THE GOVAN SHIP PROJECT
(Social & Health Integration Partnership)

ABOUT THE PROJECT

1. AIMS
   - Adopt a person centred focus based on need and not condition or criteria
   - Develop multi-disciplinary team working and challenge embedded silo approaches
   - Identify opportunities to shift demand through better use of services
   - Create capacity for General Practitioners to increase their support for more complex patients

2. CORE COMPONENTS
   - Additional GP Capacity
   - Aligned Social Work Staff
   - Monthly MDT Meetings

3. ADDITIONAL GP CAPACITY:
   - Aligned:
     - Extended Consultations
     - Case review / planning
     - Attendance at external hearings
     - Proactive home visiting
     - GP leadership Development
     - Team building
     - Mentoring early career GPs

4. SYSTEM BENEFITS
   - Improved and better co-ordinated service provision
   - Multi-disciplinary team working
   - Shared learning
   - Horizontal accountability
   - Creating and releasing GP capacity
   - Improved workforce morale, ‘time to care’
   - Improved GP recruitment and retention

5. PEOPLE BENEFITS
   - Person focussed approach
   - Addressing the Inverse Care Law (those who most need care are least likely to seek or receive it) in a Deep End, high deprivation community
   - Proactive, not reactive, clinical management of people with complex health and social care needs
   - Improved co-ordination and shared care
   - Early intervention to avoid escalation

6. WHO BENEFITTED
   - Addressing deprivation - More people from the poorest areas
   - Addressing complex patients - Double and triple the numbers of those with multi & poly morbidity (2+ and 4+ conditions)
   - Addressing families - More Females (17-44, frequently family related)
   - Addressing Unscheduled Care - Frequent ASE visitors

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OUTPUTS AND OUTCOMES

1. PATIENT NEED ADDRESSED...

EXAMPLES

- Long term psychiatric patient - regular attendance at SHIP appointments (using additional GP capacity) helped stabilise use of medicines and led to 3rd sector referrals for further support
- Old gentleman with dementia discussed at MDT resulting in quick action by Social Work to avoid eviction and plan for sheltered accommodation
- Middle aged lady dying of cancer with young child - GP having time to support plans for dying and using MDT structure for Social Work to arrange care quickly, and without issue, reducing distress all round
- Separate and multiple concerns about a family collectively discussed at MDT by Social Work, Health Visitors and GPs resulted in notification of concern for child protection

2. THROUGH INCREASED GP CAPACITY & A MULTI DISCIPLINARY APPROACH...

SOCIAL CARE

- 42% already known to Social Work and shared approach agreed
- 6% referred to Social Work with improved quality of referral

MUSCULO SKELETAL PHYSIOTHERAPIST

- 1415 attended appointments in 9 months
- 72% given home exercise programme instead of medication (vs 12% by GPs)
- 42% didn’t need to see the GP
- Direct onward referral to specialist care:
  - 7.5% of all practice referrals for x-ray / imaging
  - 8.8% of Orthopaedic referrals

MDT PHARMACIST

- Desktop review of all SHIP MDT patients
- Met with / phoned with 27% of patients to review medicines
  - 2.64 medicines issues per patient
  - Medications stopped / changed / started
  - Potential problems avoided - such as toxicity
- Referral to other MDT members and Community Pharmacy services - avoiding the GP

3. REDUCING GP DEMAND

- Reduction in practice GP demand against comparator practices

- Previously uncontrolled demand now addressed

- Rapid reduction in home visits as a result of proactive approach

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GOVAN APPROACH TO MULTI-DISCIPLINARY TEAM WORKING

1. TEAM
- Practice GPs and nurses
- Health Visitors
- Community Nurses
- Community Psychiatric Nurses
- Social Care Workers
- Rehab Team Rep
- Community Links workers (where in practice)
- Pharmacist
- Other as important - carers, housing, physiotherapist, etc.

2. GOVAN PROCESS - DISCOVERY
1. Known to any of the services?
2. If yes, relevant information shared
3. Next steps agreed with risk shared and understood

3. ESSENTIALS FOR EFFECTIVE WORKING
- Schedule full team meetings at appropriate intervals
- Build relationships
- Establish understanding of roles, responsibilities, limitations and expectations at the start
- Autonomy retained
- Be willing to break out of silo working
- Organise to minimise bureaucracy and time burden

4. BENEFITS OF GOVAN APPROACH
- Builds relationships, communications and trust
- Broader access to expertise across health and social care
- Positive impact of staff wellbeing - team support
- Shared understanding of patient need
- Shared perception and management of risk
- Improved care co-ordination
- Improved quality of formal referrals to services

- Demand and capacity controlled
- Smallest numbers requiring highest level or ongoing MDT support
- Working to the top of the licence - beyond traditional roles
- Person Centred
- Facilitates anticipatory Care Planning
- Adaptable and responds to learning over time
- Consistent approach while flexible enough to suit individual practices

- Parity of esteem - holistic approach to mental health and physical health and social care needs

BETTER CARE

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