

26 May 2020

Systems thinking: primary care and care at home during COVID

*In 3-5 words, what in health care has been most affected during COVID (that is not COVID related)?*

**Julian Winn:** Acute and cancer care

**Niamh:** Suspected Cancers

**Margarida Eiras:** chronic diseases

**Adeline:** cancers and emergency care

**Ursula Brennan:** Cancer care, Surgery esp orthopedics

**Dawn Mahal:** ongoing health issues

**Elaine Morrison:** Cancer Services

**Colleen Murphy:** Mental Health, Cardiovascular Conditions

**Sue Goodfellow:** Our biggest cause of death in Wales in Ischaemic Heart Disease- its dropped off ?? why

**Jude:** digital first approach

**Julio Sosa:** Mental health

**Kylie Smith:** suspected cancer

**Bill Andrews:** Elective surgery

**Caroline Cochrane:** mental health services including psychological therapy and CAMHS

**Iain McDougall:** mental health appointments and patient deteriorating without f2f appts

**Andreia Cavaco:** cardiovascular

**Barbara Millar:** Elective care inc cancer services

**Aideen keaney:** elective care

**Diane Lane:** Diabetes

**Maureen Bisognano:** psychological stress and delayed primary care

**Andreia Cavaco:** mental health

**Pip Hardy:** People with aphasia

**Gillian Currie:** cancer screening, stroke, cardiology

**Ansie Prinsloo:** Elective surgery

**Joy Vamvakaris:** accessibility, inclusion and social care

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**Caroline Fee:** Mental Health

**Sandy Lewis:** Mental health, cancer, HIV

**Scot Walker:** Homelessness, Hunger, Depression, Domestic Violence, Exploitation

**Amanda Wong:** Elective Surgery, CAMHS and community rehabilitation

**Susan Hannah:** As our presenters share their work, please chat in any reflections and questions you have - we will pick these up for a Q&A following the presentations.

**Pedro Delgado @okpedrodelgado IHI:** Nice pic from the Health Improvement Alliance Europe visit pre COVID! Loads of great learning from those who visited from Denmark, Iceland, UK, Denmark, Belgium...

**Susan Hannah:** same number of contacts with the practice but communicating in very different ways.....

**Julian Winn:** That mobile hatch is a genius idea! Caren - What patient reactions have you received to telephone consultations?

**Julio Sosa:** What strategies have you implemented to communicate to your pool of patients about the new dynamics of receiving primary care?

**Katharine Goldthorpe:** Really impressed that you mobilised yourselves for improvement in the face of a crisis

**Sue Goodfellow:** Thanks Caren, pretty much mirrors our experience in South Wales- we closed doors 9th March in my practice. Have embraced video consults, but often patients not keen, so planning Pareto analysis on reasons for this next week

**Sharon:** Thank you agree very like our Scottish experience - about 50% of our practices using video calls daily - all have been facilitated to do this : IT and support but you're absolutely right - talking today about patient comma round this as patients still often feel this is second best . The Presence 5 work on making connections during these consultations is something I want to look into

**Julian Winn:** Do you think that COVID has, in some cases, made patients more resilient and able to manage their acute and chronic illnesses?

**Susan Hannah:** the Red Cross responded to the problem that arose as more GPs became unwell - volunteer Drs mobilised to N Italy to help and fill the gaps.

**Sharon:** Think they are scared to come to health facilities as they see these as places where you can catch this. They'll be more at risk at the supermarket?!

**Katie: Julian** - I think that there has been a resurgence of personal resilience possibly. there has been a propensity to create dependency in the past to an extent, and i think that people, and their families, are seeking less help, and 'getting on with it'. Good to an extent, riskier though if this is preventing people coming forward for assessment for potential cancer and other serious conditions.

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**Pedro Delgado @okpedrodelgado IHI:** @julianwinn great point. would love to hear what others think - part of me wants to think that the resilience you mention will become part of our new health system DNA (health co-responsibility), and we could offer perhaps some remote health coaching into the future to any primary care registered patients who would like to avail of it, whilst ensuring that anyone who really wants and needs care has access to either face to face or virtual care

**Katharine Goldthorpe:** I can answer from personal experience, my GP have cancelled all appointments, so I'm patiently waiting for them to open up again. Son has query asthma, am waiting for appointment with asthma nurse.

**Susan Hannah:** Red cross volunteers collected and delivered prescriptions for patients - helping people to stay at home and stay safe - food parcels also managed in this way by RC

**Julian Winn:** Sharon - Katie: I agree with you both. From my discussions I have noted that a number have patients had decided for themselves that they "weren't that ill really" or could try OTC meds (with pharmacist advice). But I feel that some will have avoided hospitals / GPs but should have had medical advice of one sort or another.

**Sue Goodfellow:** I agree self care has increased, but my hunch is this is through fear of having contact with the NHS rather than rapid change of human behaviour.

**Susan Hannah:** so many roles performed by the Red Cross in Italy to support communities - I wonder how they are gathering the learning from recent experiences?

**Julian Winn:** Sue: agree that this is the case in some cases. How many? We won't know for some time to come.

**Pip Hardy:** It will be interesting to find out how people with communication and/ or hearing impairments are accessing services reliant on phone / video. Practitioners may have to be proactive in contacting them?

**Sue Goodfellow:** Collateral damage from COVID may take years to be fully understood and evaluated.

**Julian Winn:** Susan: agree. I don't recall the RC doing this in the UK ... or has my attention been diverted and I missed this? Certainly, NHS Volunteers have helped in a similar way. But I like the organised, rapid action that being described as happening in Italy.

**Sue Goodfellow:** I'm impressed by the versatility of the Italian Red Cross during COVID, so many useful services delivered

**Julian Winn:** Sue: Agree! Very impressive.

**Susan Hannah:** I love this virtual online training provided quickly for people

**Sue Goodfellow:** I have the impression the third sector response in Italy has a degree of co-ordination that we may not have seen in UK- perhaps just more, smaller organisations stepping up here?

**Susan Hannah:** In US I think many of the local community responses have been co-ordinated by local authorities or charity organisations - from what I gather through news and media

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**Sue Goodfellow:** Thanks, really interesting to hear

**Julian Winn:** That was a great presentation!

**Katharine Goldthorpe:** Thank you, really impressive

**Katie:** great e-learning opportunities. I'm impressed with the Shielding response for food and medicines in Scotland, and the subsequent response from third sector for vulnerable groups, very early under their own volition, and laterally through the commission of LAs

**Maureen Bisognano:** Great presentations and we have so much to learn from global sharing!

**Cathy Anthony:** In the UK I had phone calls from the local political party asking if I needed anything, I am a member however.

**Lorraine McKenna:** Valerio, are you still running the psycho social helpline and if so, how long do you intend to keep it going?

**Julian Winn:** Valerio: Will the Red Cross be working with the Italian Government and Regional Officials to design new, better response systems?

**Julian Winn:** Good to hear that the RC is so involved, Valerio

**Valerio Mogini:** Lorraine, we are still running the psychosocial support so far and I don't know when we will stop it. But, the Psychosocial support is central in our activities and it is always available for our volunteers

**Julian Winn:** An excellent session. Thank you to all the presenters, facilitators, and the IHI. "Top Job" as the young people might say!

**Katharine Goldthorpe:** Thank you all (from Blackpool, Lancashire)

**Ursula Brennan:** Thank you for a brilliant session!

**Elaine Morrison:** Thank you

**Sue Goodfellow:** Thanks all- excellent presentations. Good luck and stay safe

**Andreia Cavaco:** Thank you very much, great presentations

**Angela Zambeaux:** Thanks so much, great presentations!