# Success Through Winter Access

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### **Foreword**

by Ross Farmer, Commercial Director, Livi



Last year saw a unique challenge where a Covid-19 world met the new primary care infrastructure of PCNs and ongoing development of ICPs and ICSs. Managing unprecedented demand and staffing issues necessitated a need for remote services to help free up capacity locally and create space to develop a new primary care system for the future.

The Winter Access Fund provided extra support for teams grappling with this challenge. Designed to build resilience and improve patient access, over the past year the fund has been utilised in a number of different ways by organisations.

The winter access initiative has required close and collaborative working across PCNs, CCGs and wider system stakeholders. Building on successes from the Covid vaccination programme, teams have come together to develop and enact proposals on how to deliver extra capacity across a given footprint to serve the needs of patients.

That extra capacity has been targeted with two primary aims in mind. The first is to help patients with urgent care needs be seen when they need to, on the same day, taking account of preferences, instead of going to hospital. The second is to drive improved access to urgent, same-day primary care by increasing GP appointment numbers at practice or PCN level. This is to help ensure enough capacity at a local level for patients that can only be seen face-to-face.

To deliver on both these aims, a strategic approach taking into account and planning for the expected scale of same-day demand has been crucial.

Indeed, over the past year, Livi has been supporting a number of NHS partners on Winter Access projects in that very sense. Not only increasing the number of available same-day GP appointments at a base level, but also working with partners to understand and plan for demand spikes, mobilising digital clinical resource at speed and at scale.



With both our Livi Practice and Livi Population services, we've worked to ensure patients can access GP appointments either directly through their practice and/ or through the Livi App. Livi Practice is specifically designed to quickly assist with resilience of individual practices, while our population model can help reduce pressure across a local system by managing patients in partnership with local providers across primary and urgent care.

Our approach is borne out of a belief that digital can be an enabler for increased access in its broadest sense, freeing face-to-face appointments for those who need them, and providing same-day support for patients where required. We've supported partners requiring short-term targeted assistance and long-term support, deploying bespoke services to fit needs in a given footprint.

This year, we are already working to mobilise winter access services with a number of organisations already. Thus far, we have seen a greater focus on the rising crisis within emergency care and ambulance services. This is despite one of the most challenging summers on record in general practice and declining patient satisfaction.

Last year we built an offer to support the entire system combining patient-initiated services, provision of GPs and nurses, administrative support and additional resource delivered directly to practices. These services are required more than ever this year, but with primary care receiving less winter attention than previously, we are also ensuring our urgent care services are available throughout the entire week, including in and out of hours. We expect greater demand for digital support in this regard than ever before with collaborations already ramping up heading into 2023 and beyond.

As we begin to look ahead, we wanted to reflect on the successes of our partners and the difference the fund made in 2022. From teams working through winter pressures, we've seen some incredible results and heard some inspiring stories. This document collects those stories and also presents analysis and opinion on how the health system can prepare for winter pressures now and in the future. We hope you find it interesting and informative.

Ross Farmer Commercial Director, Livi



Success Story

## **North Yorkshire CCG**

#### **Building resilience in North Yorkshire**

In December 2021, North Yorkshire CGG enlisted the help of Livi to provide digital clinical capacity across Yorkshire and Humber. The aim? Improve access to primary care in deprived localities and support stretched services across the region.

In areas such as Haxby, Scarborough and Filey with a low GP-to-patient ratio, coastal practices and urgent care services can struggle in the winter months. Contracted through Winter Access, Livi's service has helped to build resilience within the local health system at a challenging time.

#### Providing agile, flexible support

From the outset of Livi's partnership with North Yorkshire, the Livi team identified a need for flexible support to meet surge demand across multiple patches. Livi's ability to scale services and supply clinical resource based on the needs of partners at speed has proven invaluable for North Yorkshire CCG.

"The Livi team were outstanding, providing us with a fair and robust contract under such winter pressure deadlines," says Maria Dean, Senior Service Transformation Manager, North Yorkshire CCG. "Short notice additional capacity was

often requested and Livi pulled out all of the stops with the scheduling team to deliver additional capacity."

Livi worked closely with North Yorkshire to understand areas in the greatest need, target support effectively and onboard practices quickly and effectively.

Maria remarks, "In a very short turnaround time, we were able to ensure all of our practices were invited to understand the Livi model through various presentations and Q&A sessions which were delivered with such knowledge and professionalism."

#### North Yorkshire - The numbers

400

appointments delivered a week on average

960

appointments delivered in a single week

1600

additional GP hours provided in 5 months

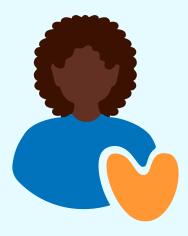


#### Delivering capacity and results at speed

Just 12 weeks on from North Yorkshire's initial enquiry, the service was up and running across the full cohort of practices. The service would deliver 400 appointments a week on average including 960 consultations in a single week at full capacity. By May, Livi had provided 1600 additional GP hours in just 5 months.

Laser-focused on helping areas most in need, Livi's agile model has also enabled clinical resource to be reprioritised and reallocated quickly to support practices in crisis (as defined by the Operational Pressure Escalation Levels OPEL Framework). Livi has also bolstered practice resilience when A&E pressures have created downstream capacity issues in primary care.

Maria notes, "Adjustments to ways of working, lessons learnt and moving models forward were considered and actioned, and through our strong and honest working relationships Livi also supported North Yorkshire CCG when crisis arose on the East Coast."



#### Looking to the future

Now, Livi is exploring how to tackle wider contributing factors to demand challenges with a number of NHS partners. This includes utilisation of patient messaging tools and enhanced practice websites that ease pressure on appointment queues and practice lines.

Working in combination, these solutions can create optimal digital front doors that support timely and appropriate access to care, signposting patients to the right care at the right time.

#### What North Yorkshire CCG say

"We would like to pass on our greatest gratitude to the Livi Team in supporting North Yorkshire CCG practices with the delivery of circa 11000 remote consultations as part of the Winter Access Fund delivery request. Together, we have successfully achieved our aim by improving access to primary care services."

Maria Dean Senior Service Transformation Manager, North Yorkshire CCG





# Winter access: Not just for winter?

Declan Mullaney, Livi Head of Policy and Public Affairs, explores why ongoing demand challenges point to a need for long-term support for primary care in winter and beyond.



In recent years we have grown accustomed to expect a winter season worse than the last in health and care. "This winter will be a winter like no other," goes the frequent cry.

As we look back on a summer period that has seen levels of demand in line with winter months, it is understandable that many are worried at present. We have witnessed trusts declaring black alerts and red alerts in general practice also. There have been demand spikes across the health system, at a time when the NHS usually gathers its breath over the summer months.



Covid has not gone away. The very title of the recent joint HSJ and BMJ editorial, 'The NHS is not living with Covid, it's dying from it' paints a stark picture and the statistics do not lie. It reports that in the first six and half months of this year, those who tested positive for Covid-19 averaged at over 9,000 compared with just under 6,000 in 2021 and 7,000 in 2020.

New COVID waves and successive heatwaves have made for the perfect storm. As we head into the autumn, elective waiting lists stand at 6.8 million patients. An estimated 26 million appointments were delivered in general practice in July of this year alone. And that age-old adage of a system creaking at the seams (ambulances queuing outside A&E etc), has come to fruition.

#### A system issue

With demand overwhelmingly up in primary care, it is inevitably spilling into other parts of the urgent care system. What I think this reflects is two things.



First, that access and capacity have, and always will remain, system issues. If one part of the system cannot cope, it invariably affects the other. And this is very much what we're seeing.

Similarly, acute capacity restraints are no longer confined to winter. It is no longer cyclical, it is becoming a year-round event. The continued pressures we have seen throughout the summer will likely impact efforts to reduce backlogs through the autumn and winter.



In preparation, NHS England's recently announced package of winter support for general practice, PCNs and teams includes additional funding to purchase additional workforce and increase clinical capacity to support additional appointments and access for patients. This comes alongside an ICB framework to identify where to allocate support, as well as changes to the Network Contract DES that introduce "further flexibility" into ARRS and other roles to support practice capacity.

#### The need for flexibility

I think flexibility is the key word here. Last year's Winter Access Fund provided welcome respite, helping teams increase capacity to same-day urgent care at both a general practice and PCN level. Indeed, we have heard from some of our partners that without it, they would not have been able to stay open. This is evidenced by the stories contained within this publication.



We have also heard that the ability to spread support throughout the year and plan this out over a longer period would be most welcome. After all, while winter will be hard, the rest of the year isn't much easier. In anticipating a winter season many believe will be the most challenging on record, there is a need for greater flexibility and certainty over what support will be available and how it can be used.

This summer has taught us winter pressures will not abate by March. Pressure on practice teams and physicians continues to increase. This is impacting the wellbeing of those on the frontline and compounding a workforce crisis where GPs are leaving the profession.

Capacity-boosting funding streams like winter access are desperately needed throughout the year to give providers the best chance of catching up. Long-term planning at a system level based on assessment of capabilities and capacity available on the ground are required. And to realise appointment timeframe targets, we must look at ways we can deliver more support to those tasked with providing them. After that, we may be able to face the prospect of better winters to come.



**Success Story** 

# Woosehill Medical Centre

#### Making the most of the Winter Access Fund

Woosehill Medical Centre enlisted the help of Livi via the Winter Access Fund in October 2021 to deliver telephone and video consultations to patients. The practice is part of Berkshire West Clinical Commissioning Group, serving a registered patient population of 550,000

The winter season brings additional challenges for GPs and primary care teams. Stretched capacity and rising demand for appointments means improving patient access is an enormous task for many surgeries.

One way GP surgeries like Woosehill Medical Centre have utilised the Winter Access fund is implementation of digital technology. Such solutions provide the extra appointments patients so desperately need, as well as relieving strain on practice teams.



#### Keeping up with patient demand

Woosehill's Operations Manager says, "Our patient list has grown hugely. We haven't had the capacity to deal with it. With Covid as well, patient access was becoming a problem."

Thanks to Livi, the practice can book additional appointments with experienced UK-trained and GMC registered Livi GPs. "Keeping up with patient demand is a struggle as appointments get booked up very quickly. It's nice on a Monday and Tuesday, which are our busiest days, for the team to have additional Livi appointments to offer our patients," says the practice's Reception Manager.

Livi's booking tool is easy-to-use and enables the practice to work out the right blend of face-to-face appointments and virtual consultations, so patients are seen in the right setting at the right time.



This frees up time so Woosehill physicians can conduct more in person appointments for patients who need them. While Livi doctors handle consultations that can be conducted digitally.

#### Providing a bespoke service

Livi is also tailored to the times and days when the team most need support. And what's more, functionality with a wide range of GP clinical systems has ensured a seamless integration with the practice's existing ways of working.

"A huge benefit of Livi is how it works within EMIS," says Woosehill's Reception Manager. "It's just like booking with our own doctors and we can communicate with our clinicians directly as well through EMIS. It really helps."

#### Improving patient experience

Most importantly, for Woosehill's patients, Livi provides a timely, alternative option when appointments with duty and emergency doctors are not available.

Since the service commenced in January 2022, Livi has provided over 400 additional consultations. Livi is helping to reduce waiting times with patients receiving the highest standards of service.

#### What Woosehill Medical Centre say

"Livi has made such a difference with the extra appointments. It's wonderful to be able to offer Livi and receive good feedback from patients after their remote consultation."

- Woosehill Medical Centre



Interview

# Managing winter pressures in primary care

We recently sat down with Simon Lucas, Livi UK Managing Director, to discuss pressure points facing general practice this coming winter, and possible approaches to address them.



#### Q: Where do the biggest challenges lie this winter in your opinion?

A: I think it's a given that we can expect all the pressures we've come to associate with this period. The return of flu, further covid variants and norovirus will all pose challenges. Demand surges will invariably continue this time of year. There is also the ongoing booster campaign too.

On top of this, there will be new challenges stemming from the cost-of-living crisis which has the potential to place further pressure on stretched primary care, mental health and community services. We're already hearing that people with mental health problems are nearly twice as likely as those without to say they have felt unable to cope due to the rising cost of living.

At the same time, the health system is undergoing a massive process of change. Implementing new ways of working and fostering greater collaboration will be made more challenging by the winter season. For example, working out how GP practices, and PCNs will work together with ICBs, and bringing plans for enhanced access to fruition are big operational challenges.

#### Q: Why do you think collaboration is so important?

A: CQC local system reviews have shown that where systems have joined up processes, they are better equipped to manage pressures.



We saw during the COVID-19 vaccination drive close working of PCNs and the system as a whole to deliver an unprecedented roll-out in a time of crisis. We continue to see unrelenting dedication and tireless efforts of teams coming together to provide services in the face of increasing demand every single day.

In planning for winter, the system is indeed building on this and working more collaboratively than ever before. This must continue. Managing capacity within urgent care will always be a major focus of efforts during the winter season of course, but outside of this, a system-wide approach will be essential.

#### Q: Where practices are struggling to deliver, what do you think the solution is?

A: I think we can look to some great cases of PCNs supporting practices where demand has been overwhelming.

One particular case that comes to mind involved a pan-PCN partnership working collaboratively with other local providers in the community to provide support in that very sense.

This model has delivered overflow capacity through extended access hubs, utilising ARRS roles and a community pharmacy consultation service. Out-of-hospital care is also provided with patients supported at home through virtual wards. I think once again this illustrates how primary care can come together to work within an integrated care system, and how important this will be during the winter months.

Digital clinical capacity is also an essential tool that can be mobilised at speed to manage winter pressures. Here at Livi, one of the core ways we work with partners is to plan for and anticipate surge demand based on the needs of specific populations. Through our Livi Practice model, we can provide the additional appointments required very quickly and build resilience for this challenging period.

## Q: What other tools can practices utilise to cope with demand?

A: I think communication will be all important. If we look at some of the usual challenges of the winter season – immunisations, isolation, signposting, self-care and appointment attendance etc. engaging patients with the right communication strategy is key so patients know what to expect.





The humble GP practice website has a big role in that strategy. NHS England has announced the GP Access campaign in February of next year to increase people using online access routes to contact their practice. I think that is essential. The GP practice website is one of the most important tools at a practice's disposal. When built to NHS Digital Service Manual standards, it can improve accessibility, drive online engagement and help practices cope with increasing demand. This is just one of the ways we're supporting practices at present.

Equally practice messaging platforms can also empower patients to self-care and take an active role in their health and wellbeing. We give our partners the ability to run dedicated campaigns for flu season for example, and provide content and functionality to roll it out over a health system in just a couple of clicks.

#### Q: What about capacity itself and increasing appointment numbers?

A: I think we need to look at how we can actively support both clinicians and practice teams in a more holistic way to meet targets.



We have all read stories of frontline staff receiving abuse and how demand pressures are affecting the health and wellbeing of those who care for us. I think campaigns like Rebuild General Practice and the RCGP's Fit For The Future are doing a fantastic job to highlight these issues and illustrate why and where primary care needs more support. As well as addressing capacity issues with workforce planning, supporting the health and wellbeing of the existing workforce will be just as essential for the long-term sustainability of primary care in the UK.

At the same time, where there are resource challenges, digital clinical capacity can offer the flexibility of approach that's necessary to serve same-day urgent care demand. This can help to ease pressure on teams and free up face-to-face appointments. This is how we're working to support practices, PCNs and ICSs not just during winter, but all year round.



**Success Story** 

# Bridging gaps in clinical capacity

Located in the south-west of England, this GP practice sought the support of Livi to provide additional clinical capacity at a time of crisis. With some members of the clinical team leaving general practice, there was an immediate and pressing need for clinical resource at speed.

"We contacted Livi to look at how we might get some additional GP capacity into the practice using a remote consultation model," says the surgery's GP partner. "This was actually at a time when there was quite a lot of fluctuation at the practice, so we had a gap in our GP provision."



Contracted through the Winter Access Fund, the surgery has utilised Livi to supplement and support their clinical team. Initially mobilised for a short-term, interim period, the partnership has been such a success that Livi has continued working with the surgery over the past year and a half.

#### Resilience when needed

The practice serves over 10,000 patients across a large semi-rural area, and Livi provides remote consultations where and when the team requires additional GP

"The Livi Practice model, which I think is going to be of benefit to many practices around the country, gives practices capacity when they need."

- GP partner

time. Utilising the Livi Practice model, the service has enabled the team to build resilience and also provided cover at times of sick leave.

Previously when the surgery had instances of absence, the team had struggled to fill the gap. Now, the practice can call upon a readily-available source of clinical support in Livi. This built-in resilience is something the practice has greatly appreciated as it has enabled the surgery to overcome what was a consistent obstacle previously.

The practice says, "It's useful in terms of resilience because we don't have to worry about who's going to cover. The sessions are provided by Livi. So if somebody is off sick, for example at Livi's end, then Livi will do something to solve that problem."



#### Seamless support

The team have also greatly appreciated the seamless nature of support provided by Livi. With Livi Practice, Livi clinicians and appointments are visible and integrated within the surgery's clinical and patient record system. Records, information and clinical notes are all recorded on the same system in the same way as the team would usually.

"It's seamless and Livi GPs simply task the jobs to be picked up by the same team members that we do. It's basically like having additional GPs but not onsite, just GPs working remotely for us," says the GP partner.

#### **Easing pressure on practice teams**

On a weekly basis, Livi provides the practice with five sessions a week with each session consisting of 16 appointments. In total, the service can deliver up to 320 appointments a month.

The additional capacity also makes it easier for the practice reception team to offer appointments. This has been greatly needed for some time with the practice located in an area of high demand. Typically, the reception can see double the amount of calls that similar sized practices in neighbouring areas would receive.



#### **Continued success**

The practice has highlighted the quality of clinical care provided by regular Livi doctors who patients have gotten to know as simply part of the team. Livi has also built a strong relationship with the practice by listening and responding to needs consistently with all feedback on the service actioned.

#### The practice says

"Livi gave us the immediate capacity which was quite helpful in the interim. But also after we replaced staff we kept it going because it gives us some consistent extra capacity. I think that other practices should look at Livi to help them get away from this need for locums when they're struggling with getting a regular GP. Because actually it's better than having locums by a long way."



## Conclusion

Reflecting on the success stories, analysis and opinion contained within this document points to some consistent themes.

Winter Access Funding has clearly been a welcome source of support for primary care organisations working under immense pressure. This Winter, ICBs also have access to the System Development Fund (SDF) to provide additional capacity to practices that need support. The ability to provide additional appointments through digital platforms has helped to serve rising patient demand and ease some of the pressures on practice teams.

Equally the need for agile support has been just as important. Same-day demand by its very nature can be unpredictable and hard to plan for. Here, digital has provided the required flex to meet needs at short-notice, and redeploy resource where it's needed most.

Of course, these pressures have not ended. Indeed, with the NHS experiencing what's been termed a 'Winter in Summer', there have been major spikes in demand across acute, ambulance, mental health, community and primary care services.

That demand has spilled into urgent care adding further difficulty to efforts to reduce Covid backlogs. This points to a need for great flexibility as to how funding might be applied to increase capacity throughout the year.

Clearly, winter and the months that follow will once again be a challenging time. Here at Livi, we stand ready to support NHS partners.

#### How we can help

- We deliver digital clinical capacity for primary care winter pressures supporting general practices, PCNs, NHS 111 and urgent care centres
- Our practice messaging platform, Mjog, helps GP practices to engage with patients every single day, reducing DNAs and practice communication costs
- We create practice websites built to NHS guidelines that drive online engagement, self-management and help direct patients to the right service at the right time

#### To find out more about how we can help you

Email: partnerships-uk@livi.co.uk Visit: livi.co.uk/nhs-partners

