

General Practice in Derby

Activity, access, capacity, staffing and workload

Activity in General Practice

- General Practice in Derby and Derbyshire offer c500,000 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 (c65%)
- The number of telephone appointments has increased since the pandemic to about 30% of the total
- About 43% of appointments are offered for the same day – more appointments are offered on the same day than before the pandemic
- Derby and Derbyshire's appointments are in line with, or more than, other counties in the Midlands

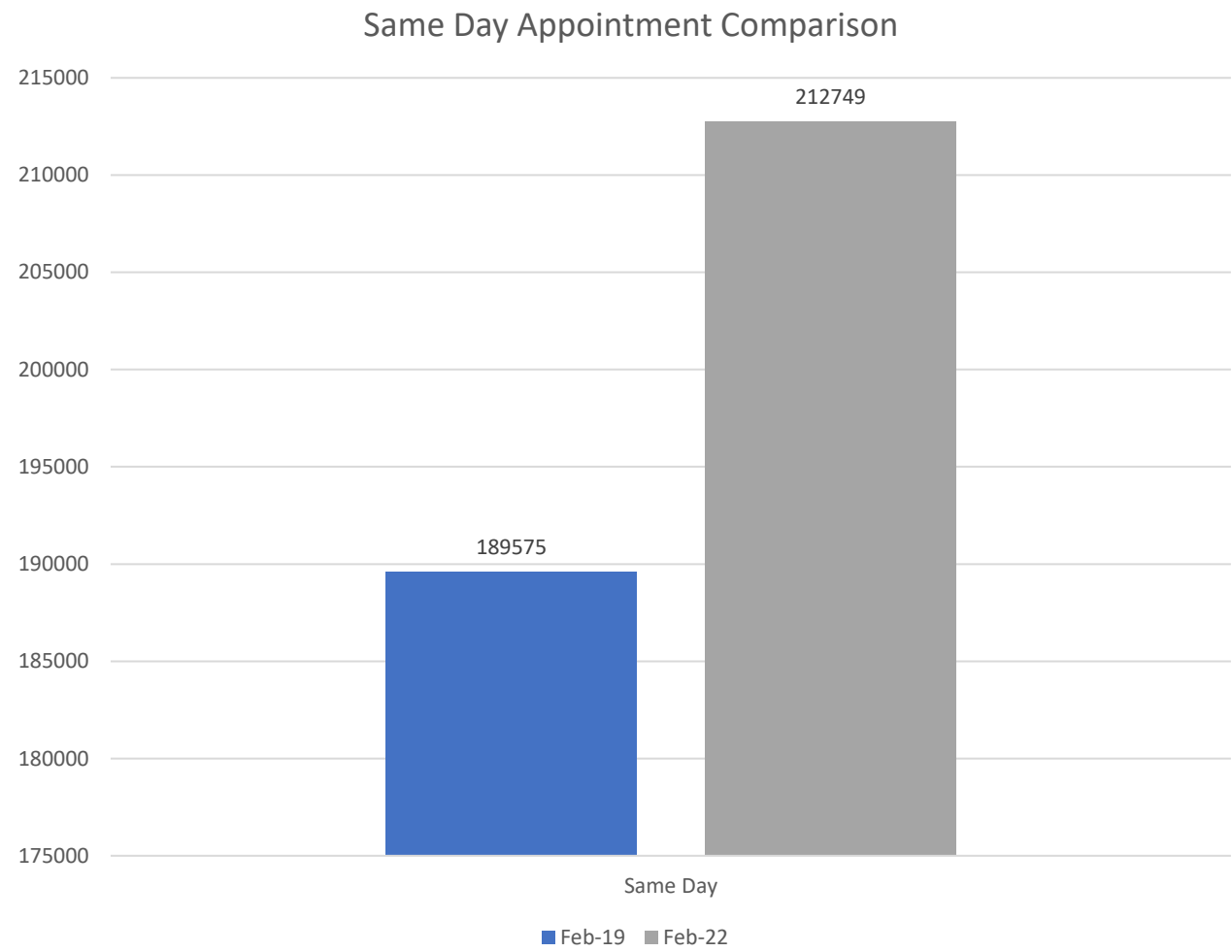
GP Appointment Data Comparison - Derbyshire

(February 22 with February 19)

Overall comparison Feb 19 - Feb 22	Feb-19	Feb-22	Overall Appointment Difference Feb 19 - Feb 22	Overall % increase/decrease (Feb 19 - Feb 22)	% increase/decrease corrected for working days (Feb 19 - Feb 22)	Trend
Total Appointments	478146	492542	14396	3.0%	3.0%	↑
By Appointment Mode						
Face-to-Face	391088	320192	-70896	-18.1%	-18.1%	↓
Home Visit	3112	3228	116	3.7%		↓
Telephone	59387	147607	88220	148.6%	148.6%	↑
Unknown	19120	19971	851	4.5%		↑
Video Conference/Online	5439	1544	-3895	-71.6%		↓
By Time from Booking to Appointment						
Same Day	189575	212749	23174	12.2%	12.2%	↑

Same Day Appointments - Derbyshire

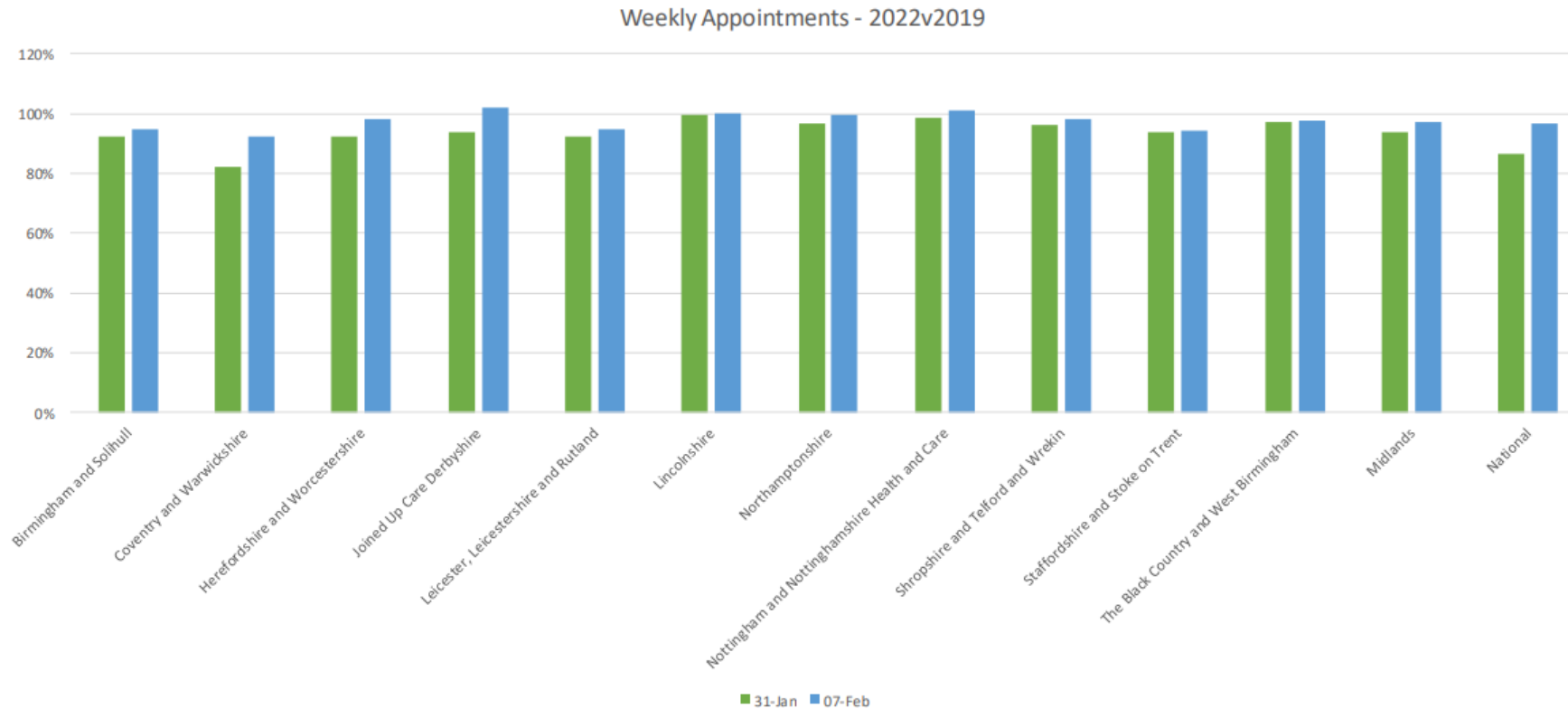
Same day appointments in February 22 are up 12.2% compared to February 19 (Total 212749 – 43% of February 22 total appointments)



Regional Appointment Recovery

Derbyshire is showing one of the highest levels of recovery in the region.

GP Appointments – Weekly Appointment Recovery



Viewing the appointment data on a weekly basis highlights variation and is not the most representative. The weekly February 2022 data available currently, indicates that all systems have lower than 100% recovery for two weeks in February 2022 compared to February 2019.

Face to face and telephone appointments

- In Derby and Derbyshire and across England COVID has brought changes to the mix of face to face and telephone appointments
- The number of face to face appointments has fallen (from c80% to c65%) and the number of telephone appointments has risen
- The move to more telephone and online appointments was happening before COVID
- There was a step change when the NHS asked practices to move to a 'total triage' approach at the start of the pandemic
- All practices in Derby are open and offering face to face appointments but balanced against reduced capacity (IPC, demand, site constraints)

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

GP access in Derby

- Access for patients, and demand on practices, is a major concern for many patients and practices in Derby
- We don't have really comprehensive information about access to General Practice but there is an annual national patient satisfaction survey for a sample of patients from each practice
- For Derby this survey show 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, though we don't have data on this. We also have some positive patient feedback about telephone consultations.

Derby City Practice Recovery

- The majority of Derby City Practices have recovered to 2019 appointment levels, which can fluctuate slightly month by month.
- There are only 8 out of 29 practices who appear more than 5% down in appointments in February 22 compared with February 19
- The data we receive for this information is relatively new and the CCG are working with practices to ensure that the information is correct and that the data reflects their work.
- The CCG will work with practices where the numbers look lower and discuss that any action plans are in place for those who are struggling the most to provide effective access to their patients

GP access in Derby

- Derby practices are working harder than ever. They are offering more appointments than they did before the pandemic, and more on the same day.
- They are also doing COVID vaccinations, catching up on the backlog of patients, following NHS rules for infection prevention and control and managing increased staff sickness and absence
- 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.
- GP services do not operate in a vacuum. Long hospital waits, cuts to drug, alcohol and smoking services and cuts in social care will directly increase demand on General Practice

Current work to improve GP Access

There a range of plans to improve access which the CCG and GP practices are implementing locally. These include:

- Increasing practice workforce through the additional roles reimbursement scheme
- Funding GPs to provide additional appointments 'extended access'
- Recruitment and retention incentives for GPs
- International recruitment for GPs
- A practice nursing strategy
- Reducing unnecessary administration and bureaucracy to free up time for front line staff
- Training programmes in managing demand and capacity 'time to care'
- Improving digital access:
 - Enabling NHS 111 to book directly into Practices (live across all Derbyshire practices)
 - Access to online consultation, video consultation, patient questionnaires, ability to send pictures to GP Practices as part of a consultation as well as usual stuff like appointment reminders
 - Developing call centre like 'hubs' to undertake digital triage and provide remote GP services at scale
- Review of telephony services to improve phone access to practices and reduce queuing

Current work to improve GP Access (cont)

- There are a small number of practices who have not fully recovered; 4 of whom are included on the DDCCG Enhanced Support Package. Of the remaining 7 practices who have not recovered there are 5 that have improved on the number of appointments since November 2021.
- DDCCG are in the process of implementing the Community Pharmacy Consultation service to include the ability to receive referrals from GPs and support the management of low acuity patients.

Practices in Derby are working extremely hard. There are some issues that make access more difficult – for example some practices serve very deprived populations who have a greater need of services than more affluent people and recruitment and retention can be harder in the city

The CCG and the Derby Practices are working together to review the allocation of funding and support to Derby practices to ensure that it is equitably allocated and that Derby practices get their fair share to meet the needs of the population

Future work to improve GP Access

The new Investment and Impact Fund (IIF) will reward PCNs for achieving:

- Improvements in patient experience of access through financial incentives linked to performance in relation to the forthcoming survey-based real time measure of patient experience
- Continued delivery of online consultations. Ensuring that online consultations continue to be offered to patients consistently across the country as we exit the pandemic, relieving pressures on wider services as part of the recovery programme.
- Improved utilisation of Specialist Advice services – this will support the wider NHS recovery of elective care services through avoidance of unnecessary outpatient activity.
- Reductions in rates of long waits for routine general practice appointments, which are a leading cause of dissatisfaction with primary care services and can result in escalation of clinical needs.

We will see the percentage of face to face appointments increase as we recover from the pandemic. Not all patients do need to be seen face to face and we need to ensure we have enough capacity to see those that do. Therefore we we will continue to follow the national strategy of a mix of telephone, online and face to face appointments underpinned by effective triage and self care.

Practice staffing in Derby City

- Staff sickness and absence levels are currently high (11.9%) across city and county
- There are problems recruiting staff for General Practice, particularly GPs and Practice Nurses, nationally & locally
- The staffing levels for Derby City Primary Care Networks are comparable with other areas across Derbyshire
- Derby has more patients per GP than average in Derbyshire and compared to the national average, but it is comparable with other cities in the country
- Derby has less patients per nurse than both the Derbyshire and national average
- Derby Primary Care Networks will get £3.947m to invest in additional (non GP or nurse) roles by March 2024. This equates to another 141 full time people
- Practices are funded on a per capita basis so will receive some additional funding for new patients which they can use to increase staffing

Future Workforce Focus & Planning

Lots of work over the coming months to grow and strengthen the primary care workforce, including recruitment and retention, which is a national focus.

- 1. Supporting PCNs to recruit workforce via the Additional Roles Reimbursement Scheme and take full opportunity of the investment offered.**
 - PCNs currently working on recruitment plans for this financial year (31 August 2021) and robust planning to the March 2024 (31 October 2021).
 - CCG to continue to support in recruitment and retention of new roles as they embed within primary care.
- 2. Staff wellbeing and recovery following the COVID-19 pandemic**
 - There is a concern of burn out of health and social care staff due to the unprecedented demands over the past 18 months. We are focussed on the wellbeing of staff within primary care as they deliver the vaccination programme as well as 'business as usual' within practices.
- 3. Recruitment and Retention**
 - Promoting Derbyshire
 - International GP Recruitment
 - General Practice fellowships for GPs and Nurses new to practice
 - Supporting mentors' scheme
 - New to Partnership payment scheme
 - Local GP Retention Fund

Service delivery and pressure in Derby

- No services have been decommissioned. The CCG's strategy is to increase the number of services commissioned from GPs – moving services out of hospital to be more accessible for patients.
- Due to the pandemic some services (e.g. spirometry) have been temporarily paused because of the risk of COVID transmission. We are working with GP practices to restart these services now.
- There is a backlog for checks on some patients with long term conditions, but even through the pandemic GPs were undertaking checks for high risk patients. GPs are now working to catch up.
- GPs in Derby City have delivered the following COVID vaccines:
 - First: 86.3%
 - Second: 82.9%
 - Booster: 67.4%
- They are about to begin work on the Spring booster
- There has been an increase in aggressive and violent behaviour towards General Practice staff
- Practices are reporting high levels of staff stress and burnout

Summary

- Access to General Practice in Derby is challenging for some practices, and a priority for patients and practices
- Demand for GPs is currently surging and practices are working very hard under great pressure. They are open for business and overall the number of appointments offered is at or above pre pandemic levels
- More appointments are offered by phone and more are offered the same day they were requested than before the pandemic
- Patients report mixed satisfaction with access and there is ongoing work to improve access by practices, the CCG and the wider NHS
- Staffing is a challenge. There is new funding for non GP staff and a range of initiatives designed to help recruit and retain key staff but this remains difficult
- GP services are not being cut, and those that were paused during the pandemic are being restarted
- GPs continue to lead a very successful vaccination campaign
- Demand and pressure on staff is likely to be very high over the winter, and there is rising concern over practice staff wellbeing