Bristol Clinical Commissioning Group
Nurse-led chronic disease model – dementia care in primary care

Bristol Clinical Commissioning Group (CCG) is rolling out a new approach for memory assessment in the city. Stakeholder engagement with staff, patients and carers recognised some of the benefits of their secondary-care based memory assessment service, but also showed demand for GP-centred care delivering increased access to a more timely diagnosis, better continuity of care and person-centred treatment reviews.

Many GPs were positive about the possibilities of taking on a central role in the diagnosis and management of the more routine and typical cases of dementia, along the lines of their roles in co-ordinating and reviewing the care of people with other long term conditions such as diabetes and COPD. However they recognised that they needed to improve their skills in diagnosing, treating and supporting people with dementia, as this role had increasingly been moved to specialist services. Bristol CCG has also recognised that there will need to be some shift in resources to enable GP practices to deliver this enhanced role.

Bristol CCG is aiming to move towards a nurse-led chronic disease model. Dementia-specialist nurses from the secondary care memory assessment service are now based in primary care, supporting GPs as they regain skills in managing dementia. Over time, it is hoped that practice nurses will be trained to review their patients with dementia and manage the practice register. Each GP practice will have a dementia lead who will support other clinical staff within their practice. The leads will themselves have locality based and responsive memory nurses and consultants available for prompt advice or referral for more complex cases.

The new model is being piloted and is subject to a vigorous evaluation. So far, early indications from the pilot suggest that GPs are feeling increasingly empowered to provide good continuity of care for people with dementia. Patients are now able to have their dementia diagnosed and managed closer to home and the GP-led approach enables more holistic care around their other medical and social needs. Importantly, the new care pathway has been a co-creation with social care colleagues from day one. Consequently, practice-based dementia nurses and GPs are now better placed to gain prompt support for their patients.

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October 2012