In at the Deep End: Our research-practice collaboration to support primary care practices serving communities experiencing severe socioeconomic disadvantage across the North East and North Cumbria.

Sarah Sowden, Jayne Jeffries, Angela Wearn and Amber Sacre on behalf of the NENC Deep End Research team

Population Health Sciences Institute, Newcastle University www.deependnenc.org @deependNENC sarah.sowden@ncl.ac.uk @SarahLSowden











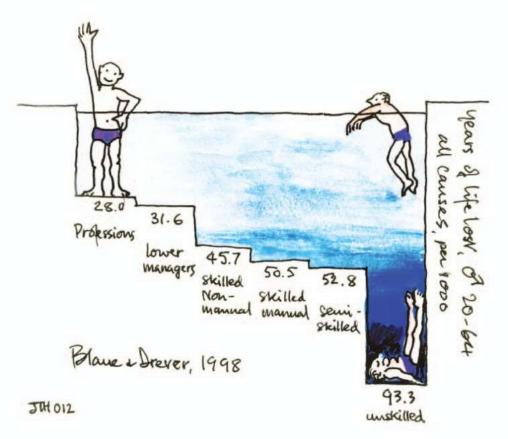






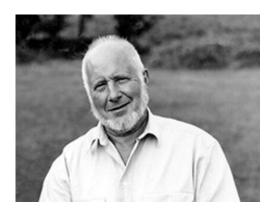


The Inverse Care Law



"The availability of good medical care tends to vary inversely with the need for it in the population served."

Julian Tudor-Hart 1927-2018



Blane D, Drever F. Inequality among men in standardised years of potential life lost, 1970–93. British Medical Journal. 1998;317:255.



Figure 1: Trends in GP practice payments per patient by neighbourhood deprivation

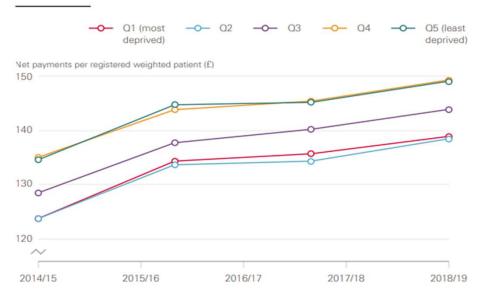
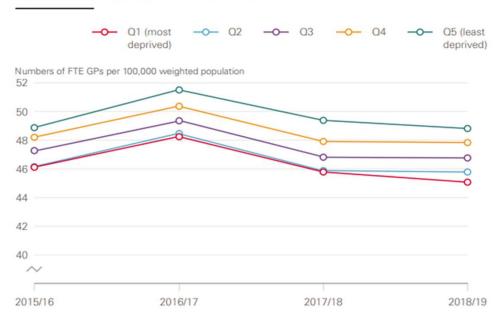


Figure 4: Trends in GP supply per 100,000 population by neighbourhood deprivation in England, 2015/16 to 2018/19



Tackling the inverse care law

Tackling the inverse care law - The Health Foundation

Deep End General Practice Networks

The Deep End movement started in Glasgow over a decade ago, bringing together GPs serving the most deprived communities to share learning and ideas, and to address the Inverse Care Law

Aim to change the way primary care is delivered and advocate for wider systemic change in healthcare funding









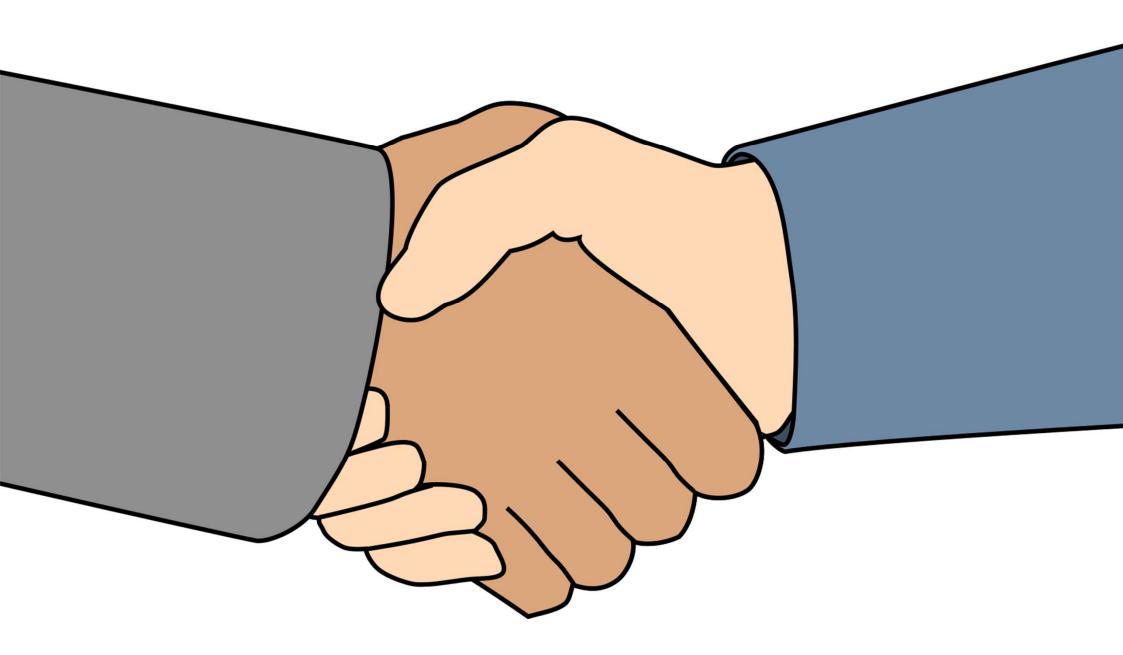












Network Co-Design Research aims





Generate an in depth understanding of the challenges of delivering primary care in areas of severe socioeconomic deprivation, including experiences through the Covid-19 pandemic

Co-create with primary care practitioners a Deep End network for the North East and North Cumbria region to ensure it serves their needs.



















"The legacy of this, the unemployment, the deprivation, that's just going to get worse for patients because as with all of these things, our communities will be the hardest hit going forward...They're not going to bounce back ...in the way that other areas may be able to."

General practitioner working in a Deep End practice in North East & Cumbria

Norman, C.; Wildman, J.M.; Sowden, S. COVID-19 at the Deep End: A Qualitative Interview Study of Primary Care Staff Working in the Most Deprived Areas of England during the COVID-19 Pandemic.

Int.J. Environ. Res. Public Health 2021, 18, 8689.DOI: <u>ijerph18168689</u>









Volume of complex patient need

Mental health was a huge issue

Recruitment and retention challenges Wider healthcare system fails to recognise challenges

Josephine M Wildman, Sarah Sowden & Claire Norman (2023) "A change in the narrative, a change in consensus": the role of Deep End networks in supporting primary care practitioners serving areas of blanket socioeconomic deprivation, Critical Public Health, DOI: 10.1080/09581596.2023.2205569











I never realised that we were a 'Deep End' practice. I mean, I knew I worked in a deprived area, and I knew there were challenges that came with that, but also just a recognition...kind of giving you an extra bit of your identity, which I think is really helpful already.

A little ray of hope that something might change

The benefits [of a Deep End Network] will be a change in narrative and a change in consensus around how important it is to consider the inverse care law and the inequalities gradient in everything that we do.

Josephine M Wildman, Sarah Sowden & Claire Norman (2023) "A change in the narrative, a change in consensus": the role of Deep End networks in supporting primary care practitioners serving areas of blanket socioeconomic deprivation, Critical Public Health, DOI: 10.1080/09581596.2023.2205569









Research impact

Providing supportive community for practices working in the Deep End through a series of webinars "by the Deep End for the Deep End" <u>Events Archive - GPs at the Deep End NENC GPs</u> at the <u>Deep End NENC</u> and newsletters

Research led to the creation of pilot projects focused on addressing key challenges identified through the ARC co-design activity including:

- Embedded clinical psychology teams in Deep End primary care <u>Making a difference</u> to mental health care in areas of blanket deprivation ARC (nihr.ac.uk)
- Opioid prescribing reduction <u>Projects GPs at the Deep End NENC GPs at the Deep End NENC</u>
- Immunisations 'catch up' in Deep End Primary Care
- Embedding social determinants of health/link workers in Deep End primary care
- For more information about our research projects and team visit https://deependnenc.org/research/









MINDED

Evaluating the piloting of new models of mental health primary care in the Deep End: embedding in-house clinical psychology teams







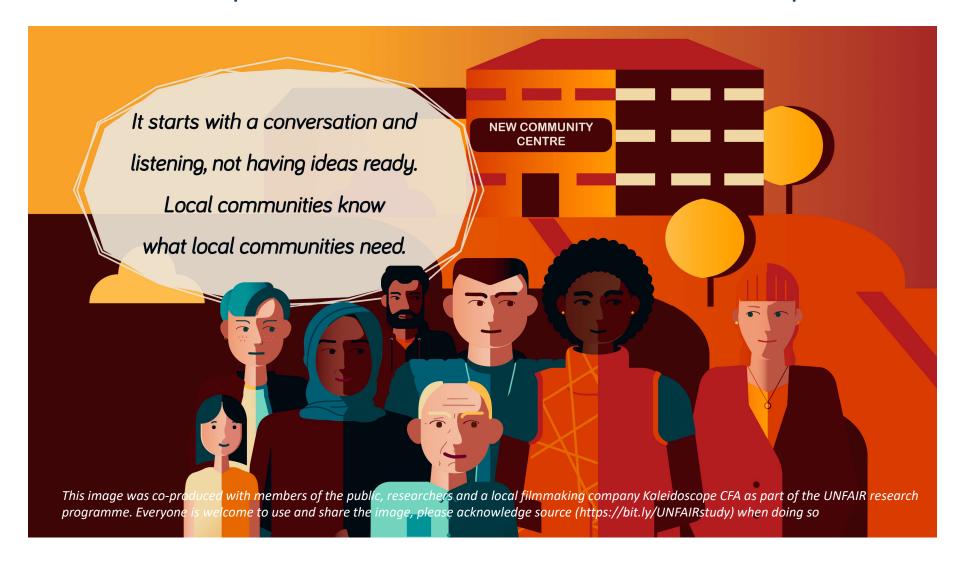






Deep End Childhood Immunisation 'catch up' pilot research

Patient and public involvement in the Deep End



Patient and public involvement in the NENC Deep End

'By the Deep End, for the Deep End'

- Aim to embed the voice of Deep End patients across all of our activity and increase partnership working to:
 - strengthen the relevance what we do
 - ensure patient experience is accurately represented
 - support our intentions to increase diversity within research participation.
- Multi-faceted approach
 - Deep End practices/PPG members
 - VCSE organisations
 - Offering a mix of informal and longer term opportunities for involvement
- For more information visit https://deependnenc.org/research/patient-and-public-involvement/









Thank you Research team, research participants and NENC Deep End network

Find out more:

https://deependnenc.org/ @deep

@deependNENC

https://arc-nenc.nihr.ac.uk/

sarah.sowden@ncl.ac.uk

@SarahLSowden







