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Agenda Item: 14

Integration Joint Board

Date of Meeting: 29 October 2020.

Subject: NHS Orkney Near Me (Virtual Consulting) Update.

1. Summary

1.1. The initial roll out and use of NHS Near Me began in January 2019, with a steady increase in virtual clinics from March to September 2019 of 15 per month.

1.2. In October 2019, attention switched to Primary Care, with additional funding provided which allowed equipment to be ordered for all GP Practices in February 2020.

1.3. Roll-out accelerated in March 2020 as part of the national COVID-19 response, where uptake in Orkney was the highest in Scotland per head, with 43 active clinics providing nearly 3,000 clinics over the initial 26 weeks.

1.4. NHS Near Me technology runs through the heart of Remobilisation service planning as part of “virtual first” objective.

1.5. Local performance has led to “Test of Change” opportunities and additional funding for both Primary Care and Urgent Care services.

2. Purpose

2.1. To provide an update on the accelerated roll-out of NHS Near Me.

2.2. To highlight the linkages to Remobilisation planning.

3. Recommendations

The Integration Joint Board is invited to:

3.1. Note the information provided in this report.

4. Background

4.1. NHS Near Me is a safe and secure video calling system which allows patients to attend their appointments from the safety and comfort of their own homes. This national platform has not only been successful in reducing patient travel within Orkney but also to NHS Grampian for secondary care appointments.

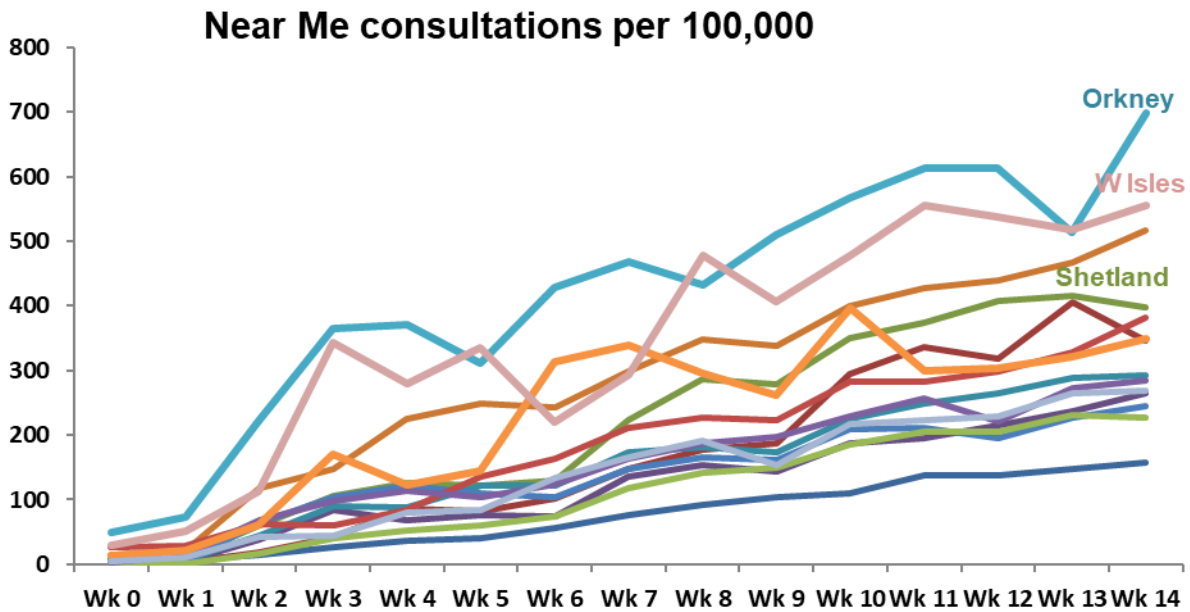
4.2. As previously reported to NHS Orkney's Finance and Performance Committee, £63K was awarded to NHS Orkney through the national Technology Enabled Care (TEC) programme up to March 2020 to support the roll out and use of the NHS Near virtual clinic platform. This funding has been used to enable dedicated project leadership to be directed towards this initiative.

4.3. An initial Travel Project Initiation Document (PID) was approved on 31 January 2019, with the initial focus being to reduce the number of unnecessary patient flights to the Scottish Mainland. The broad rule of thumb is that 1 virtual clinic appointment per day delivers £100K travel savings over the full year, with the success of this depending largely on buy-in from acute service providers at NHS Grampian. Whilst the number of virtual clinics rose steadily from March to September 2019, the numbers remained constant at around 15 per month thereafter.

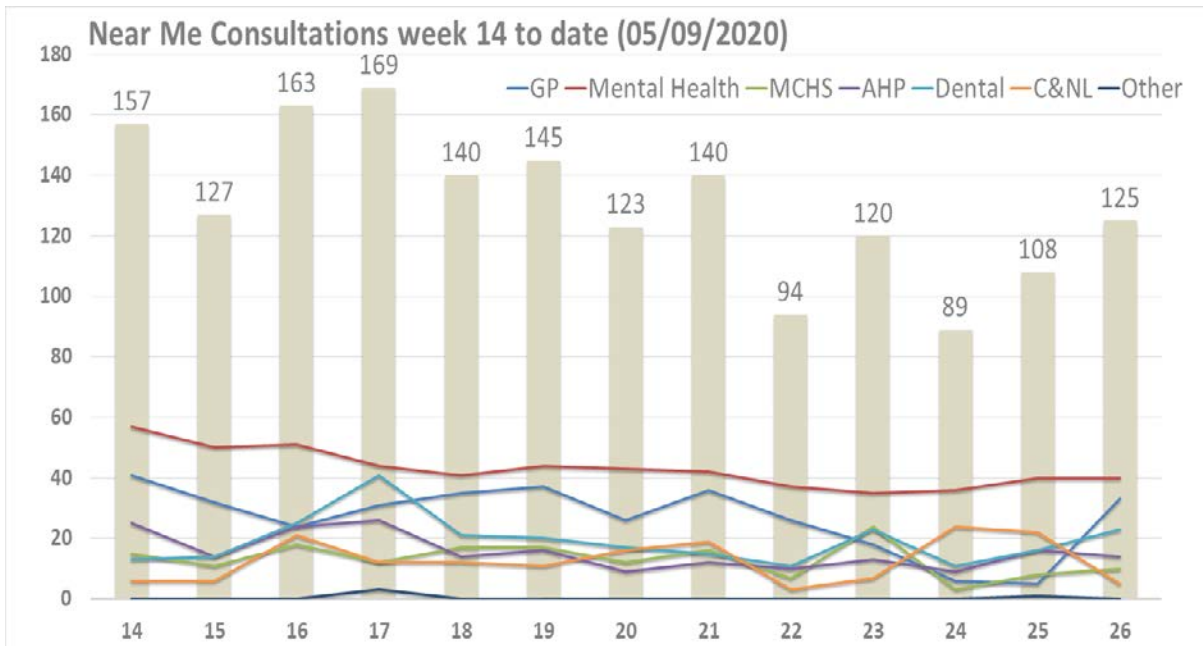
4.4. In October 2019, attention switched to Primary Care, with additional funding being provided to scope out and deliver equipment across all GP Practices in Orkney as part of delivering the Primary Care Improvement Plan. On 18 December 2019, the GP Sub-Committee approved the roll-out plan, with a scoping exercise carried out in January and equipment ordered in February 2020.

5. COVID-19 Response

5.1. On 2 March 2020, instructions were issued by National Services Scotland to support the accelerated roll-out of NHS Near Me across Primary and Secondary Care as part of the COVID-19 response. Whilst the initial focus was on enabling GP Practices, attention shifted to Mental Health Services, Allied Health Professionals and other clinical services traditionally delivered from the Balfour. Uptake compares favourably with other Boards as can be seen from the chart below covering the 14-week period from 8 March to 13 June 2020.

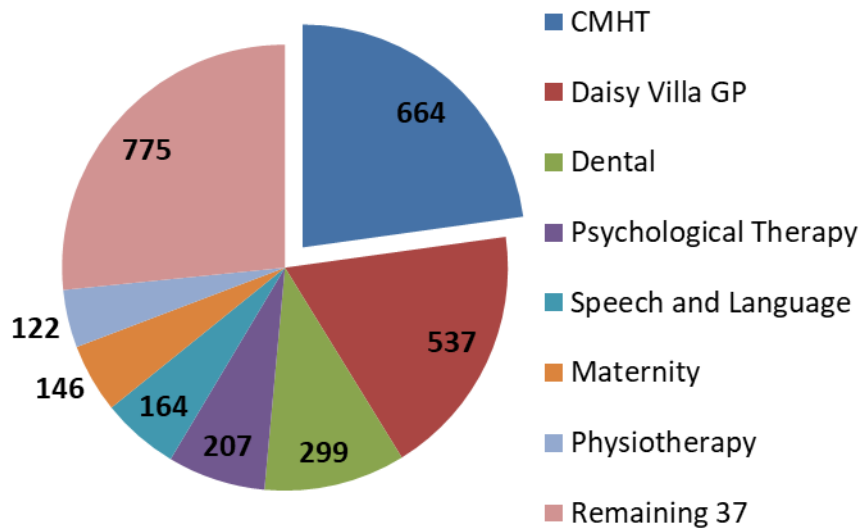


5.2. The 700 clinics per 100,000 in the above graph represents 157 individual consultations, with this peaking towards the end of June at 169. Since then, as can be seen in the chart below, the numbers have fallen as with most of the rest of Scotland. The decline can in part be attributed to local champions taking some time off, but also the fact that in some areas, patient backlogs were addressed over the initial intense few months



5.3. NHS Orkney had the advantage of having many of their virtual consulting areas already set up prior to COVID-19, with the need to then deliver rapid training, mainly by drop-in sessions over the period. To date, around 250, mainly clinical, staff have been trained by the local team, with national training videos and guidance supplementing this training. A total of 43 active clinics have delivered 2,914 virtual appointments over the 26-week period, with the Community Mental Health Team,

Daisy Villa GP Practice from St Margaret’s Hope and Dental providing more than half of this total.



5.4. NHS Near Me service delivery runs through the heart of Remobilisation, with “virtual first” being a key objective. General uptake remains encouraging, with many services committed to maintaining virtual appointments as part of their clinical toolkit now and beyond COVID-19. Mental Health Services are perhaps the best example of adoption across the entire staffing group, whilst by contrast, variation remains across GP Practices and in some other clinical specialties. National surveys for both patients and clinicians were carried out recently. Results of the survey can be found on the [SG Website](#), with the headline statement being that:

“Of 5,400 responses to the survey, 87 per cent of the public backed video consultations while 94 per cent of clinicians favoured a digital first approach.”

5.5. The success of our local response has attracted national interest and the opportunity to contribute towards national “Test of Change” projects within both Primary Care and Urgent Care. These nationally supported projects have seen additional funding being provided to better equip these services as they redesign patient pathways to realise the additional benefits of NHS Near Me. As a direct result of their higher than average virtual take-up, Daisy Villa GP Practice was invited to support the national team who developed the revised and recently published [Near Me Primary Care Guidance](#).

5.6. In addition, other digital initiatives such as remote patient monitoring are supplemented by NHS Near Me technology and again additional funding and project opportunities have been afforded to NHS Orkney through the proven success of its COVID-19 response. It is encouraging for such a small island Health Board to be involved in many of these “Tests of Change” and sees NHS Orkney well placed to take advantage of future opportunities.

6. Contribution to quality

Please indicate which of the Orkney Community Plan 2019 to 2022 visions are supported in this report adding Yes or No to the relevant area(s):

Resilience: To support and promote our strong communities.	Yes.
Enterprise: To tackle crosscutting issues such as digital connectivity, transport, housing and fuel poverty.	No.
Equality: To encourage services to provide equal opportunities for everyone.	Yes.
Fairness: To make sure socio-economic and social factors are balanced.	Yes.
Innovation: To overcome issues more effectively through partnership working.	No.
Leadership: To involve partners such as community councils, community groups, voluntary groups and individuals in the process.	Yes.
Sustainability: To make sure economic and environmental factors are balanced.	Yes.

7. Resource implications and identified source of funding

7.1. Initial funding of £63.0K was provided as part of the TEC Programme, with this funding being utilised over the period November 2018 to March 2020.

7.2. An additional £22.2K was provided to NHS Orkney from the £200K Primary Care Rural Fund to support the deployment of equipment and infrastructure to support NHS Near Me across Primary Care services.

7.3. Further additional funding of £6.9K has been provided for “Test of Change” projects. This additional funding was made available as a direct result of the local success, with many of NHS Orkney’s clinical services seen as strong early adopters and their success recognised nationally. Many of these clinical services were invited to present at national shared learning events, in addition to the local project team itself.

8. Risk and Equality assessment

8.1. A comprehensive national [Equality Impact Assessment](#) (EQIA) was carried out which assesses the potential impacts of protected characteristics, socio-economic factors, and remote and rural factors on the use of NHS Near Me video consulting. The public engagement that fed into this EQIA found both benefits and barriers for each group: this challenges some of the generalised assumptions that are made about using video consulting. The EQIA considers both national and local mitigation strategies to address barriers to accessing the service.

9. Direction Required

Please indicate if this report requires a direction to be passed to:

NHS Orkney.	No.
Orkney Islands Council.	No.
Both NHS Orkney and Orkney Islands Council.	No.

10. Escalation Required

Please indicate if this report requires escalated to:

NHS Orkney.	No.
Orkney Islands Council.	No.
Both NHS Orkney and Orkney Islands Council.	No.

11. Author

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12. Contact details

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