

Scripted explanation of Primary Care Flow to your patient

Are you in a private place? Can you be overheard? Do you have time for this conversation?

Hi xxxxxx

It's Dr xxxxxx from xxxxxx. Don't worry it's nothing serious. Are you OK to talk for a few minutes?

Assuming OK...

I'd like to ask you if at some point quite soon you'd be interested in having a longer conversation with me. But I can give you a bit of background if you'd like..?

If yes...

Some Barnstaple GPs are trialling a new way of helping our patients. It's just a small project at the moment and we're at the stage of trying to work out whether it might work for us and for our patients.

The basis of the idea is that lots of our patients have a combination of physical and mental health issues. Often, they also have other factors in their lives that affect their physical and mental health that can't be dealt with directly by a doctor or a nurse. It might take a lot of time to tease out all these factors- the sort of time we don't have in a normal GP appointment. Also, GPs and their patients tend to focus on the problems that they think the GP might be able to try and help fix. Often though, there may be other things that are more important to the patient and these might not be talked about at all. Sometimes the patient may also have difficult or painful things that are not easy to talk about; or, if they are, the patient might not want to have to bring up again and again to different people.

Does any of that make sense?

Clarify, repeat bits if necessary.

It is also the case that the normal way of doing things is to refer people to lots of different organisations which might specialise in the different problems a patient faces. Often these organisations aren't very good at talking to each other and the patient has to tell the same story to lots of different people over and over again. Also- organisations tend to only want to get involved in the thing they specialise in.

Does this sound familiar? I wonder if you've had any experiences like this?

Allow pt to respond and reflect back as necessary.

So our proposed new way of doing these things is this... the patient's GP has a much longer conversation with the patient than normal. This could be in one go, or over a few sessions. At the moment because of Covid this would probably have to be over the phone or a video call. There may be some structure to the conversation, but it is mainly a chance for us to find out the things that really matter to the patient. This may have nothing to do directly with health!

Hopefully out of this conversation would emerge a plan of what the patient felt were areas in their life that matter to them and that they might like help dealing with. *(If there are any immediate or worrying things that come out of this conversation they would need to dealt with appropriately)*. The next step, and only with the permission of the patient, would be for the GP to have a meeting with a very few key people and share with them the conversation and the plan. These people are experts in knowing what different things might be available to help address the things in the patient's plan. They would use their knowledge to find the right people to help and contact them to make what we are calling a 'Team around the person'. This team will be able to talk with the patient and to each other as they work with the patient to address the things in their plan. This might happen in a variety of ways: in person, virtually, by phone or video, with the whole team, a few of the team, with or without the patient. It all depends on what works best for the patient but the point being that the system fits around the patient rather than the patient being bounced around the system. And the patient doesn't have to keep saying the same things to lots of different people. There will be a key link person between the patient and their team. This might be the GP but it may be that after the initial conversation with the GP, the patient feels that there is already another more suitable person to do that.

That might all sound rather complicated! Have you got any questions?

Listen to and respond to questions.

So... do you think you would be interested in seeing if this way of doing things might help you deal with some of the difficulties you are facing in your life?

Yes/No/Maybe another time..

If yes,

Great. The very first part of the process is that I have a good look through your medical record, which stays completely confidential between you and me. But shall we look now at how you would like for us to have a longer conversation about what matters to you?

Also, what we would need to do now is to sign this consent form.

On the consent form you will see that there is a box for your agreement for someone from the One Northern Devon team to call you from time to time just to get your feedback. This

is to help us to develop Primary Care Flow and it is important that we hear your thoughts and feedback. Would that be something you would be happy to do?

We also have a Primary Care Flow Patient Focus Group to continue to develop the Flow approach together if you would like to join that group it would be wonderful. This isn't something you have to think about right now, however the person at One Northern Devon will talk more to you about that this.

Ask the patient to Sign the "Information Sharing Consent Form"