



COVID-19 CLINICAL SOLUTIONS

What did you do?

A GP role has been created to provide clinical decision making capacity to support community teams that are working to manage patients' urgent care at home. The role is being evaluated for its benefits for patient care and more efficient working of the local care system.

Who are you?

Dr Neveen Samuel, GP and Divisional Clinical Director, Community and Therapy Services Division, Northern Lincolnshire and Goole NHS Foundation Trust, Scunthorpe.
Mrs Karen Fanthorpe, Divisional General Manager, Community and Therapy Services Division, Northern Lincolnshire and Goole NHS Foundation Trust, Scunthorpe.
Mrs J Killingbeck, Chief Operating Officer (GP Federation), Safecare Network Ltd, Scunthorpe.

What was the problem?

Community practitioners often need clinical advice to be confident that managing a patient at home is a safe and appropriate option. Seeking GP advice (especially out of hours) can be time consuming; therefore, having a GP available is helping to manage patient care in a different way, for example, avoiding hospital admission.

What was the solution?

The Community Response Team GP (provided from 8.00 am – 8.00 pm, 7 days per week) is based in the same place as the teams that make up the CRT. The service commenced on 25th April 2020.

Safecare is responsible for providing GPs to cover the rota .

The expected outcomes include:

- Reducing avoidable hospital admissions
- Increase the number of people able to die in their preferred location and for them to 'die well'
- Support care homes in being able to manage residents
- Increase general GP capacity through an alternative route for coordinated patient care

Early feedback is that there have been benefits:

- Faster treatments for patients at end of life

- For patients with complex conditions/comorbidities, immediate GP advice means that the (often) default decision of sending to hospital can be reviewed.
- Families reassured by receiving an explanation from a GP has avoided them calling 999 in panic
- Care home residents have been able to get much quicker treatment, which has avoided escalation of calls and made them feel much more supported
- Immediate access to a GP for ambulance crews who are on site with a patient — particularly important for care home situations
- More holistic discussions, which mean that, where urgent, a patient's treatment has been amended to prevent avoidable deterioration
- Nurses in SPA have immediate GP support when facing difficult triaging situations

As the GPs who are covering the CRTGP role are drawn from local practices, the improved understanding of community services and the networks/relationships that are being established helps to spread the benefits much wider.

Where can we find out more?

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<https://bjgp.org>