A guide to Productive General Practice

Who should read this guide?
Partners, practice managers and other key decision makers within practices, clinical commissioning groups, large practice groups or federations.
What is Productive General Practice?

The Productive General Practice programme is designed to help general practices continue to deliver high-quality care whilst meeting increasing levels of demand and diverse expectations.

It helps practices to put the patient, clinician and practice team at the centre of improvement to create a timely, appropriate and dependable response to patient needs. Implementing the programme will engage all staff in the practice to improve their working processes, making it possible to release time to invest in improving patient outcomes and staff wellbeing.

The programme provides a proven framework that is easy to use, practical and flexibly designed. It will enable all staff to take a fresh look at the changing needs of patients and develop services that will improve safety and reliability, patient and carer experience, staff experience and productivity.

The latest in the NHS Institute for Innovation and Improvement’s nationally and internationally renowned Productive Series, Productive General Practice has been co-designed and tested by GPs, practice managers, nurses, receptionists and patients, as well as improvement experts from industry. It was developed in partnership with NHS Scotland.

The driving vision of The Productive Series is releasing time. Making this a reality in general practice will help us offer a great service to our patients, improve the working lives of our colleagues and help boost quality whilst cutting costs for our NHS. No wonder it feels good to be part of this.

Dr Jagdeesh Dhaliwal, GP Clinical Lead, Productive General Practice
Testing has indicated that practices can harness substantial productivity gains with Productive General Practice

- Extra nursing capacity identified worth £11,232
  Test site, Consultation module

- Time taken to retrieve prescriptions requests reduced by 82%, releasing 12.5hrs of staff time per week
  Test site testing, Front of House module

- Turnaround time for medical reports reduced by 43%
  Test site, Back Office module

- 57% reduction in blood test resource costs
  Test site, Planning and Scheduling module

- 82% reduction in nurse sickness and absence
  Test site, Planning and Scheduling module

- More accurate staff planning – avoiding £15,000 of planned staff expenditure year on year
  Test site, Consultation module

- 14% reduction in stationery costs
  Test site, Back Office module

‘The nurse team feels really positive about this experience. It has made us look at lots of things differently. As a result of this piece of work, we are now looking at trying to improve the access for patients who work full time by increasing the number of early morning appointments we offer.’
Suzanne Hallworth-Manley, Nurse Practitioner, Welbeck Road Health Centre, Bolsover

‘Having data to back up the process is really important. With prescriptions, we all had an idea how long things took, but it’s not until you see it in black and white that it really hits home.’
Julie Havenhand, Reception Co-ordinator, Richmond Medical Centre, Sheffield

‘Looking at the flow of medical reports led to changes that were really life changing for me. Improvements mean I do not stay late evenings and this means I am not making mistakes because I am tired.’
Dr Angela Bradley, GP, Lisle Court Medical Centre, Leamington Spa
Why was Productive General Practice developed?

In the early stages of developing Productive General Practice, the NHS Institute surveyed GPs, practice managers, practice nurses and receptionists, to ask them what they wanted from the programme. They said they needed more time to:

- spend with complex patients
- improve the service to patients
- increase the safety of their practice
- improve team working within the practice
- take on new opportunities and responsibilities offered by the NHS reforms
- manage their increasing workload.

Productive General Practice has been built around these priorities. It is not about theory or vague soft goals; the programme provides a proven framework for you to redesign key processes that impact on patient outcomes, patient and carer experience, staff experience and value and efficiency.

With Productive General Practice practices can work systematically and at their own pace to:

- identify opportunities to improve how they work
- use data to drive improvement
- reduce waste and inefficiencies
- reduce costs
- involve their whole practice team in innovation and productivity
- plan ahead for capacity and demand
- involve their patients in service re-design.

If you were to go into any practice they would say they’ve tweaked their appointment system a hundred times, they have made changes to their skill mix to introduce nurses and whatever. Most practices will have done a lot of that, but it’s always piecemeal.

What we’re hoping is that by measuring more carefully what patients want and measuring what we offer, and then matching the two together, we can get a better outcome.

Dr Paul Cook, GP, Welbeck Road Health Centre, Bolsover
The challenging landscape for general practice...

The challenge and pressure for general practice is increasing in a number of ways.

![Graphs showing changes over time](image-url)

Just working harder and harder is unsustainable. General practices around the country are using Productive General Practice to get ahead of these pressures.
How was the programme developed?

As with all programmes in the NHS Institute’s Productive Series, Productive General Practice has been developed and tested in close partnership with clinicians, frontline staff and patients.

The NHS Institute have worked extremely closely with seventeen test sites – a mix of large, small, rural and urban general practices with varying demographics from across England and Scotland. It also sought valuable additional contributions from our Productive General Practice development partners – a group of 60 GPs, practice managers, nurses and receptionists.
How does Productive General Practice work?

General Practice is complex. It is because of this complexity that the Productive General Practice programme breaks down the task into manageable chunks called modules. The modules are like bricks in a house. Practices work through each module from the bottom of the Productive General Practice ‘house’ to the top.

Programme structure

Known as the Productive General Practice ‘house’.
There are three types of modules in the house

**Enabler:** These modules are about getting started, setting direction and collecting diagnostic data on how your practice currently runs. There is a strong interdependence between the enabler modules.

**Design:** These modules guide you through a process of how to draw conclusions, as a team, from your data and create plans for how your practice will work in the future.

**Process:** These modules are the implementation modules. They are used to put into practice the plans you created within the design modules and they are focused on key process areas (e.g., prescriptions and referrals). You can use them in the order that best suits your practice.

Do you need to use them all?

While each individual process module will deliver a benefit, the real power of Productive General Practice is realised when all of the modules have been implemented.

Whichever way you choose to implement the modules, it’s about building from the foundations so that you really understand what is happening in your practice and address the root causes first before making changes to the way you work.

*The house is an effective visual tool and helps bring people on board.*

Dr Simon Bradley, Executive Partner, Concord Medical Centre, Bristol

*I like the house format that’s used in Productive General Practice. Everything that we do involves interactions with other parts of the ‘house’. I don’t think you can do this as completely separate modules that don’t tie in together because that’s not the nature of what we are doing.*

Dr Jim Lee, GP Partner, Nethergreen Surgery, Sheffield
What time and resources do you need to commit?

Resources

Practices that get the most out of the programme are those that think that improving the way they work is part of their normal working. For example, most practices are already working to improve their prescriptions and referrals processes. Productive General Practice will provide you with a proven method for doing this in an efficient, sustainable way.

All of your staff will need to be involved in some way, although some will need to be involved before others.

Partners will need to be involved from the beginning and should meet or work together for a minimum of one hour, once every ten weeks.

A Productive General Practice working group with representatives from all staff groups will need to be involved after the first module and should meet for a minimum of one hour every four weeks.

Everyone else will be split into module teams to implement individual modules and, ideally, they will meet once a week. Find out more in the Getting Started and Making it Stick module.

“It’s been worth the extra work. It’s given me an insight into what goes on in the consulting rooms, from a clinical point of view that I wouldn’t ordinarily have been involved in. It’s interesting to find out some of the problems they encounter in clinical sessions – frustrations the staff accept, but that we can do something about.”

Richard West, Practice Manager, Nethergreen Surgery, Sheffield

Productive General Practice is designed to be implemented by your existing team and does not assume any prior knowledge of improvement tools and techniques, or project management expertise.
Time

Most practices can get into the practical implementation phase of the programme (the process modules) within three to four months. This can be achieved more quickly if the initial partners’ meetings are scheduled early (within weeks of starting the programme, rather than months).

The key to being able to move to early implementation is the ability to plan in advance the various meetings that are needed for different groups. The first meetings are often the most difficult to get into diaries, but good forward planning means that people have more time to ensure that they can be available.

The diagram on the following page illustrates a typical implementation plan developed by a practice. Remember however, that Productive General Practice is a flexible programme; it is designed so that practices work systematically but at their own pace.
Getting Started and Making it Stick
Month 1

Direction Setting Meeting
Month 2

Fornightly working group meeting

Improving Today’s Practice Workshop
Month 3

Shaping Our Future Practice Workshop
Month 4

Process modules may each take several weeks or months to implement
Month 5

Month 6

Month 7+

Getting started & Making It Stick

Knowing How We Are Doing

Improving Today’s Practice

Involving Patients in Improvement

Shaping Our Future Practice

Process modules (Sequence defined in Improving Today’s Practice and Shaping Our Future Practice)

If you started today

Month 1

Month 2

Month 3

Month 4

Month 5

Month 6

Month 7+

The upfront investment opens the door for the long term releasing of time

Current Level

Releasing Time

Productive General Practice duration

Workload
How do you access the programme?

The basic approach to accessing the Productive General Practice programme is by purchasing a licence and associated support package. The licence grants practices permission to use this groundbreaking, practice wide change programme.

By obtaining a licence you will get 12 specially commissioned and professionally designed modules, in hard copy. These provide you with detailed, step by step guidance to help you lead your practice, at a pace that suits you, to challenge and improve how your practice operates.
In addition, you will also get access to a wealth of high quality materials and resources designed specifically for general practice.

These include:
• a range of over 70 different easy to use resources. These include comprehensive, and well explained spreadsheet tools for examining demand and staffing, and for producing quantitative diagnostics of how well the practice is doing
• supporting films covering the modules
• case studies of how other practices have implemented Productive General Practice
• e-learning courses on general best practice improvement methodologies to support learning on the methods used in the programme. These cover the areas of Process Mapping, Model for Improvement (PDSA), 5S (workplace organisation) and Statistical Process Control (understanding variation).

Support packages

There are a number of different levels of support available. You can purchase the support package most relevant to your practice’s needs. To find out more visit www.institute.nhs.uk/productivegeneralpractice, where you can download a copy of the Access to the programme and additional support guide and also find details of who to contact in your region to help you get started with Productive General Practice.
The Productive Series from the NHS Institute for Innovation and Improvement enables NHS organisations to improve productivity, efficiency and quality, whilst at the same time make significant savings. The series has developed a reputation for empowering front line teams in a variety of healthcare settings to improve the way they work and the care they deliver.

Programmes from the series have been adopted in America, Australia, New Zealand and various parts of Europe.

**The Productive Ward**
*Releasing time to care*

The Productive Ward can increase direct patient care time by up to 40%.

**The Productive Mental Health Ward**
*Releasing time to care*

The Productive Mental Health Ward can increase direct patient care time by up to 40% and increase therapeutic engagement with patients.

**The Productive Community Hospital**
*Releasing time to care*

The Productive Community Hospital can reduce the average time from first contact to receipt of referral by 3.3 days in day hospitals.

**The Productive Leader**
*Releasing time to lead*

The Productive Leader can help staff free up between 40 and 46 days per year.

**The Productive Operating Theatre**
*Building teams for safer care*

Successful implementation of The Productive Operating Theatre can provide an average trust with an improvement opportunity of over £7million.

**Productive Community Services**
*Releasing time to care*

Productive Community Services can increase team visits by up to 25%.
What are the next steps?

- To find out more about the programme, visit: www.institute.nhs.uk/productivegeneralpractice to read case studies from practices who are already implementing Productive General Practice, and to watch a short film introducing the programme and the modules. Here you will also find details of who to contact in your region to help you get started with the programme.

- Contact the Productive General Practice team at: productivegeneralpractice@institute.nhs.uk if you have any general enquiries.
The Productive General Practice programme has been developed in partnership with:

NHS
SCOTLAND

For product enquiries and queries:
Telephone: 0800 555 550
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Visit www.institute.nhs.uk to find out about our full range of products and services.