

# **General Practice in Derbyshire**

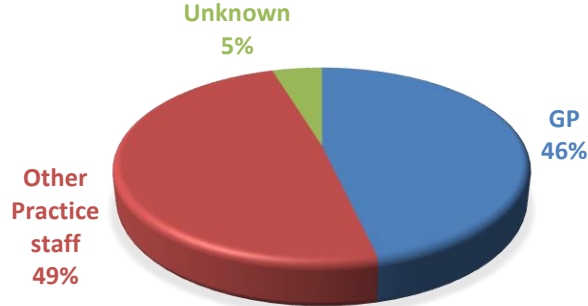
**With a Focus on Derby City  
Practices**

# Derby City Access Overview

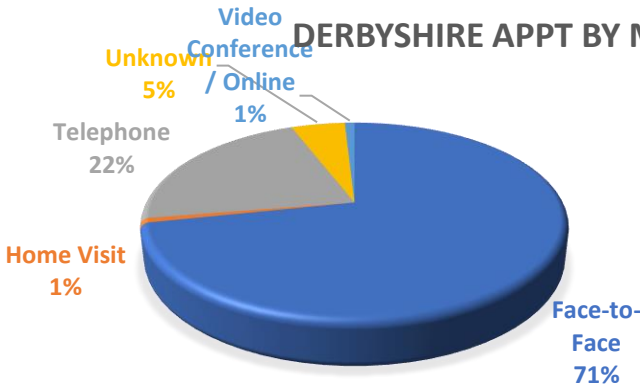
- Collectively the five PCNs deliver approximately 170,000 practice appointments per month.
- Levels of face to face appointments decreased in the pandemic and the number of telephone appointments increased.
- However Face to face levels have started to increase - the latest data showing around 72% of appointments are now face to face
- There is a national issue on up to date information available on practice level recovery however Derbyshire-wide level data shows that post-pandemic appointment levels are recovered to the same or higher than pre-pandemic levels.
- Proportion of Health Care Professional appointments and mode of appointment directly affects that delivered across Derbyshire (see next slide).
- Access remains a challenge however we have more information available to us now than we have before which has allowed us to support practices who are having issues.

# Derby City Appointments By Mode and HCP Type

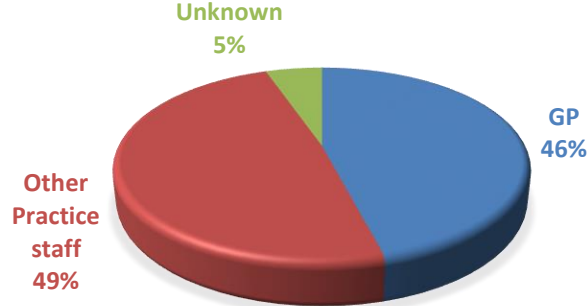
DERBY CITY BY HCP TYPE



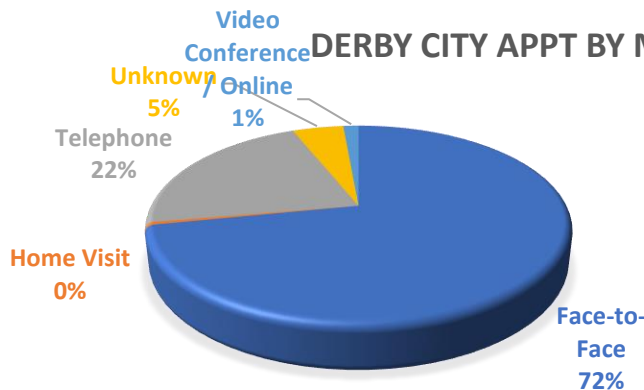
DERBYSHIRE APPT BY MODE



DERBYSHIRE APPT BY HCP TYPE



DERBY CITY APPT BY MODE



	GP	Other Practice staff	Unknown	Grand Total
Derby City	79805	84129	8084	172018
Derbyshire	283898	301188	32905	617991

	Face-to-Face	Home Visit	Telephone	Unknown	Video Conference/Online	Grand Total
Derby City	123642	755	37105	8098	2418	172018
Derbyshire	442992	4616	134270	30596	5517	617991

# GP Access in Derbyshire

- Access for patients, and demand on practices, is a major concern for many patients and practices in Derbyshire
- GP Appointment data has been made available to the public from November 2022, in the form of an annex to the current publication and includes the following metrics: Appointment mode, healthcare professional type and national categories. There is also an annual national patient satisfaction survey for a sample of patients from each practice
- For Derbyshire the Patient Survey shows mixed levels of patient satisfaction. Some practices have outstanding levels of patient satisfaction, whereas others fall below the national average.
- Generally patients have most concerns about their ability to get through to the practice – problems with getting through on the phone, or are concerned about the waiting time for a GP appointment
- Patients report high levels of satisfaction with the care they receive once they get through
- Currently there is some anecdotal evidence that patients are concerned about not being seen face to face, however for the first time Derbyshire practices have shown an increase in face to face appointments since pre-pandemic. We also have some positive patient feedback about telephone consultations

# GP Access in Derbyshire cont.

- Derbyshire practices are working harder than ever. They are offering more appointments than they did before the pandemic, and more on the same day
- A telephone call first allows for a more efficient face to face appointment: previously a patient would have been seen, sent for investigation and then seen again which can often be 3 appointments
- Now the GP can speak on the telephone, order the investigations, then see the patient face to face and make a clinical decision at their first appointment
- The ICB currently monitors all Derbyshire practices on a monthly basis using GP appointment data (GPAD). If practices are flagged as having issues then the ICB will support where necessary and they are reviewed by the Access Working Group.

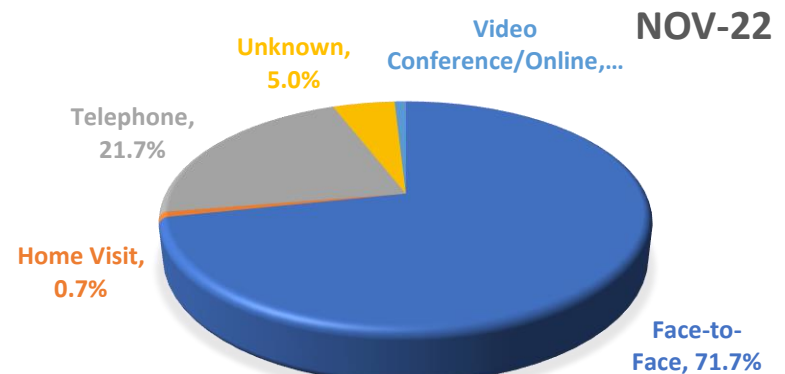
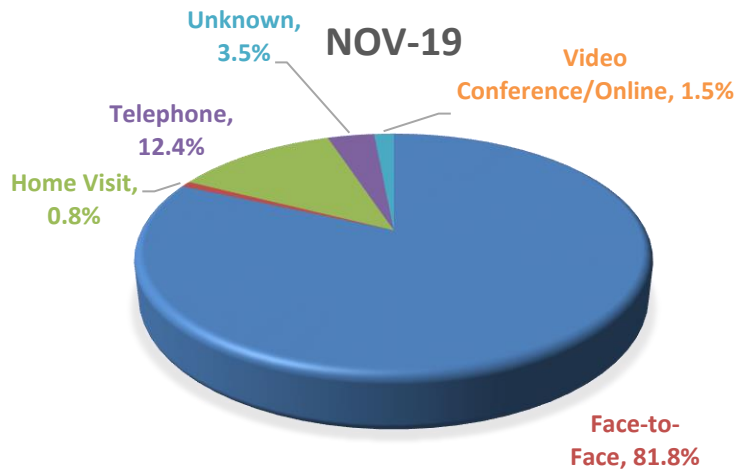
# Appointment Activity in General Practice (Nov 22)

- General Practice in Derbyshire offer c550,000 appointments every month
- The number of appointments offered is at similar levels, or more than, before the pandemic
- The majority of appointments are face to face (c72%)
- The number of telephone appointments has increased since the pandemic to about 22% of the total
- Approx. 39% of appointments were offered for the same day. When corrected for working days about 11.2% more appointments were delivered on the same day than before the pandemic (Nov 19)

# Derbyshire Nov 2022 Highlights

Overall comparison Nov 19 - Nov 22	Nov-19	Nov-22	Overall Appointment Difference Nov 19 - Nov 22	Overall % increase/decrease (Nov 19 - Nov 22)	% increase/decrease corrected for working days (Nov 19 - Nov 22)	Trend
<b>Total Appointments</b>	545896	617991	72095	13.2%	8.1%	↑
<b>By Appointment Mode</b>						
Face-to-Face	446585	442992	-3593	-0.8%	-5.3%	↓
Home Visit	4175	4616	441	10.6%		↑
Telephone	67643	134270	66627	98.5%	89.5%	↑
Unknown	19329	30596	11267	58.3%		↑
Video Conference/Online	8164	5517	-2647	-32.4%		↓
<b>By Time from Booking to Appointment</b>						
Same Day	204734	238474	33740	16.5%	11.2%	↑

# Comparison of Appt Mode as a % of Total Appts



	Nov-19	Nov-22
<b>% By Appointment Mode</b>		
Face-to-Face	81.8%	71.7%
Home Visit	0.8%	0.7%
Telephone	12.4%	21.7%
Unknown	3.5%	5.0%
Video Conference/Online	1.5%	0.9%
Same day	37.5%	38.6%



# What's the right mix of appointments?

- National best practice is to have a mix of ways to treat patients – face to face, online, telephone
- And a mix of people seeing patients – not everyone needs to see a GP – more options give better outcomes and quicker treatment
- Patient triage is effective and efficient – an expert assessment to work out how urgent the problem is and who should deal with it, and for smaller issues the opportunity to deal with it there and then
- It's a much better use of patient and GP time if small changes (e.g. tweaks to prescriptions) can be dealt with over the phone or online – and practices have had positive feedback from patients about this
- However obviously many patients must be seen face to face. If we can free up GP time from people they don't need to see then they'll have more time with those they do
- The number of people seen face to face is increasing and will continue to do so
- However if we want an effective and efficient system for patients and practices then we should still aim for a mixed approach – more ways to get help and a wider range of people providing care

# Winter Planning

## **Enhanced Access and Winter Access Fund:**

- As part of the winter fund all 114 practices are signed up to deliver an extra 40,000 same day urgent appointments between November and March.

## **Winter hubs:**

- The winter hubs have been commissioned via Derbyshire Health United (OOH provider) and are for patients who present with an on the day/acute need and can't be seen at their usual practice.
- Capacity in the hubs will also provide the ability to support Primary Care when in escalation.
- Hubs are located across Derby and Derbyshire to ensure equity of access for patients

## **Practice Resilience:**

- We ask all practice to provide an Opel status each week to monitor the pressure in General Practice and target support required.

# Practice staffing in Derbyshire (Nov 2022)

- Nationally, there are challenges recruiting into General Practice roles and this is seen locally. We know that we have an ageing workforce, particularly in our nursing staff with 32% of nurses aged 55 and over.
- Derbyshire's number of GPs has increased by 6.7% (as of October 2022). However, this increase is largely due to GPs in training joining the area
- Derbyshire PCNs will receive approx. £21m to invest in additional (non GP or nurse) roles by March 2024 under the Additional Roles Reimbursement Scheme (ARRS). This equates to an additional 480 WTE within Primary Care
- Derby's share of the national ARRS target (26,000) is 369 WTE by March 2023 and 455 WTE by March 2024
- To date, PCNs currently employ 386.52 WTE additional roles, including Social Prescribing Link Workers, First Contact Physiotherapists and Clinical Pharmacists.
- By March 2023, nine PCNs will have an adult Mental Health Practitioner in post
- Practices are funded on a per capita basis so will receive additional funding for new patients which they can also use to increase staffing