

APPENDIX 2

Derby and Derbyshire ICB Response to Healthwatch Survey of patient satisfaction with GP access in Derby City (January 2024)

Introduction

This paper responds to the survey that Healthwatch undertook of patient satisfaction with GP access in Derby City in January 2024, and to the recommendations set out in its national and local reports.

We would like to thank Healthwatch for its excellent work in supporting patients and for this insightful report and for giving us the opportunity to respond.

We are sorry that so many people have a poor experience when trying to access General Practice. This is not the service we want, nor is it the service that GPs want to provide. General Practices are working hard to improve their access and we are working to support them. We are in the middle of implementing the national Primary Care Access Recovery Plan in Derby and we will continue this work so that it is implemented in full.

General Practices in Derby work hard under great pressure to provide high quality services. This response briefly sets out the current situation, why things are so challenging at the moment, what we are doing about it and, specifically, our response to the specific recommendations set out in Healthwatch's paper.

The current situation: are General Practices offering fewer appointments?

As the Healthwatch survey highlights many patients currently struggle to access General Practice.

Although we appreciate that it may not feel like it if you can't get an appointment, the number of appointments offered by GP practices across Derby and Derbyshire has increased by c7% since 2019.

In Derby City 70% are face to face, and 43% are offered within 24 hours of being requested. These are in line with national and county wide figures. Approximately 85% of people are seen within 2 weeks and we are working hard with practices to understand and improve this figure.

Overall General Practice offers over 520,000 appointments per month across Derby and Derbyshire.

Why is access difficult for patients?

Access is difficult not because General Practice are offering a worse service or fewer appointments, but because demand is rising quicker than capacity.

According to national NHS England data there has been a 20-40% increase in contacts with General Practice since before the pandemic. This is made worse by waiting list backlogs which have increased the number of people contacting their General Practice to find out waiting list information or because their condition has worsened whilst they have been waiting. One practice in Derby audited the impact of these care backlogs and estimated they accounted for over 20% of their work.

As well as this the number of older people in our population has increased. Since 2010 the number of people over 70 has increased by 30%. As we are likely to need more healthcare as we age this has a significant impact on the demand on General Practice.

In addition, technology, training and developments in clinical practice have meant that we are able to offer a wider range of services in General Practice and the community. Many services are offered in General Practice now which you would have had to go to hospital for in the past. However, these all take time and staff to deliver safely.

Although the NHS has invested in additional staff in General Practice the number of doctors (General Practitioners) has not increased as quickly as the demand. Nationally there has been an increase of c7% in doctors working in general practice since before the pandemic. This figure includes doctors in training. Overall the number of experienced doctors and GP partners (those who run their own practices) has decreased as they retire and leave, with other GPs unwilling to take on these roles.

What is the NHS doing about GP access nationally?

In May 2023 the NHS launched a national 'Primary Care Access Recovery Plan'. Derby and Derbyshire ICB and GP practices are taking wholehearted action to implement this plan. This action is in line with the request made by Healthwatch.

The recovery plan aims to address two key issues:

- Tackle the 8am rush and reduce the number of people struggling to contact their practice
- For patients to know on the day they contact their practice how their request will be managed.

In October the Derby and Derbyshire ICB Public Board agreed a plan to deliver this locally. The full plan is available on the Derby and Derbyshire [ICB website](#) (16 November 2023 board meeting pages, page 183 to 208) but the section below summarises the four key elements:

1. **Empowering patients:** support patients to manage their own health including using the NHS App, self-referral pathways and through more services offered from community pharmacy.
2. **Implement the Modern General Practice Access programme:** move all practices from analogue 'copper' telephone lines to digital telephony including call back functionality. Offer 'care navigation training' for staff and deliver training and transformation support to practices through a new National General Practice Improvement Programme.
3. **Build capacity:** employ more direct patient care staff and deliver more appointments by March 2024 (compared to 2019), expand GP specialty training, encourage experienced GPs to stay in practice and change local authority planning guidance to raise the priority of primary care facilities when considering how funds from new housing developments are allocated.
4. **Cut Bureaucracy:** reduce the workload across the interface between primary and secondary care so practices have more time to meet the clinical needs of their patients, including reducing the time spent liaising with hospitals, reducing requests to GPs to verify medical evidence and streamlining GP targets.

What does this mean in Derby, and how will we respond to the recommendations set out in the Healthwatch report?

The Healthwatch report sets out recommendations from its national report, and a further four local recommendations. These overlap with the work we are doing or planning to do as part of implementing the national Primary Care Access Recovery Plan , and this section sets out our response to the recommendations as follows:

| Recommendation | ICB response |
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| Take wholehearted action to implement the NHS primary care recovery plan. | As set out above DDICB is fully committed to implementing the NHS primary care recovery plan in full and set out its plan at the public Board meeting in November 2023 (ICB website 16 November 2023 board meeting page, pages 183 to 208). The plan was additionally presented to Derby City Council's Adults and Health Scrutiny Review Board on 30 January 2024 (item 6). |
| All GP surgeries move to digital phone systems by the end of March 2024, so patients spend less time waiting on hold | We will move all Derby practices to digital phone systems by the end of March 2024. We are going further than this and are upgrading practices who are already on digital but don't have all the functions that they might need. We aim to ensure that all practices will have digital systems with all the functionality that they need. We can provide further detail on what has been done practice by practice if required. Further detail on exactly what we have done is set out below. |
| Greater public awareness of, and sign-ups to, the NHS app, through the promised national communications campaign. | <p>We are working hard to ensure patient sign up to the NHS app. In February 2024 there were 935 monthly registrations for the NHS app in Derby City with a running total of 157,993.</p> <p>The ICB has supported the national communications campaign to encourage people to sign up to the app. Materials have also been provided to GP practices, so they can explain to their patients how to use it.</p> |
| Most patients able to benefit from full NHS app functionalities by the end of March 2024. | <p>The ICB is working closely with practices to ensure that they offer the four key functionalities through to patients through the app. These are:</p> <ul style="list-style-type: none"> • View prospective clinical records including test results. • See messages from the practice. • Manage routine (non-triage) appointments. • Order repeat prescriptions. |

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| <p>Evidence that Integrated Care Boards plan to tackle health inequalities around GP access, especially in deprived areas.</p> | <p>The national plan sets out a blanket approach to cover all practices. DDICB focuses local support and funding when available on the areas of greatest need. One example of this is that we allocated funding for extra GP appointments over winter based on the deprivation of the area that the practice served, with practices serving the most deprived populations getting a larger share of the funding. Eleven of the 20 practices who received this additional funding were in Derby City.</p> |
| <p>All GP practices offering free phone numbers.</p> | <p>As set out above the NHS has invested to improve GP telephone systems, and has for some years, ensured that all practices phone systems are at local call rates.</p> <p>The national plan does not include funding for free phone numbers and this is not part of our local plan. However we would be happy to discuss this further with Healthwatch and to support them to lobby for this funding nationally.</p> |
| <p>All GP practices sign up for the Register with a GP Surgery Service, which makes registering with a surgery easier for patients, particularly those with no fixed address or ID</p> | <p>The ICB is working with practices in Derby to improve registration. As part of this some practices have signed up to the GP Surgery Service or purchased alternative systems that allow patients to register more easily.</p> |
| <p>Fully communicate how improvements are going to be made to both professionals and the general public.</p> | <p>We have run a communications campaign over the busy winter period to inform people of the improvements already made in general practice. This has particularly focused on explaining how staff who are not a doctor are able to provide support and care, often on the same day. A bank of communications materials including film, graphics, and text specifically for Derby and Derbyshire was developed by the ICB for all GP practices to use in their communications with their patients. Materials were developed in partnership with local GP practices and their representatives.</p> |
| <p>A complete overhaul of telephone appointment systems at GP practices.</p> | <p>As set out above the ICB has worked with GP practices to overhaul and upgrade GP telephone systems across Derby and Derbyshire in line with the national plan and to the deadline of March 2024</p> |
| <p>Patients are given more options and times to make appointments.</p> | <p>The ICB has commissioned practices (working in groups called primary care networks) to provide additional</p> |

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| <p>Patients are given more choice of appointment times.</p> | <p>appointments between 6.30am and 8pm Monday to Friday and between 9am and 5pm on Saturday.</p> <p>Over the last five years practices (again working in Primary Care Networks) have been funded to employ a wider range of staff including clinical pharmacists, social prescribers, mental health workers, physiotherapists and nursing associates. In Derby 198 (whole time equivalent) staff have been employed. These extra people mean that practices can offer more appointments to a wider range of staff.</p> <p>As set out above practices are also offering different kinds of appointments: face to face, telephone and online</p> <p>However, it must be noted that practices can only offer appointments if they have the staff. It is not sensible to offer appointment times that mean that practices have to spread staff too thinly. They would end up having to work longer and longer hours in a way that would reduce the quality of care they can offer and put their own health and wellbeing at risk.</p> |
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Next steps

We hope that this response sets out the work we are doing and plan to do to respond to Healthwatch's report.

We'd like to work with them to further discuss their findings and our plans, and to continue to keep them and the Health and Wellbeing Board and Oversight Committees informed of work in this area.