**The Video Group Clinic Pioneer Programme: supporting your recovery and facilitating catch up with chronic disease management**

**Introduction**

Wirral Training Hub is considering providing primary care networks (PCNs) with intensive support to pioneer the use of video group clinics (VGCs).

**Why set up VGCs? What are the benefits?**

VGCs are a transformative way of delivering planned care and supporting people to take control and manage their health issues. They work especially well for people who live with long term conditions like diabetes, COPD an asthma; conditions that account for the bulk of primary care’s chronic disease management workload and where QOF reviews are mandated. VGCs offer:

* **Significant clinician time savings.** Clinicians report that clinical reviews in VGCs take around 5 minutes per patient compared to 15-25 minutes when delivered one to one. Clinicians usually review 6-8 patients in 30 minutes, representing a 60-80% time efficiency gain[[1]](#footnote-1)
* **Quality and QOF improvement.** A GP practice that adopted group clinics as their fist point of contact for people living with diabetes saw a 18% uplift in QOF in its first year, with a further uplift in year two
* **Improved experience of care:** clinicians report that group clinics restore joy to both remote and face to face consultations. Patients report extremely high levels of satisfaction with their group clinic experiences too
* **Sustainable delivery of personalised care:** the group clinic process mirrors care and support planning because patients see their results and decide their questions before the clinician joins. Then after their consultation with the clinician, they are supported to set goals. VGCs will help you deliver the Year of Care
* **Better outcomes in diabetes:** there is Level One (randomised controlled trial) evidence that group clinics improve HbA1c and blood pressure in diabetes compared to one to one appointments [[2]](#footnote-2)

For more information about video group clinics and illustrative case studies of best practice, go to:[www.redmoorelc.co.uk/resources](http://www.redmoorelc.co.uk/resources)

We see group clinics as an essential element of primary care development. For this reason, this programme is now available to help your practice to explore the benefits of video group clinics (VGCs).

**How do VGCs work?**

To understand how VGCs work, please watch this short video. it explains how VGCs flow; how to manage risk and sets out the three key roles within VGCs. It will answer your questions about the VGC process and how it works:

https://www.youtube.com/watch?v=5Av9gBX2KwI&feature=youtu.be

**Who needs to be trained?**

Best practice in VGC spread shows that a minimum of 4 people must be trained to build a successful VGC team. The people who need to be trained include:

* **Administrators** who will be supporting VGC scheduling, patient recruitment
* **Clinicians** who will be consulting in VGC e.g. practice nurses, GOPs, clinical pharmacists
* **People who will act as VGC facilitators** e.g. health care assistants, general practice assistants, care coordinators, social prescribing link workers, health and wellbeing coaches, experienced receptionists or administrator keen to take on this new role as part of their personal and professional development

**How much time will it take?**

Like any change, in the early days it takes time to introduce new processes and prepare. If you plan this change to become a regular part of your clinic delivery model from the start, you will realise the benefits described within 3 months. Once you see clinician time-savings and the positive impact on QOF, making this change will be saving time and improving quality and QOF payments.

**Your programme support package**

We are considering providing the following support to PCNs:

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| **Support** | **Description** |
| **Practice based intensive support for one pioneer practice** | This intensive support programme will make it really easy for your pioneer practice to get going with VGCs. The package will be flexible and respond to your team’s need and includes:   * A practice level planning and co-design workshop (1 hour virtual session) * Facilitation of 3 VGCs (3 x 2.5 hours of support on three separate days) * Handover and celebration session (1 hour virtual session) * Co-creating a case study that summarises your VGC work so you can easily share it with your peers   **As soon as you register for the programme, we connect you with your VGC coach who delivers the intensive support package** |
| **VGC learning sessions** | A highly interactive 2.5 hour action learning session for those who will be delivering VGCs (clinicians, facilitators and clinic co-ordinators)  Delivered as an interactive webinar, every PCN has a specified number of training places  There is a national schedule, with training sessions at twice a month.  Your team will be able to access training over at least 12 months through a voucher system. In this way, train up your VGC team over several weeks, which will make it easier to release staff  At least 4 people in the pioneer practice need to be trained prior to your first VGC being scheduled to assure success.  The remaining places can be used within this practice or to support PCN workforce development e.g. PCN clinical pharmacist, social prescribers, care co-ordinators, health and wellbeing coaches, physicians’ associate, first contact physiotherapists. New to practice GP fellows can also be trained via this quota. |
| **Webinars to share best practice** | Every month there will be a webinar showcasing best practice in VGC, which are open to everyone in the PCN  **Book webinars at:** [**www.redmoorelc.co.uk**](http://www.redmoorelc.co.uk) |

**Registering your interest in the intensive support programme**

The Training Hub will be supporting the delivery of this by using the CPD funding so it will be free for all Practices/ PCNs.

Your next step is to register so that you can be sure of getting this support.

To register your team on the programme, please email: **wiccg.wirraleth.cpd@nhs.net** by: **28.02.2022**

1. Gandhi D, Craig G. An evaluation of the suitability, feasibility and acceptability of diabetes group consultations in Brigstock Medical Practice. Journal of Medicines Optimisation (JoMO). September 2019;5(2):39-44 [↑](#footnote-ref-1)
2. https://www.bmj.com/content/358/bmj.j4034 [↑](#footnote-ref-2)