

Healthier place
Healthier people
Healthier futures

Wolverhampton Health Scrutiny Panel

October 2021

Primary Care Access



Dudley | Sandwell | Walsall | West Birmingham | Wolverhampton

www.blackcountryandwestbirmccg.nhs.uk

Coming out of lockdown

- Anxiety to contact the GP during the pandemic/lock down
- Not responded to symptoms/changes in their condition
- Physical and mental health consequences of isolation

- Concerns raised by the public in accessing primary care
- Activity across all services/all systems significantly increased

Additional pressures

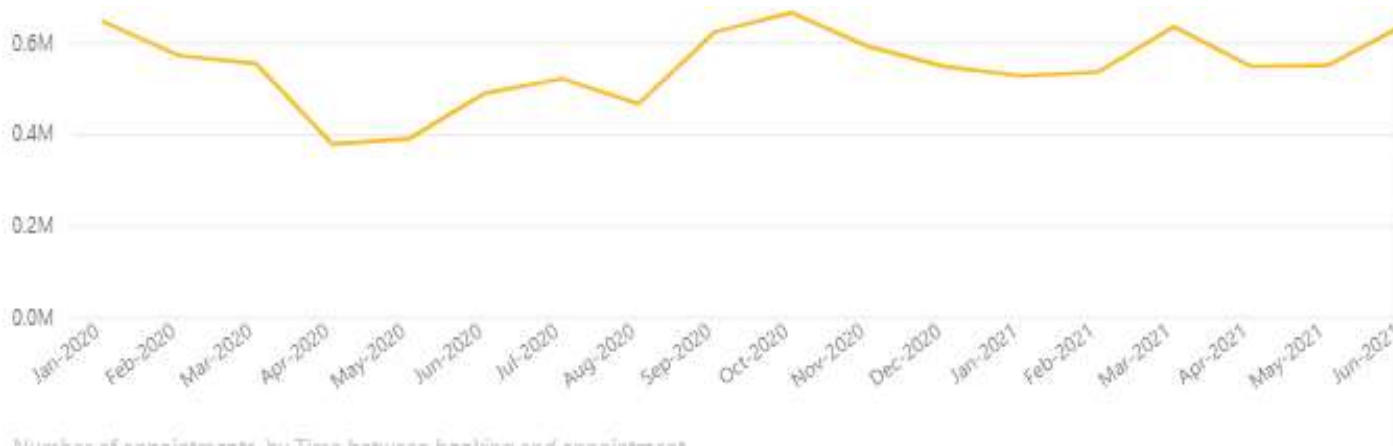
- Delivering the vaccine programme
- Managing sickness and isolation of staff
- Review/amended operational processes – blend telephone and face to face



Restoration of primary care

National picture – appointments returned to pre-COVID levels
Replicated in BCWB CCG

- January 2020 – approx. 645k
- June 2021 – approx. 636k



Face to face appointments

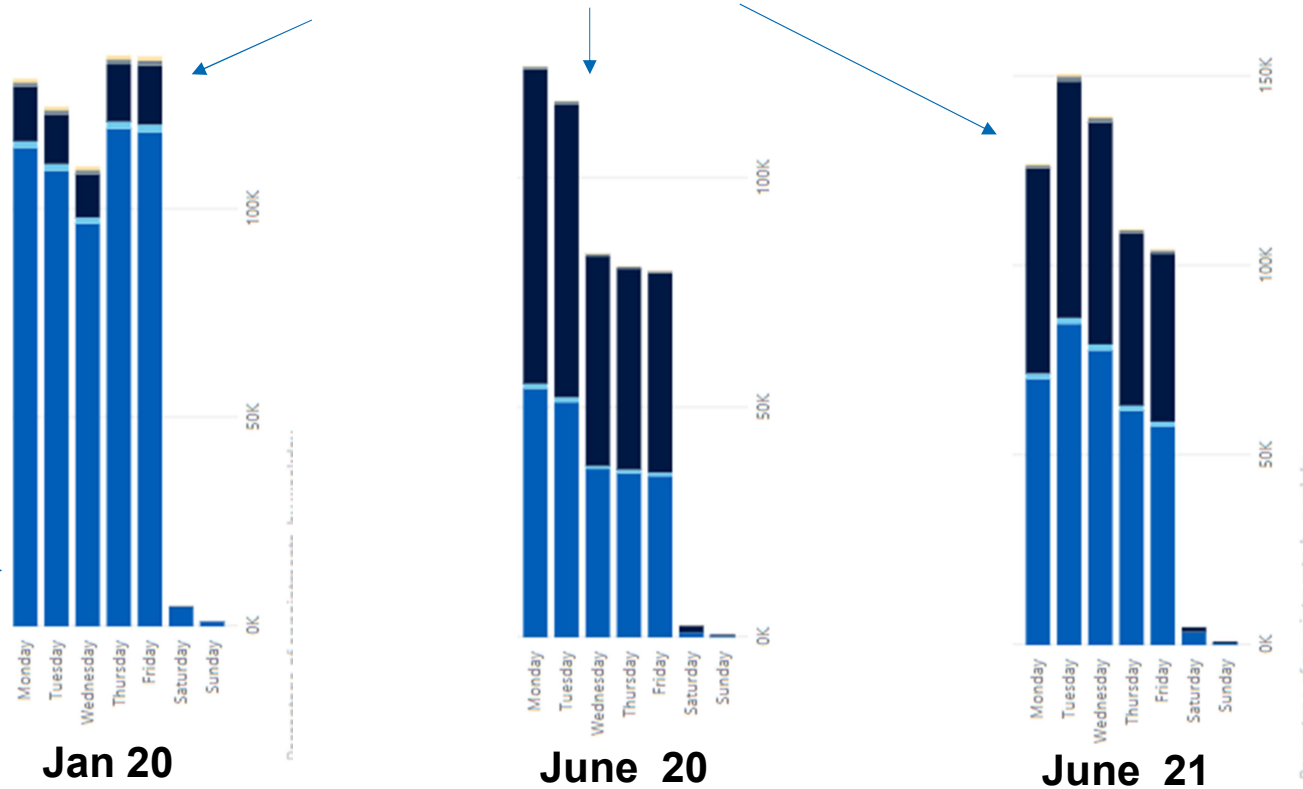
Implementation of telephone triage

Practices now working to dovetail triage with increasing face to face appointments.

Proportion of face to face continues to increase

Face to face appointments →

Telephone appointments →



Changing complexity

March 2021 – National LMC snapshot survey

- 69% patients are complex
- Over 50% of GPs advised of increasing consultation times
- An average of 37 patients a day (increased from 28)

- Changing expectations from the public



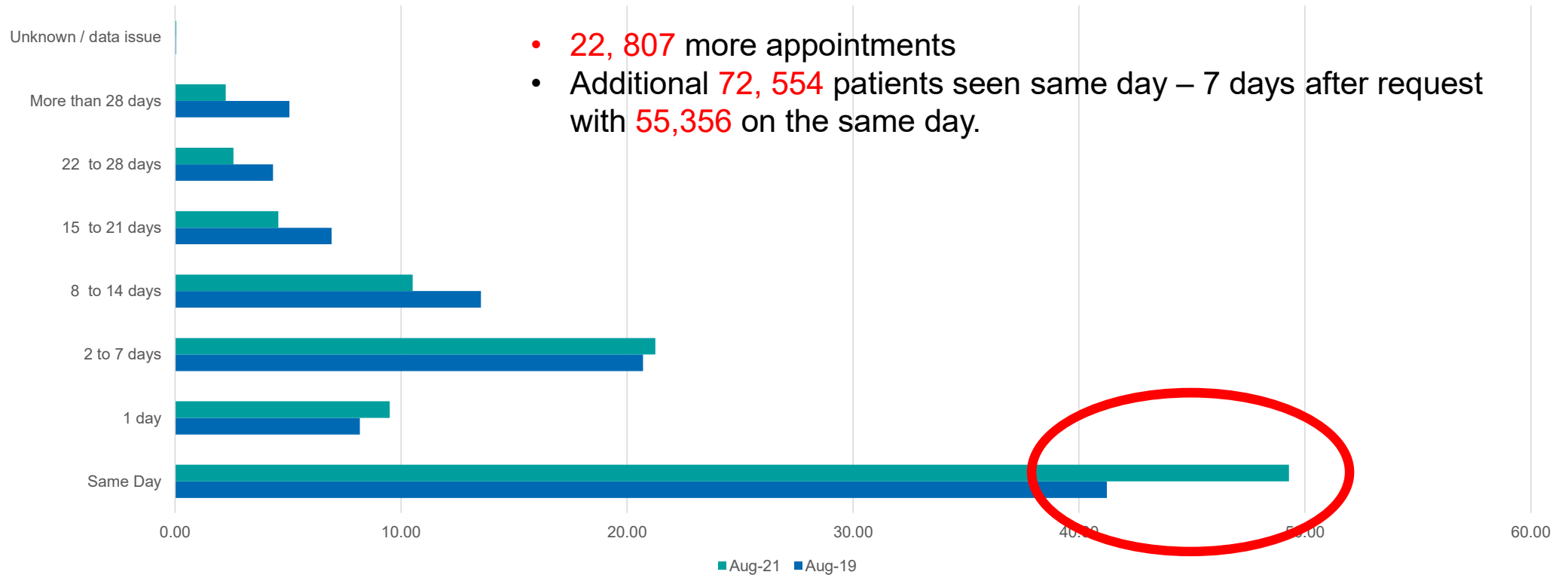
Call volumes to General Practice

- At Dr Reehana's practice, Health and Beyond Group, call volumes were up 165% in June, 80% in July and 30% in August, compared to the same months last year.



National appointment data - BCWB position August 2019 compared to August 2021

Chart Title



Early work - enhancing our local knowledge

Complements local intelligence/feedback from patients and the public

Provide information to aid the development of local plans/signpost practices

Three core areas of intelligence :-

- a) Snap shot review
- b) Dashboard development
- c) Review of General Practice Satisfaction Surveys (pre and post COVID)



Assessment of views from Jan – March 2020 and 2021

The standards compared are:-

- Find it easy to get through the surgery by telephone
- were satisfied with the type of appointment offered last time they tried
- describe their overall experience of making an appointment as good
- helpfulness of the receptionist
- How often speak or see preferred GP

Areas of high achievement - can be used as best practice

Areas of change - suggests challenges to respond to demand

NB/ the 2021 survey was completed at the height of the vaccination programme



Approach

Four areas of work

Underpinned and driven by co-production

Co-ordination of all work on access at both place and at system level

Local
improvement
plans

Consolidate
national must
dos

Centralised
oversight of all
system wide
programmes

New emerging
projects

Co-production with patients and clinicians as equal partners



Local Improvement Planning

- Shared feedback from snapshot audit with place commissioning board
- Identify quick wins
- Place teams developing local approach to plans at practice, PCN and place level based on local discussions and agreements
- Co-production at all levels
- Restoration and recovery plans
- Resources - £100k/engagement and access officers
- Practice resilience resource



Access and engagement resource (£252k)

Experienced Led Commissioning™

- Strong evidence base
- Co-production (patients, their carers, clinicians and practice staff)
- Define core outcome/aim and scope to focus work (what we can - and what we can't do)

Empowering/Enabling Patients

- Patient champions for access
- Key messages toolkit/briefing and support
- Myth busters – alternative options
- Patient Leadership Development Programme



Access and engagement resource

Supporting Practices/PCNs

- Working Together: A guide to involving patients, carers and their communities in general practice/PCNs
- Developing strong and inclusive PPGs
- Practice support to train and support staff to implement guide
- Asset Mapping social support systems/networks/orgs link to Social Prescribers

Voluntary, Community and Faith Based Sector – Trusted Voices

- Working with VCSE organisations as trusted voices in their communities to engage and support access improvement for vulnerable individuals/communities from the protected characteristic groups



System planning

- Maximise the opportunity of national priorities
 - On line/ video consultations
 - GP Connect – linking 111 to practice appointments
 - Community Pharmacy Consultation Scheme
- Digital opportunities
- Inequalities
- Communication



Communications



Raising awareness

of the MDTs that now make up General Practice (the different roles and what each does) Also promoting workforce & recruitment opportunities)



Informing

people on how to access help in different ways (i.e. without having to 'ring' your practice: GP online, NHS 111 appointments, pharmacy, NHSApp etc)



Encouraging/confidence

building for people to take ownership and make decisions about the care they need (self care & referral) i.e. seeing a GP isn't always the best option – First Contact Physio, IAPT (MH access), Social Prescribers, Pharmacist.



Zero Tolerance

approach to aggression, abuse, violence, vexatious or anti-social behaviour towards primary care staff. Encourage patients to give feedback a constructive and mutually respectful way.



Summary

- Request support of HOSC to enable co-production/links with user and community groups
- Offer councillors the opportunity to shadow GPs to gain an insight into the changes in practices
- Place teams working to co-produce plans
- Longer term plans to transform the delivery of primary care



Thank you – any questions?

