

Derbyshire Dialogue

Improving Access to Primary Care

National Context

Why we need a Delivery Plan for Recovering Access to Primary Care



The Autumn Statement committed the NHS to publish a recovery plan for primary care.

The plan focuses on recovering access to general practice and **supports two key ambitions:**

1. **To tackle the 8am rush and reduce the number of people struggling to contact their practice.** No longer will patients be asked to call back another day to book an appointment.
2. **For patients to know on the day they contact their practice how their request will be managed.**
 - a. If their need is clinically urgent it will be assessed on the same day by a telephone or face-to-face appointment. If the patient contacts their practice in the afternoon they may be assessed on the next day, where clinically appropriate.
 - b. If their need is not urgent, but it needs a telephone or face-to-face appointment, this will be scheduled within two weeks.
 - c. Where appropriate, patients will be signposted to self-care or other local services (eg community pharmacy or self-referral services).

NHS England engaged with a wide range of stakeholders to develop and refine the plan, including patient and professional representative groups as well as used the insight gathered from Dr Fuller's stocktake. It also includes key themes to be engaged on during 2023/24, including the GP contract and Pharmacy First, to support delivery of the longer term vision.

The problem the Delivery Plan for Recovering Access to Primary Care is addressing

Strained capacity



- **20-40% increase in contacts** since pre-pandemic, exacerbated by care backlogs



- **>30% increase in people >70** since 2010, with more **long-term conditions**



- **12% more appointments** since pre-pandemic



- **Only ~7% increase in doctors** working in general practice since pre-pandemic

Decreasing patient satisfaction



- **Average satisfaction** with general practice fell from **83% to 72%** last year.



- Over **85% of practices** saw their **satisfaction fall**



- **1 in 5 people unable to get through** or get a reply from their practice when last tried



- **Poor contact creates patient dissatisfaction** with practice overall

The plan headlines

The plan focuses on four areas to support recovery and deliver the ambitions. The page overleaf outlines more detailed information.

1		Empower patients	<ul style="list-style-type: none">Improving NHS App functionality	<ul style="list-style-type: none">Increasing self-referral pathways	<ul style="list-style-type: none">Expanding community pharmacy
2		Implement new Modern General Practice Access approach	<ul style="list-style-type: none">Roll-out of digital telephony	<ul style="list-style-type: none">Easier digital access to help tackle 8am rush	<ul style="list-style-type: none">Care navigation and continuityRapid assessment and response
3		Build capacity	<ul style="list-style-type: none">Growing multi-disciplinary teams	<ul style="list-style-type: none">Expand GP specialty training	<ul style="list-style-type: none">Retention and return of experienced GPsPriority of primary care in new housing developments
4		Cut bureaucracy	<ul style="list-style-type: none">Improving the primary-secondary care interface	<ul style="list-style-type: none">Building on the 'Bureaucracy Busting Concordat'	<ul style="list-style-type: none">Streamlining IIF indicators and freeing up resources

1 Empower patients by rolling out tools they can use to manage their own health, and invest up to £645m over two years to expand services offered by community pharmacy.

- **Enable patients in over 90% of practices to see their records and practice messages**, book appointments and order repeat prescriptions using the NHS App by March 2024.
- **Ensure integrated car boards (ICBs) expand self-referral pathways by September 2023**, as set out in the [2023/24 Operational Planning Guidance](#).
- **Launch Pharmacy First**, so that by the end of 2023 community pharmacies can supply prescription-only medicines for seven common conditions. This together with OC and BP expansion could save 10m appointments in general practice a year once scaled, subject to consultation.
- **Expand pharmacy oral contraception (OC) and blood pressure (BP) services** this year, to increase access and convenience for millions of patients. This is **subject to consultation**

2 Implement 'Modern General Practice Access' so patients know on the day how their request will be handled based on clinical need and patient preference. We are re-targeting £240m – for a practice still on analogue lines this could mean £60k support over 2 years.

- **Support all practices on analogue lines** to move to digital telephony, including call back functionality, if they sign up by July 2023
- **Provide all practices with digital tools and care navigation training** for Modern General Practice Access, and fund transition cover for those that commit to adopt this approach before March 2025
- Deliver training and transformation support to all practices from May 2023 through a new National General Practice Improvement Programme

3 Build capacity so practices can offer more appointments from more staff than ever before.

- **Make available an extra £385m** in 23/24 to employ 26k more direct patient care staff and deliver 50m more appointments by March 2024 (compared to 2019).
- **Further expand GP specialty training** – and make it easier for newly trained GPs who require a visa to remain in England
- **Encourage experienced GPs to stay in practice** through the pension reforms announced in the budget and create simpler routes back to practice for the recently retired
- **Change local authority planning guidance** this year to raise the priority of primary care facilities when considering how funds from new housing developments are allocated

4 Cut bureaucracy to give practice teams more time to focus on their patients' clinical needs.

- **Streamline the Investment and Impact Fund (IIF) from 36 to five indicators** - re-target £246 million - and protect 25% of Quality and Outcomes (QOF) clinical indicators.
- **Reduce time spent liaising with hospitals by requiring ICBs to report progress** on improving the interface with primary care, especially the four areas highlighted from the Academy of Medical Royal Colleges Report, in a public board update this autumn.
- **Reduce requests to GPs to verify medical evidence**, including by increasing self-certification, by continuing to advance the

Derby & Derbyshire Appointment Update

Derbyshire April 2023 Recovery Position

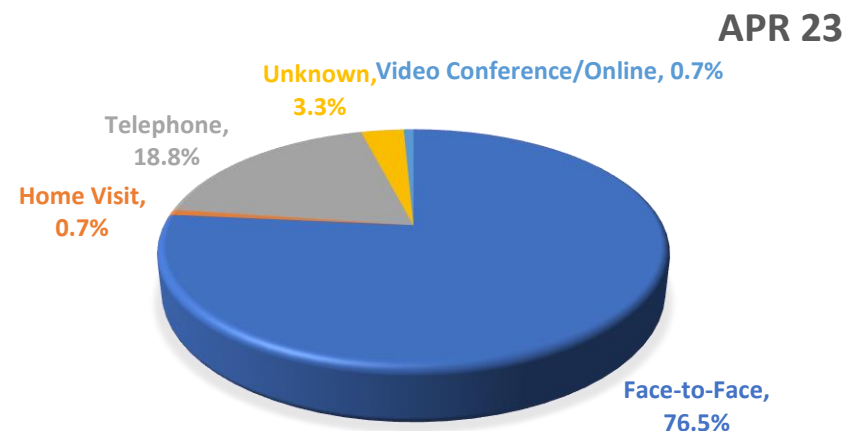
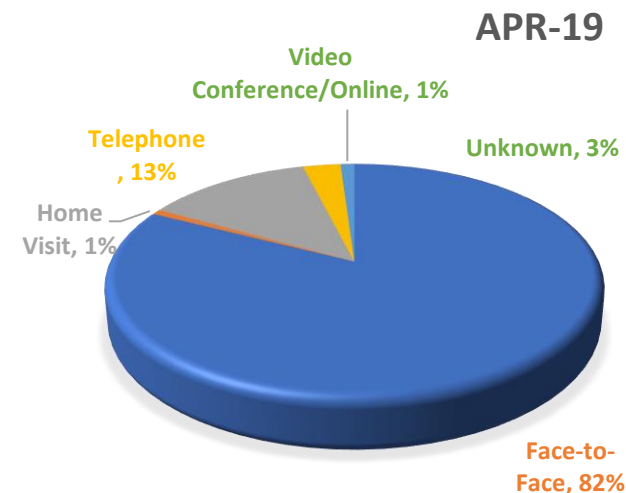
(When discussing post-pandemic recovery Glossop figures are not included because they were not part of Derbyshire in 2019. Including them would inflate our current position)

- Total number of appointments in Apr 23 has increased by 9.8% (when corrected for working days), a total of approx. 458,000 for the month (475,000 including Glossop). Apr 23 also saw an additional 3007 home visits from the Aging Well Support Programme which relieves pressure in General Practice.
- General Practice Face to face appointments in Apr 23 are up 1.9% of Apr 19 when corrected for working days. They made up 77% of total appointments.
- Telephone appointments in Apr 23 are up 60% compared to Apr 19 when corrected for working days. They made up 19% of appointments.
- General Practice Same day appointments in Apr 23 are increased by approx. 10% Apr 19 (when corrected for working days) making up 40% of appointments.

Note:

*Expect lower number of appointments in months where there are more bank holidays

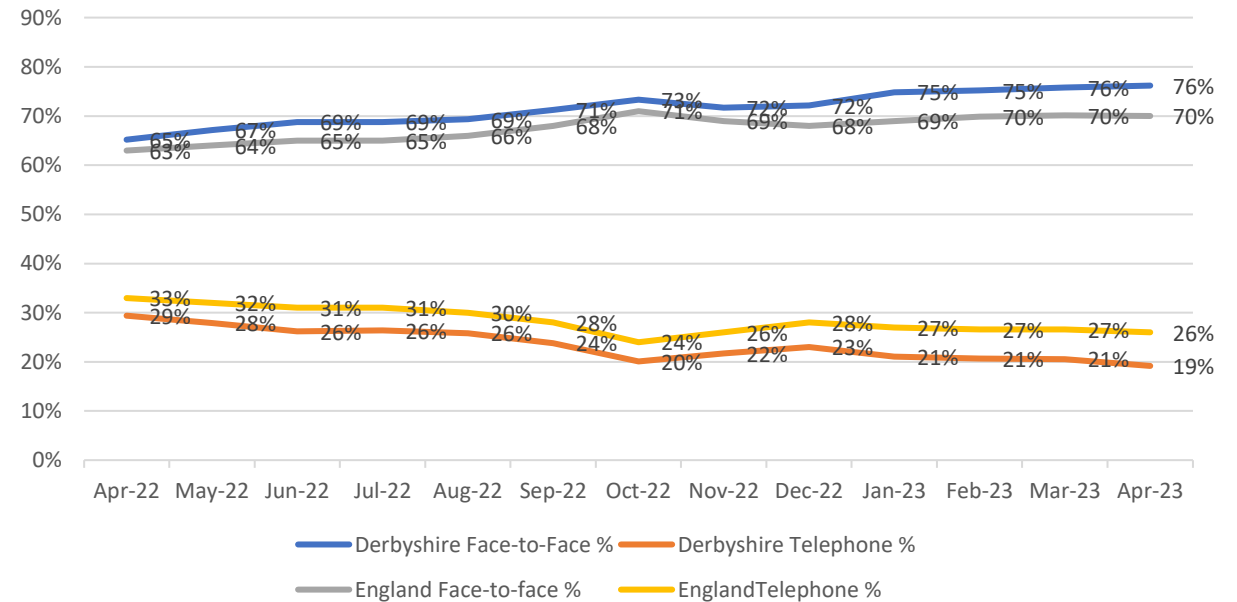
*Apr 2023 only had 18 working days – Apr 2019 had 21 so we expect a much lower number of actual appts in Apr 2023 compared with 2019



Appointment Mode

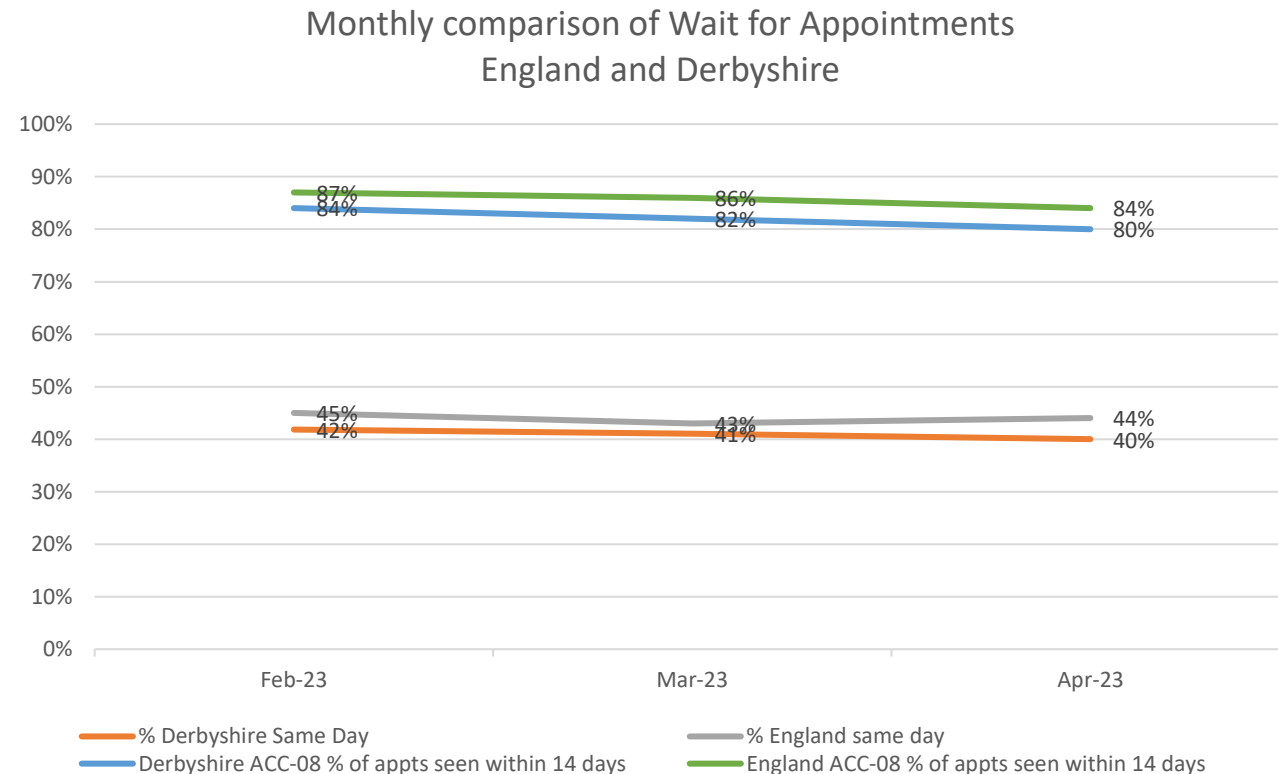
- The proportion of Face-to-face appointments has increased from Apr 22 which was 65%, (now 76%) in Derbyshire and the proportion of telephone appointments has decreased from the Apr 22 figure of 29%, (now 19%) which indicates a move towards increasing face-to-face appointments post-pandemic.
- The proportion of Face-to-face appointments is slightly higher in Derbyshire compared with the national average which correlates with a lower % of telephone appointments.
- They both follow a similar trend line month by month.

Monthly Comparison of Appt Mode
England and Derbyshire



Derbyshire and England Wait for Appointments

- The % of same day appointments is slightly lower than the England average (44%) in Derbyshire (40%).
- % of appointments seen within 14 days (appts not typically scheduled in advance) in Derbyshire remains slightly below (80%) the England average (84%).
- Derbyshire trendline follows the same pattern with England for both same day appointments and +14 day wait figures.
- Please note breaking down appt categories on the 14 day wait appointments is relatively new – this will be measured monthly and forms part of the IIF target ACC-08 to reach 85% of these appointments within 14 days



Patient Survey Results:

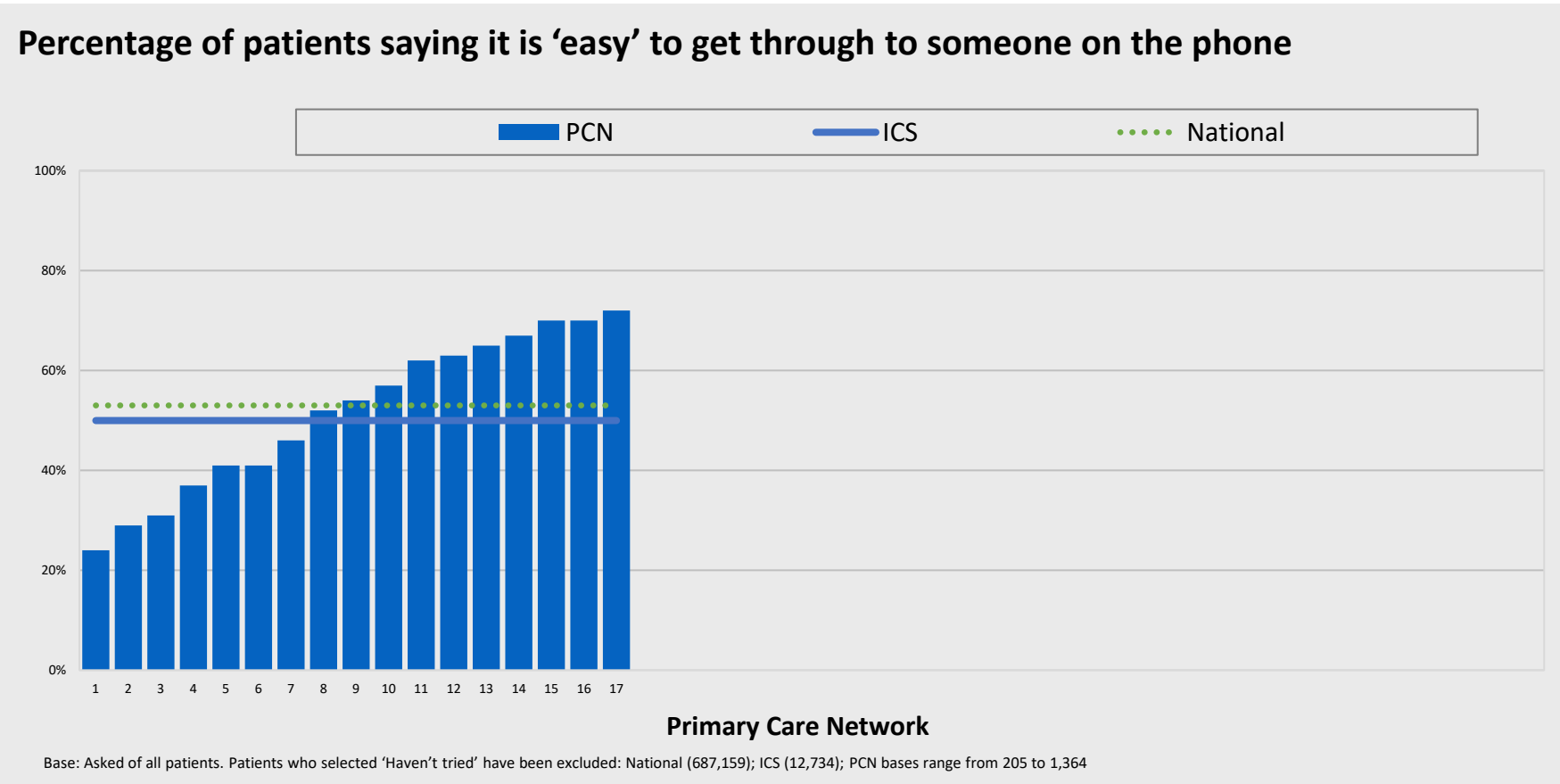
As part of the Capacity and Access Plans there are five questions on the GP Patient Survey that are being used as a benchmark for comparison and as part of the Access Improvement Plans we would expect to see an improvement following implementation

Question:	Q.1 Generally how easy is it to get through to someone at your GP practice on the phone?	Q.4 How easy is it to use your GP practice's website to look for information or access services?	Q.16 Were you satisfied with the appointment (or appointments) you were offered?	Q.21 Overall, how would you describe your experience of making an appointment?	Q.32 Overall, how would you describe your experience of your GP practice?
Derbyshire Average	50%	68%	71%	54%	72%
National Average	53%	67%	72%	56%	72%

The following slides provide a breakdown by PCN and further explanation of ratings:

Ease of getting through to GP practice on the phone: how the PCNs within the ICS compare

Q1. Generally, how easy is it to get through to someone at your GP practice on the phone?



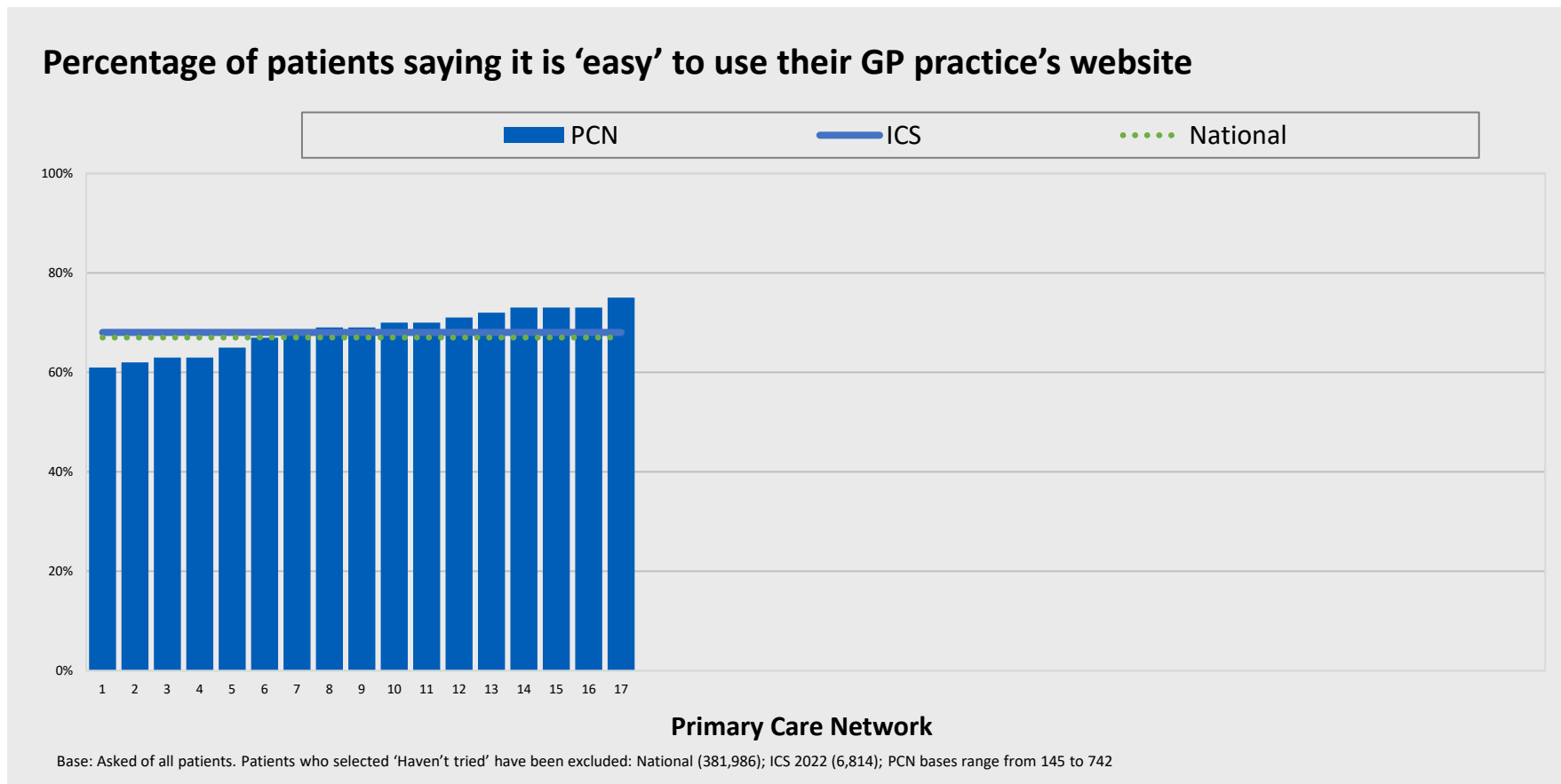
PCN	Name
1	PCCO PCN
2	DERBY CITY SOUTH PCN
3	OAKDALE PARK PCN
4	DERBY CITY NORTH PCN
5	GREATER DERBY PCN
6	SWADLINCOTE PCN
7	EREWASH PCN
8	CHESTERFIELD AND DRONFIELD PCN
9	SOUTH HARDWICK PCN
10	ALFRETON RIPLEY CRICH & HEANOR PCN
11	HIGH PEAK & BUXTON PCN
12	BELPER PCN
13	NORTH HARDWICK BOLSOVER PCN
14	NORTH EAST DERBYSHIRE PCN
15	SOUTH DALES PCN
16	GLOSSOP PCN
17	DERBYSHIRE DALES PCN

i Comparisons are indicative only: differences may not be statistically significant

i %Easy = %Very easy + %Fairly easy

Ease of use of practice website: how the PCNs within the ICS compare

Q4. How easy is it to use your GP practice's website to look for information or access services?



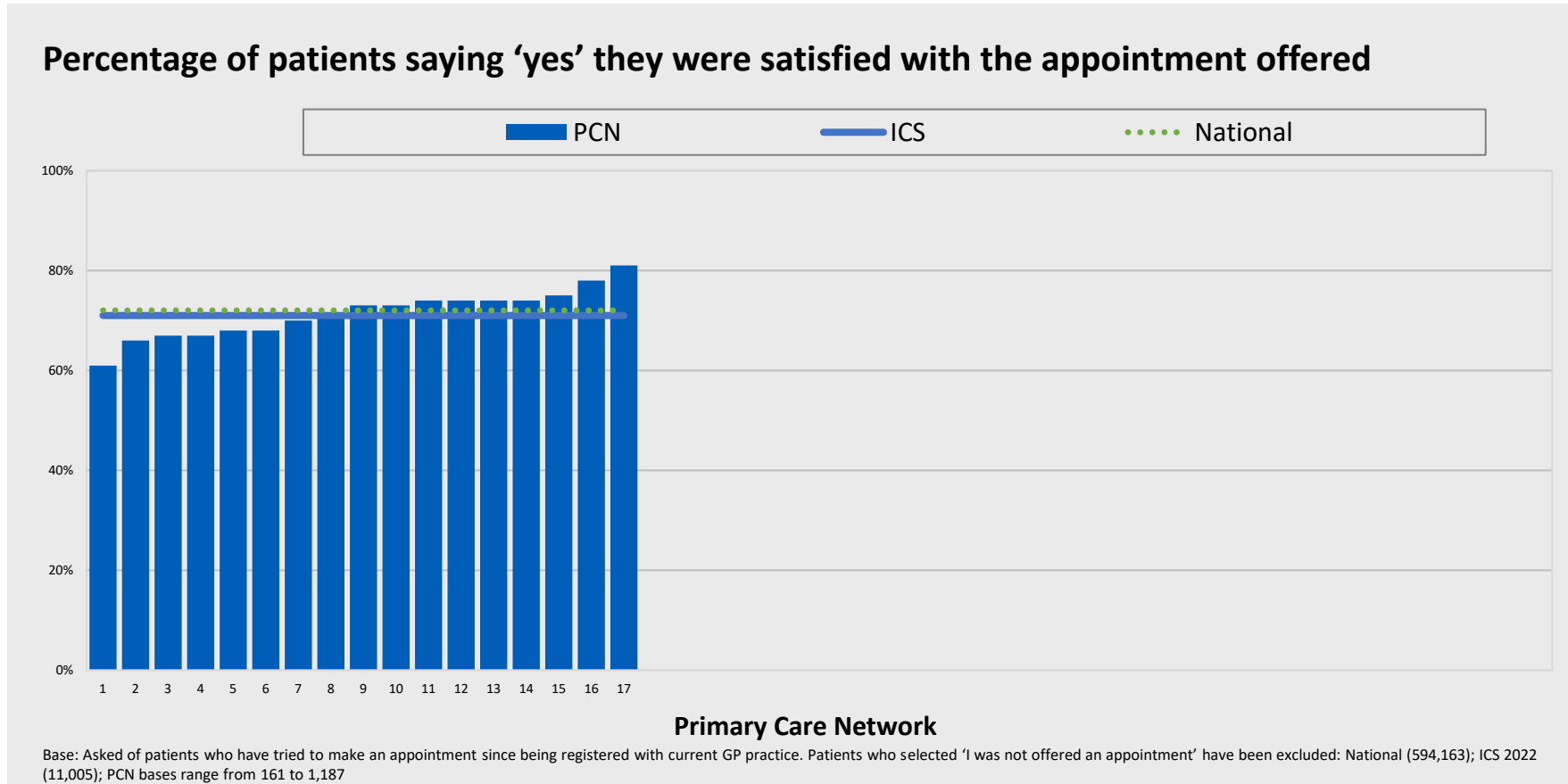
PCN	Name
1	EREWASH PCN
2	OAKDALE PARK PCN
3	DERBY CITY SOUTH PCN
4	DERBY CITY NORTH PCN
5	GREATER DERBY PCN
6	PCCO PCN
7	GLOSSOP PCN
8	SOUTH DALES PCN
9	SWADLINCOTE PCN
10	NORTH HARDWICK BOLSOVER PCN
11	BELPER PCN
12	HIGH PEAK & BUXTON PCN
13	SOUTH HARDWICK PCN
14	DERBYSHIRE DALES PCN
15	ALFRETON RIPLEY CRICH & HEANOR PCN
16	CHESTERFIELD AND DRONFIELD PCN
17	NORTH EAST DERBYSHIRE PCN

i Comparisons are indicative only: differences may not be statistically significant

i %Easy = %Very easy + %Fairly easy

Satisfaction with appointment offered: how the PCNs within the ICS compare

Q16. Were you satisfied with the appointment (or appointments) you were offered?



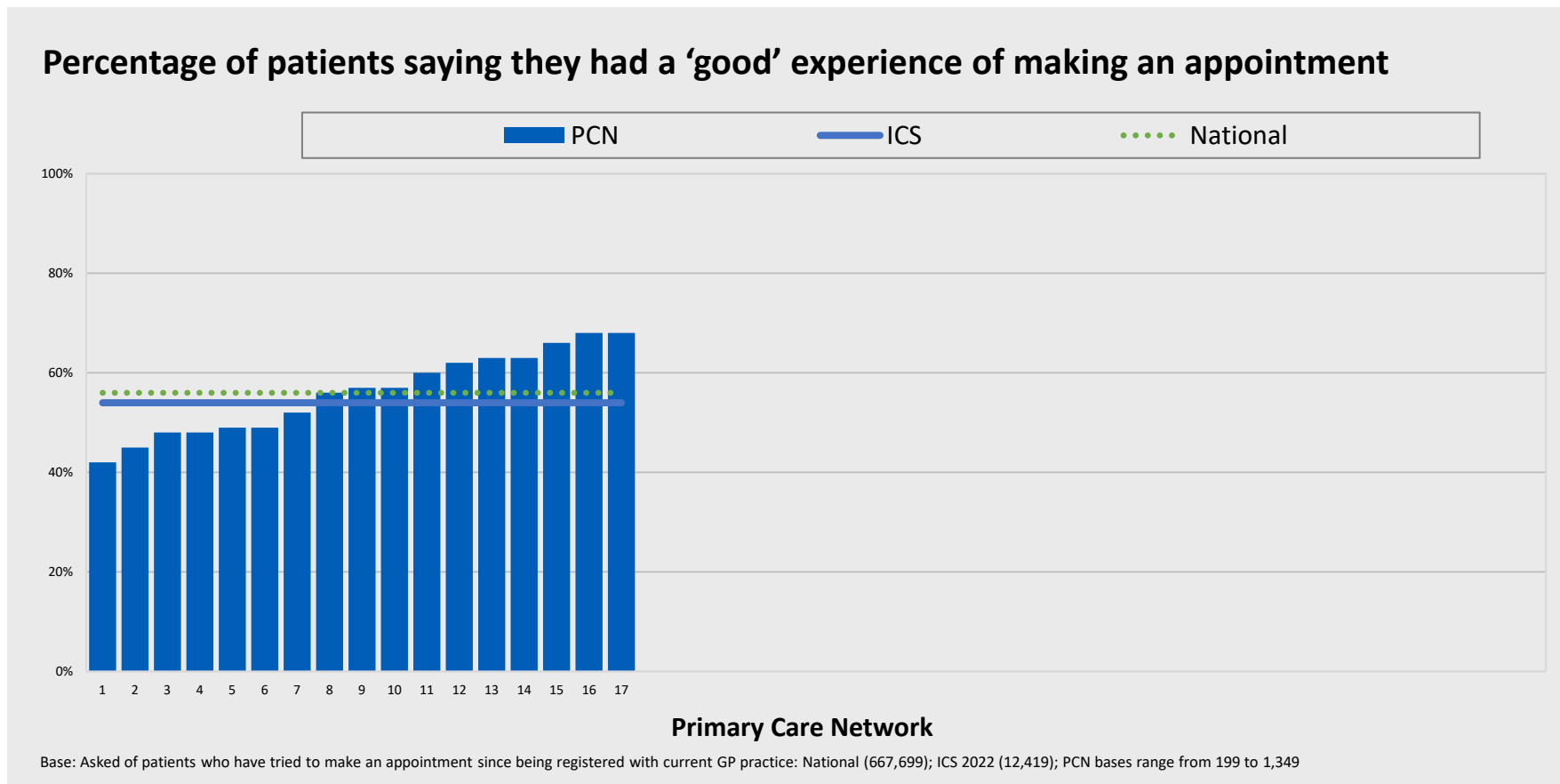
PCN	Name
1	PCCO PCN
2	SWADLINCOTE PCN
3	GREATER DERBY PCN
4	DERBY CITY NORTH PCN
5	DERBY CITY SOUTH PCN
6	OAKDALE PARK PCN
7	EREWASH PCN
8	ALFRETON RIPLEY CRICH & HEANOR PCN
9	SOUTH HARDWICK PCN
10	GLOSSOP PCN
11	NORTH HARDWICK BOLSOVER PCN
12	SOUTH DALES PCN
13	NORTH EAST DERBYSHIRE PCN
14	CHESTERFIELD AND DRONFIELD PCN
15	HIGH PEAK & BUXTON PCN
16	BELPER PCN
17	DERBYSHIRE DALES PCN

i Comparisons are indicative only: differences may not be statistically significant

i %Yes = %Yes, and I accepted an appointment

Overall experience of making an appointment: how the PCNs within the ICS compare

Q21. Overall, how would you describe your experience of making an appointment?



PCN	Name
1	DERBY CITY SOUTH PCN
2	DERBY CITY NORTH PCN
3	PCCO PCN
4	GREATER DERBY PCN
5	OAKDALE PARK PCN
6	SWADLINCOTE PCN
7	EREWASH PCN
8	SOUTH HARDWICK PCN
9	ALFRETON RIPLEY CRICH & HEANOR PCN
10	CHESTERFIELD AND DRONFIELD PCN
11	HIGH PEAK & BUXTON PCN
12	NORTH EAST DERBYSHIRE PCN
13	NORTH HARDWICK BOLSOVER PCN
14	BELPER PCN
15	GLOSSOP PCN
16	SOUTH DALES PCN
17	DERBYSHIRE DALES PCN

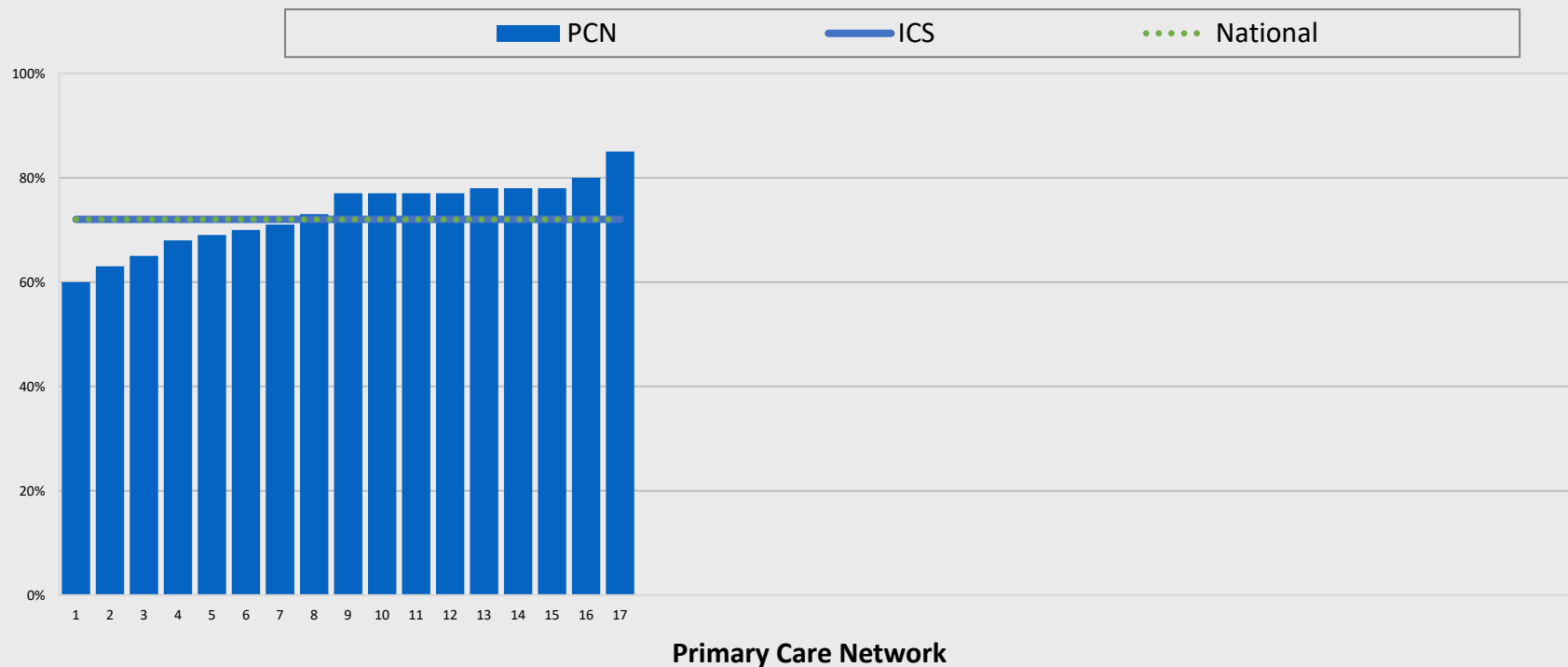
i Comparisons are indicative only: differences may not be statistically significant

i %Good = %Very good + %Fairly good

Overall experience: how the PCNs within the ICS compare

Q32. Overall, how would you describe your experience of your GP practice?

Percentage of patients saying their overall experience of their GP practice was 'good'



Base: Asked of all patients: National (709,235); ICS (13,138); PCN bases range from 213 to 1,415

PCN	Name
1	DERBY CITY SOUTH PCN
2	DERBY CITY NORTH PCN
3	GREATER DERBY PCN
4	SWADLINCOTE PCN
5	PCCO PCN
6	EREWASH PCN
7	OAKDALE PARK PCN
8	SOUTH HARDWICK PCN
9	NORTH HARDWICK BOLSOVER PCN
10	BELPER PCN
11	ALFRETON RIPLEY CRICH & HEANOR PCN
12	CHESTERFIELD AND DRONFIELD PCN
13	SOUTH DALES PCN
14	HIGH PEAK & BUXTON PCN
15	GLOSSOP PCN
16	NORTH EAST DERBYSHIRE PCN
17	DERBYSHIRE DALES PCN

i Comparisons are indicative only: differences may not be statistically significant

i %Good = %Very good + %Fairly good

Link to publicly available data:

Appointments in General Practice – ICB level and Practice level raw data available to download:

[Appointments in General Practice - NHS Digital](#)

Patient survey results:

[GP Patient Survey \(gp-patient.co.uk\)](#)

Any questions?