register with pharmacy
- Pilot in Inverclyde to extend service to everyone

Future Developments

- Supply of specialist treatments e.g.
 Oncology through community pharmacy rather than acute pharmacies
- Involvement in Out of Hours service to support medical staff

Summary and Discussion

- Changes across all services
- Opportunities to do more
- Choices about where, how many, who
- See the right person first time
- Making the system easy to use