


Event Summary

Community Treatment and Care (CTAC) Network Session – Developing CTAC Services

23 June 2022

 his.pcpteam@nhs.scot

 [@SPSP_PC](https://twitter.com/SPSP_PC)

Aim

The aim of this session was to discuss key topics of interest, sharing reflections and learning and develop the ways of working for the network.

Agenda

The agenda for this session was shaped using a discussion topic identified in session three and building on the draft network driver diagram. As well as building on previous discussions in relation to the overall function and set up of the network to make sure we have a shared understanding of our purpose and we make the most of the resources available to share learning and spread improvements across Scotland.

Who attended

30 participants from across 11 NHS boards and colleagues from the Scottish Government attended including:

- Charge Nurses
- Community Nursing Manager/Leads
- Consultant
- CTAC Team Leads
- Practice Manager
- Practice Nurse
- Primary Care Project Managers
- Primary Care Nurses
- Team Leaders
- Treatment Room Nurse



Network members

Network membership has increased from 88 to 94 since the last networking session in May 2022, now representing 14 territorial health boards.

The network sessions creates opportunities to share experiences from across the country, giving the sessions value in the national context.

If you know anyone who would be interested in joining our network, they can register their interest with the team at his.pcpteam@nhs.scot.

Group Discussion

This discussion session was shaped using a topic identified in session three by a network member and was presented to the network.



Discussion point: *How are people managing the situation where they have to pass work back to GPs due to e.g., absence or demand exceeding capacity?*

The group agreed that this is a **common challenge** experienced across CTAC services. It was highlighted that the tasks that are generally passed back to the GP practice are within **rescheduling/reappointing**. Some CTAC services have developed and are testing the following solutions:

- Providing **cross cover** within GP Cluster areas, this is **challenging** where there is a wide **geographical spread**
- Having **resilience** built into the workforce to enable response to fluctuating demand
- Using Hub model of delivery
- Local agreements with **community nursing** to support demand for example, dressings
- **Emergency** appointments slots

Key Questions:

- How can the volume of this be quantified to understand the scope of the issue?
- What work is routine and can be rescheduled and what needs to be responded to?
- What additional activity is happening within a CTAC appointment not factored into the time allocated?
- What hidden activity is not factored into service design, for example travel time, co-ordination with timetable for samples to be taken to lab, reading through patient records?

Group Discussion

During the second group session members discussed the revised [draft driver diagram](#), focussing on the primary and secondary drivers, considering possible priority areas.

From this discussion, we have made significant changes to the layout of the [driver diagram](#). In this revised format, we have identified high level themes as key areas of focus to design, deliver and evaluate CTAC services locally, engaging with key stakeholders. The secondary drivers were identified by theming the previous driver diagram.

We hope this driver diagram can be used as a guiding document for local CTAC services – this can be adapted to suit local context and appropriate change ideas can be added based on local needs.

We are planning to use this [driver diagram](#) to inform future network sessions to share how teams have addressed some of the primary drivers in their local services, linking with tools and resources to share with the network.

We are hoping to finalise the [driver diagram](#) at the next network meeting so would be grateful for any comments or suggestions on changes needed.

Interactive Session

The group discussed how the vision depicted by the [driver diagram](#) can be brought to life, linking to:

- the purpose
- outcomes, and
- ways of working of the network.

A jamboard was used to capture feedback and will be used to develop a [terms of reference](#). This will be shared on the network's teams channel and will be used to guide the future work of the network.

Feedback

“ Thank you for my 1st meeting, found it very motivating and reassuring.”

“ Thank you for an excellent networking session. I look forward to the next one.”

“ Good to see the network evolving and growing with great contributions...so helpful.”

“ The entire session went very well. It was well organised, interactive and met my.”

Next Steps

We would like to thank all participants for attending the network session and for your valued contributions. Below we outline some of the upcoming activities planned for the CTAC Network and outline how you can get involved and support this valuable work.



HIS CTAC Network MS Teams channel

The [HIS CTAC Network Microsoft Teams](#) channel and sub channels have seen increased activity in between sessions.



Developing our draft driver diagram

The draft driver diagram is saved [here](#) on the HIS CTAC Network MS Teams Channel. Members can continue to contribute suggestions/comments to the document and use the channel to prompt discussion around these.



Do you have something to share with the network?

If you would like to share your experiences and learning from testing new ways of working in relation to any of the change ideas please link with the team at his.pcpteam@nhs.scot to discuss this.



The next session

The next network session is scheduled for **Wednesday 7 September 2022 at 9.30am-11:30am**, a calendar invite will be sent out.

We look forward to continuing working with you collaboratively to take forward the CTAC Network.

Keep in touch

✉ his.pcpteam@nhs.scot

🌐 ihub.scot/primary-care

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