

NAVIGATION RESOURCES FOR THE PRIMARY CARE MULTI-DISCIPLINARY TEAM

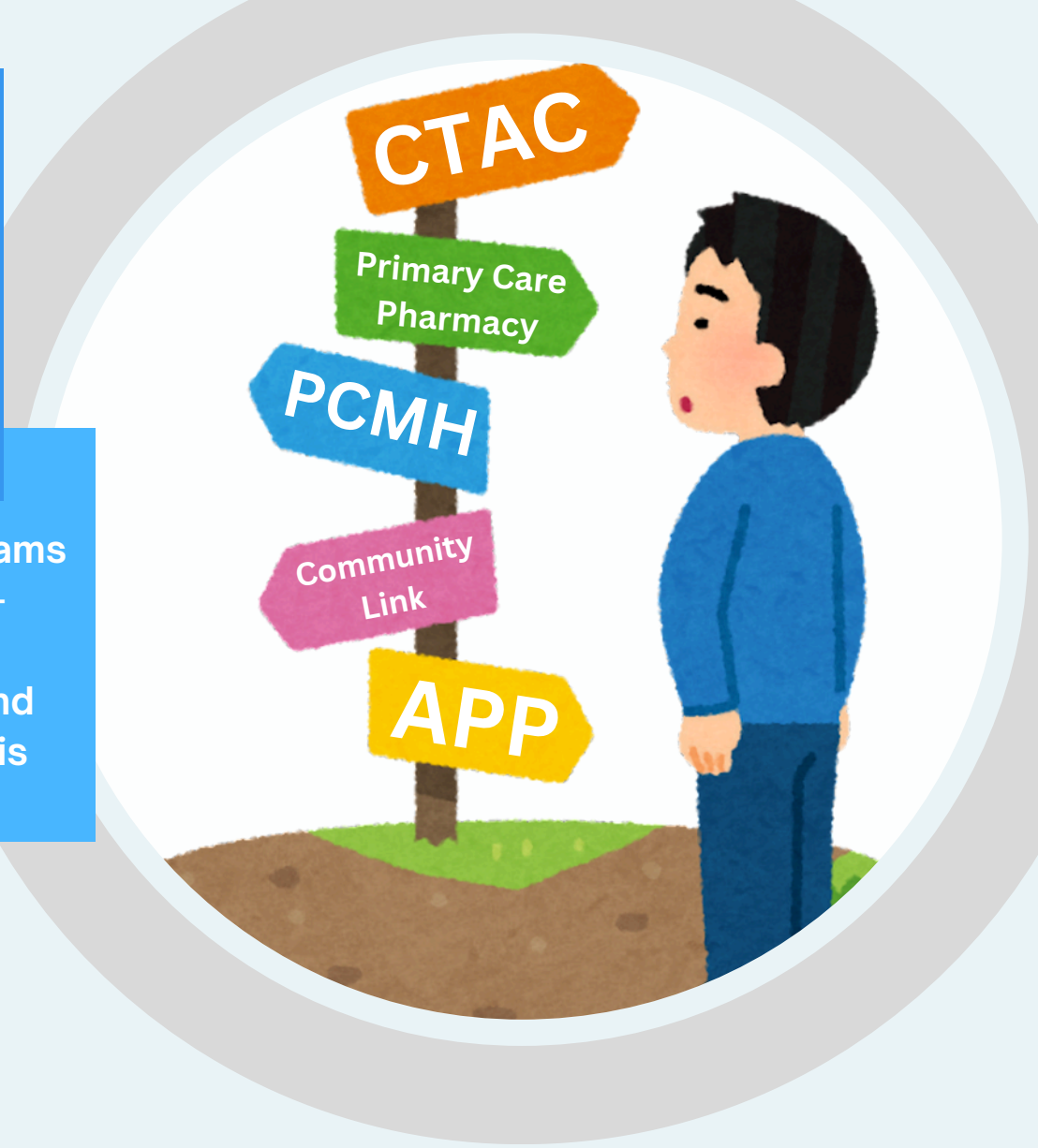
RIGHT PERSON, RIGHT PLACE, RIGHT TIME

The 2018 General Medical Services (GMS) contract introduced expanded Multidisciplinary Teams (MDTs) to support general practice and GP workload. However, the integration of new roles — such as Advanced Physiotherapy Practitioners (APP), Clinical Pharmacists, and Community Treatment & Care — presented practical challenges for frontline staff, especially reception and administrative teams responsible for care navigation. MDT leads identified this and initiated this project.

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BACKGROUND & RATIONALE

The 2018 Scottish GMS contract marked a significant shift in the delivery of primary care services, emphasising a move towards collaborative working within multidisciplinary teams.

However, implementation challenges have been highlighted through a number of forums locally and nationally, particularly around how patients are triaged and directed to these roles. Many practice teams, especially non-clinical staff such as receptionists, reported uncertainty about the scope of each role, leading to inconsistent navigation and underuse of MDT professionals.

This, in turn, contributed to avoidable GP appointments and delayed access to the most appropriate care.

OBJECTIVE

To design, implement, and evaluate a Care Navigation Toolkit with input from local MDT members, and practice staff. The toolkit aims to improve awareness, consistency, and confidence in care navigation, supporting more efficient and effective access to primary care in Dumfries & Galloway

METHODOLOGY

This project was delivered to all practices within Dumfries & Galloway. We undertook:

- Baseline Assessment - we knew there was some care navigation resources in circulation but they were service specific and had variable amounts of information.
- Toolkit Design - with input from MDT service leads, feedback from practice managers.

RESULTS



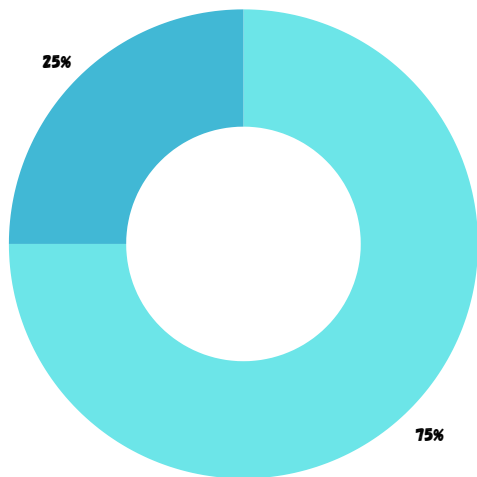
EVALUATION

We evaluated the toolkit using a Microsoft Forms questionnaire distributed to practice staff following implementation.

The survey assessed ease of use, frequency of use and perceived usefulness. Responses highlighted high satisfaction, with the majority of users finding the toolkit intuitive, relevant and supportive.

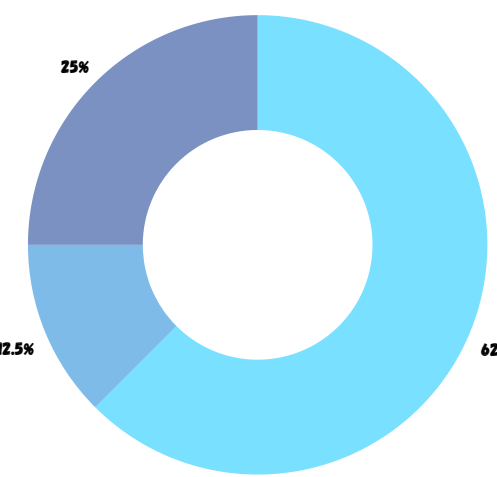
There was also useful feedback that will be used to further refine the toolkit.

Have you directed colleagues, including clinical and non clinical staff to the care navigation toolkit?



75% reported that they had directed colleagues
25% reported they had not directed colleagues

How regularly would you refer to the current MDT care navigation resource?



62.5% reported that they use the toolkit a number of times per month
25% reported that they have used it once
12.5% reported that they use it daily

Are there any improvements you would like to see in MDT Care Navigation?

“My only improvement I think would be page numbers and a contents page to help find the right page quicker”

“Space for the Surgeries to enter when we have each service on site i.e. Tuesday All day & Friday AM etc”

Not at present as it is a really good informative document.

CONCLUSION

The Care Navigation Toolkit has proven to be a valuable resource in supporting general practice teams to confidently and appropriately navigate patients within the expanded multidisciplinary team introduced by the 2018 Scottish GMS contract.

Next steps include:

- Further embedding the toolkit into staff induction and ongoing training - in practice and across multidisciplinary teams
- Regular reviews to keep content up to date - including the evaluation feedback suggestions
- Developing a patient-facing version to support informed self navigation
- Delivering team development sessions to start exploring the interconnectivity between the MDT (including practice teams) and including these pathways within the toolkit.
- Further evaluation of the impact the care navigation is having on practice team confidence, more optimal use of appointments and use of MDT professionals



Access to the digital toolkit is available via QR code (above), with verification required for access to protect internal materials