



Frontrunners in Primary care

Showcasing examples of best practice in end of life care with findings from recent GSF Accredited GP Practices, demonstrating earlier identification of more patients, more clarifying wishes and more dying where they choose

These leading GSF Accredited practices, are examples of the best that practices can be in caring for people in their last years of life. These frontrunners demonstrate what is currently being achieved by some primary care teams in their care for patients in their last years of life, following their completion of the GSF Going for Gold Programme and GSF Accreditation, co-badged by RCGP. They are an encouragement and inspiration to others in giving the very best end of life care to their patients – **if they can do it, then you can too!**

These are grass-roots practical examples of how some practices provide top quality, proactive, person-centred care for their whole population of patients, including those with frailty, dementia and non-cancer conditions. This has an impact on the quality of life for patients and their families in their final years of life, reducing time spent in hospitals and enabling more to die where they choose. The practices' palliative care registers now more accurately reflect their wider populations (the estimated 1% of their population in the last year of life), and they attain standards in line with national policy, NHSE Ambitions, GMC, NICE Guidance and CQC Primary Care Standards. Key areas include providing:

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|-------------------------------------|--|
| 1 Proactive care | <i>early identification of more non-cancer and care homes patients</i> |
| 2 Person-centred care | <i>more patients offered advance care planning discussions about preferences</i> |
| 3 Place of death | <i>more dying in preferred place of care or usual place of residence</i> |
| 4 Reducing hospitalisation | <i>reduced hospital deaths, hospital bed days, out-of-hours crises</i> |
| 5 Providing top quality care | <i>experienced by patients and families, confidence and culture change for staff</i> |

Building on the Bronze Foundations level GSF mainstreamed through QOF, these practices completed the Next Stage GSF 'Going for Gold' programme, with GSF Accreditation, supported and endorsed by RCGP.

Examples	1. Proactive – Identification rates	2. Person-centred – ACP discussions offered	3. Place of death – dying in preferred place of care / DIUPR	4. Reducing hospitalisation, admissions, deaths	5. Quality of care – feedback
<i>Average for GSF Accredited practices</i>	Av. 75-90% register identification rates	68% offered ACP discussion	65% die where they choose	More home deaths, reducing hospital deaths and bed days	71% carers offered support (15-100%)

Note – these practices identify more patients earlier, achieving Register identification rates of about 75-90%, over double current national average of 34% (PHE Fingertips) and then use needs-based coding to prioritise. (Identification rates are calculated by numbers on the register over practice population x1%, and additionally the number of patients who died who were identified).

Examples of Frontrunning GP Practices

Abbey View Surgery, Dorset

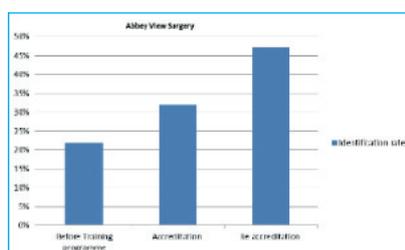
Practice name **Abbey View Surgery Dorset**
 GP Lead **Dr Damien Patterson**
 Practice Population **15,319**
 Accredited 2012 / Re accredited 2016

“The GSF training has helped to move us to a completely different place.”



Key Achievements

- Register Identification rate 54% patients
- 59% offered ACP
- 34% non-cancer and care homes residents



Identification rates of patients on register before GSF, after 1st then 2nd time accreditation 3 years on

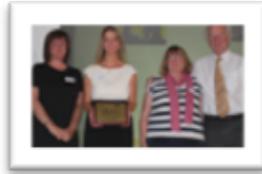
*“Before we started GSF training we noticed that many people were being sent to hospital inappropriately and were not experiencing the care they would have liked. The GSF training **has helped to move us to a completely different place.** Now patients have a genuine choice about where they would like to be cared for. And they are choosing to stay at home, in their care home or in the local hospital unit we run.” People are now confident not just that they’ll be asked what they want at the end of life, but that it will happen, so they can **die peacefully at home with their families, if that’s what they want.**”*

Macklin Street Surgery, Derbyshire

Practice name Macklin Street Surgery, Derbyshire
 GP Lead Dr Sally Giovanelli
 Practice Population 10,850
 Accredited 2015

Key Achievements

- Register Identification rates – 126%
- Identifying 51% of all patients who died
- 100% offered ACP discussions
- Home deaths (including care home) 71%
- Increased number of non-cancer patients included on the register – 59% and now 48% are residents from care homes



“It’s been a real team effort – GSF has really helped us to... and given everyone in the practice confidence... and that means everyone feels more in control.”

The impact of GSF at Macklin Street improving teamwork

Dr Sally Giovanelli, Senior Partner: *“I’ve been here for 15 years, and seen a number of my patients through to the end of their life. It is a humbling and incredibly rewarding experience and is also **one of the most important aspects of care that we provide as GPs.** Ensuring our patients have a ‘good’ death is really important to their families.*

*“It’s been a real team effort – **GSF has really helped us to have a good structure** in place and given everyone in the practice the **confidence** to initiate what can be difficult conversations with people about where and how they want to be cared for and that means everyone feels more in control.”*

Saltaire Surgery, Shipley

Practice name Saltaire Surgery, West Yorkshire
 GP Lead Dr Iain Livingstone
 Practice Population 10,760
 Accredited 2015

Key Achievements

- Identifying 70% of patients
- 56% offered ACP discussions
- More non-cancer 54% and residents from care homes 38% included on register
- Home deaths 78% (includes care home)



“The GSF training has helped us change the culture of the practice health professionals and carers have both benefited from Going for Gold.”

GSF has changed the culture of the practice

Dr Iain Livingstone says: *“With an ageing population this is becoming **an increasingly important part of our work as GPs** and so we have to ensure consistency and equality. Now, (after GSF) with better planning, communication and coordination, we have increased the number of people dying in their preferred place and significantly improved the support we provide their carers, involving them in decisions and providing them with useful resources.”*

Ilkley Moor Medical Practice

Practice name Ilkley Moor Medical Practice, West Yorkshire
 GP Lead Dr Helena Rolfe
 Practice Population 13,400
 Accredited 2015

Key Achievements

- Register identification rate 61%
- 83% offered ACP discussions
- More non-cancer 67% and residents from care homes included on register 27%
- Home deaths (includes care home) 66%

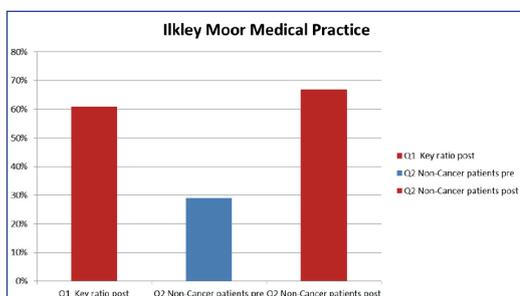


“GSF has helped us provide end of life care for a much wider patient group and reduced our hospital admissions- we’re providing better quality, cost-effective care, enabling more patients to die in their preferred place .”

GSF has helped reduce hospital admissions

Dr Helena Rolfe says: *“GSF has helped the 12 doctor team provide end of life care for a much wider patient group and reduced admissions: “Prior to doing the GSF Going for Gold programme, we had 27 patients on the GSF register, almost all of whom were cancer patients. Now we have 236 on the register, 70% of whom are non-cancer patients. And of those on the register, we’ve had advance care planning discussions with over two thirds.*

*“This has played a big part in **reducing the hospital admissions** (a major priority for the CCG) and enabled us to support more than 50% of patients to die in their preferred place – their home. So we’re providing **better quality, cost-effective care.** But the greatest benefit lies beyond the statistics for the patients, they feel a much greater **sense of reassurance**, more empowered to get in touch at any time, (including via the local Goldline) and we’ve had lots of positive feedback.”*



Cape Hill Medical Practice, Birmingham

Practice name Cape Hill Medical Practice, Birmingham
 GP Lead Dr Laura Pugh
 Practice Population 11,800
 Accredited 2016

Key Achievements

- Register Identification rate – 101%
- 44% of patients that died were identified
- 87% offered ACP discussions
- More non-cancer 93%
- 64% patients dying in their preferred place of care



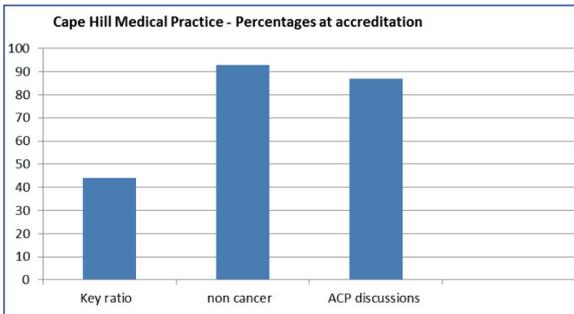
“We have all noticed a significant decrease in the number of crises and hospital admissions... and it has helped us to reach marginalised groups from our practice area that we had not been including before.”

Dr Laura Pugh says: *“GSF has provided the busy inner city practice with the means to **improve care for this vulnerable patient group**:*

*“GSF has given us the structure and tools to deliver **better, more coordinated care**, not just well intentioned care.*

“The training has helped us to reach marginalised groups as well as those who find it easy to access services. The numbers speak for themselves. Before we started the training there were 41 patients on the palliative care register. We’ve more than trebled that number, to 125. And the vast majority of those (110) have had advance care planning discussions and 118 have had their clinical symptoms assessed.

*“By putting in the work “up-front” we have all noticed a **significant decrease in the number of crises and hospital admissions**. End of life care shouldn’t be about a perceived extra workload but making sure patients are looked after appropriately. Patients are now getting a better deal because they are being given the chance at the earliest possible opportunity to share their wishes and preferences with clinicians. The whole practice team has been completely engaged in the process and the clinicians feel **happier and more confident** because they have learned a new set of skills.”*



Feedback from relative

One relative said about her mother’s care: *“When Mum really went downhill with her COPD she was really anxious- and so were we, but what we found really fantastic was the help we got from the surgery. We had the Gold number (at the practice) which meant we got through straight away and meant we didn’t have to sit and worry for ages. The opportunity to talk about what was going to happen and the choices Mum would have, made things much easier for us all.”*

Coastal Medical Group, Lancaster

Practice name Coastal Medical Group, Morecambe Bay
 GP Lead Dr Andrew Foster
 Practice Population 33,000
 Accredited 2013

Key Achievements

- Identification rate increased (9-45%) especially non-cancer (5-65%) and care homes (19-53%)
- More offered ACP
- Halving hospital death rate (35-16%)

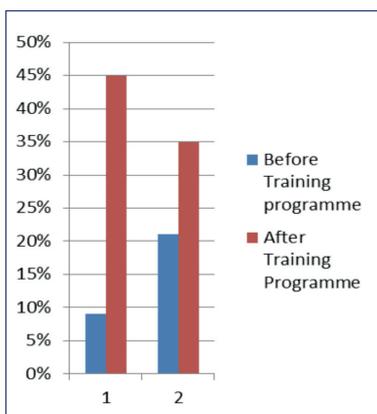


“GSF Going For Gold has changed how we care for people approaching the end of their life unrecognisably... it has had a profound effect on our care for patients with a shift in focus ...to earlier identification, forward planning and anticipatory care.”

Dr Andrew Foster says that: *“GSF has had a **transformative effect on the way the Morecambe practice caters for this growing patient group**.*

*“GSF Going for Gold has **had a profound effect on our care for patients...** with a shift in the focus of palliative care to one of **earlier identification, forward planning and anticipatory care**. We are dealing with more and more people at home satisfactorily, with better cross team working. I have not seen any area of the practice working so well as the end of life multi-disciplinary team in my practice.*

*“There is support throughout the practice to maintain this and develop it further which is all thanks to Going For Gold and accreditation. **“We can see the good it is doing for our patients and their families. It is a relatively small number of patients, but a big reward.”***



Layer Road Surgery, Essex

Practice name Layer Road Surgery, Essex
GP Lead Dr Nicola Hilton
Practice Population 6,018
Accredited March 2017

Key Achievements

- Register identification rate 95%
- 64% patients that died were identified
- 100% offered ACP discussions
- More non-cancer 70% and residents from care homes 16% included on register
- Halving number of hospital bed days
- More Patients dying in their preferred place of care 93%

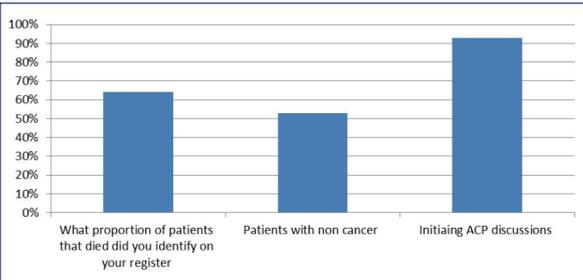


“Since completing the GSF training, we have more than halved the number of days patients spent in hospital and 93% of identified patients died in their preferred place.”

Dr Nicola Hilton says that: **“Patients, their families and all the staff at the practice are experiencing the benefits of better planned and coordinated care: “GSF has helped us be more proactive in identifying people in their final months, gain confidence in discussing their wishes and do more to support their carers. We are now working even more closely with other health professionals and this has helped 93% of patients who were on our register die in their preferred place.**

“Since completing the GSF training, we have more than halved the number of days identified patients spent in hospital.”

Caring for families – *“We identified we weren’t very good at looking after carers. We have a GP Care adviser attached to the practice and with her help have produced a carers’ guide.”*



Exmoor Medical Centre

Practice name Exmoor Medical Centre, Somerset
GP Lead Dr Kelsey Boddington
Practice Population 3,918
Accredited September 2017

Key Achievements

- Register Identification rate 180%
- 57% of patients who died identified
- 45% were offered ACP discussions
- Have a ‘gold’ register not QOF
- Gold folders given to gold patients
- Include frailty and use Electronic Frailty Index (EFI)



“GSF has provided us with a good platform to work from; everyone is on the same page from the Dr to the receptionist.”

Dr Kelsey Boddington said: *“Going for Gold has been a fantastic platform for our practice team to improve and provide a high quality standardised of care for all of our Gold Patients. We provide all of our patients with Gold Folders that include information for carers as well as advanced care planning. We are now evolving further to include frailty as an important part of our Gold Patient List using appropriate scoring systems to identify these patients. We are also in the process of developing virtual and face-to-face clinics to ensure comprehensive reviews of our frail patients as part of our work to improve advanced care planning and avoid unnecessary hospital admissions.”*

**GSF – the right care for the right patient
in the right place at the right time, everytime**

For more information on how your practice could also improve end of life care, see the GSF Nutshell on You Tube, contact The GSF Centre or see <http://www.goldstandardsframework.org.uk/primary-care-training-programme>

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