

# Achieving Realistic Medicine using personalised care and support planning for people with long-term conditions in NHS Shetland, applying the House of Care approach

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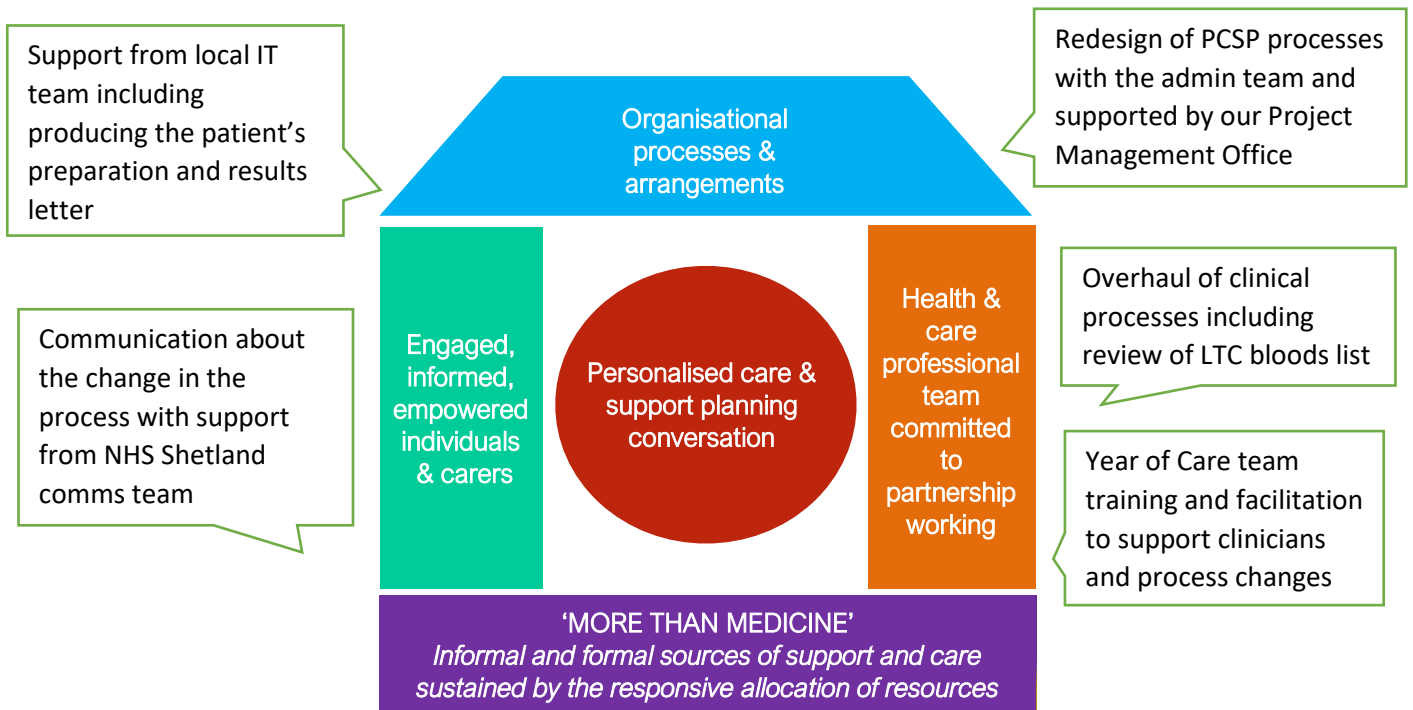


Population health via long-term condition management is a core part of the work of general practice, however the use of the Quality and Outcomes Framework (QOF) in Scotland ended in 2016 resulting in the need to find an alternative framework for long-term condition management. This led the GP cluster and primary care leaders across NHS Shetland to the Year of Care Partnership's 'House of Care' model.

The House of Care is a metaphor as well as a checklist for the building blocks of high quality, personalised care emphasising the importance and interdependence of each element. It offers a systematic review process for people with long-term conditions called personalised care and support planning (PCSP) which is focussed on creating the opportunity for a more meaningful conversation between the person with long-term conditions and a care professional, enabled by preparation.

In the House of Care model, a person is invited to an information gathering appointment with the healthcare assistant at which they have bloods and other tests and checks done. They are then sent a letter informing them of their results, framing them in the context of a normal range, and explaining why this parameter is important for their health. They are invited to make notes on the letter, highlight what is important to them and are given information on local self-management resources if they want to consider any behaviour change. The person has time to absorb this information and 'prepare' before they are invited to the PCSP conversation appointment, which is usually with a practice nurse. The clinician and patient can now come to this conversation as joint equals and experts.

Our aim is that all eight managed practices in Shetland will be using House of Care by the end of 2023, and Scalloway Health Centre on the mainland of Shetland was the first practice to undergo training and implement the model in 2021. We were supported by Year of Care who helped us work out what to do which included some of the activities around the House below.



We are almost a year on now from implementing House of Care in Scalloway and the feedback from patients is very complimentary. The whole practice has worked together on this project and we are proud of having come together to improve and innovate, making patient-centredness the core of our long-term condition offer.