

HEALTH OVERVIEW AND SCRUTINY COMMITTEE

19 FEBRUARY 2024

ACCESS TO GP APPOINTMENTS

Summary

1. The Health Overview and Scrutiny Committee (HOSC) has requested an update on access to GP appointments.
2. GP access was added to the HOSC's work programme in order to understand more about how people are able to contact their local GP, availability of appointments/advice and the role of primary care in avoiding people presenting directly at Emergency Departments.
3. This follows recent discussions about in hospital patient flow and the Emergency Department (7 December 2023) and community-based health and care to reduce inappropriate admissions (9 January 2024).
4. The Chief Executive of NHS Herefordshire and Worcestershire Integrated Care Board (ICB) which commissions primary care, and a GP representative, have been invited to attend this meeting to respond to any questions the Committee may have.

Background

5. Access to primary care remains a high priority nationally for the population and local politicians, culminating in the publication of the national delivery plan for the Recovery of Primary Care Access in May 2023. It is a topic that is frequently raised at local meetings with partners and stakeholders, specifically the variation in patient experience, and often features as a discussion topic in the press and on social media.
6. On average, 5.5 million appointments are delivered in General Practice across Herefordshire & Worcestershire each year, excluding other local access incentive schemes. This is 19% more appointments than before the COVID-19 pandemic.
7. National data, studies and surveys frequently show that the population of Herefordshire and Worcestershire has some of the best access to, and experience of, primary care anywhere in England. The latest [national survey results \(2023\)](#) show the following headlines:

Question	HW ICS	National
% of patients reporting that it was easy to get through to the GP practice by telephone	56% (Rank 7/42)	50%
% of patients rating their overall experience of making an appointment as good	61% (Rank 6/42)	54%
% of patient rating their overall experience with their GP practice as good	76% (Rank 6/42)	71%

8. However, there is significant variation and not all patients have the same experience:

Question	Best	Worst
% of patients reporting that it was easy to get through to the GP practice by telephone	98%	25%
% of patients rating their overall experience of making an appointment as good	96%	35%
% of patient rating their overall experience with their GP practice as good	98%	54%

9. Addressing this variation is a significant priority to ensure that all patients experience services more akin to those that are experiencing the best. This pattern is reflected nationally, which has made it a high priority for Government to address.
10. Appendix 1 provides a summary of key headlines for primary care in Herefordshire and Worcestershire, and the main issues and plans to address the variation in access. Ease of access via telephone is of particular concern and the investment made by NHS England (NHSE) as part of the national programme to fund cloud-based telephony in all practices will have a significant impact on improving this. This is a requirement in the national plan and all 79 practices across Herefordshire and Worcestershire have already moved to the new system.
11. The variation will also be addressed via the production of the Primary Care Network (PCN) Capacity Access Improvement Plans (Page 13 of Appendix 2). During 2023/24 the ICB has been working with PCNs to monitor improvement against the current position for i) patient experience of contact and ii) ease of access and demand management for patients.

Herefordshire & Worcestershire Primary Care Access Recovery Plan (PCARP)

12. Work has been undertaken to produce a local Herefordshire and Worcestershire plan to meet the national requirements. A full copy of the plan was presented to the ICB in November 2023, which is attached at Appendix 2. The plan has been updated to reflect the current position and some key features are set out below. The plan has two central ambitions:
- i. To tackle the 8am rush
 - ii. To enable patients to know on the day they contact their practice how their request will be managed
13. The Plan focuses on four key areas to deliver the main ambitions and to support recovery:
- **Empower patients to manage their own health** including using the NHS App, self-referral pathways and via more services offered from community pharmacy.

- **Implement modern general practice access** to tackle the 8am rush, provide rapid assessment and response and avoid asking patients to ring back to book an appointment.
- **Build capacity to deliver more appointments** from more staff and add flexibility to the types of staff recruited.
- **Cut bureaucracy and reduce the workload** across the interface between primary and secondary care so that practices have more time to meet the clinical needs of their patients.

Current Assessment of Progress

14. The current assessment of progress is set out below, along with comments on key areas of strength and weakness. Good progress has been made in a number of areas, with 7 out of the 12 areas being rated as Green on the RAG rating.

Vision & Improvement	G	Alignment to PCARP, General Practice Strategy, Fuller, System Plans (Joint Forward Plan, Elective Care Recovery, Urgent Care Recovery)
Health Inequalities	G	Supports Equality, Diversity & Inclusion
PCN/Practice Actions	G	Overview of PCN (Primary Care Network) Capacity & Access Improvement Plans, MGPAM Transition/Transformation, prospective access & empowering patients - assurance and delivery
ICB Actions	G	Delivery plan checklist, SLF (Support Level Framework), Care Navigation, GPIP, Cloud Based Telephony
Assuring Delivery	G	Clear trajectory and milestones, progress to date
Finance	G	All funding tracked, payable in line with delivery
Transformation Programmes & Support	G	Practice participation in Improvement Programmes, Care Navigation Training, numbers signed up to Modern General Practice Model, Numbers participating in Support Level Framework visits, practice webinars
Communications	A	Delivery plan enablers in place (patients & Staff), including non-GP care routes
Co Production & Patient Voice	A	Plan co-produced – Healthwatch/PPGs
Primary/Secondary Care Interface	A	Reducing Bureaucracy, delivery plan in place
Self-Referral	A	Empowering Patients, prioritisation process in place to enable delivery
Expanding Community Pharmacy	A	Community Pharmacist Consultation Service (CPCS), Common Conditions, Independent Prescriber Pathfinder Programme, Blood Pressure, Oral Contraception, Discharge Medicines

15. The timeline for implementation is set out below, with the following key indicating the timelines for achievement.

	Already achieved		To be achieved before the end of the 23/24 financial year
	To be achieved by end of calendar year		To be achieved in 2024/25 financial year

Purpose of the Meeting

16. The HOSC is asked to:

- Consider and comment on the information provided on GP access; and
- Determine whether any further information or scrutiny on a particular topic is required.

Appendices

Appendix 1 – Primary Care Access (summary slides)

Appendix 2 – [Herefordshire and Worcestershire system delivery plan for recovery of primary care access \(2023-25\)](#)

Contact Points

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Background Papers

In the opinion of the proper officer (in this case the Assistant Director for Legal and Governance), the following are the background papers relating to the subject matter of this report:

- GP Patient Survey Website [GP Patient Survey \(gp-patient.co.uk\)](http://gp-patient.co.uk)
- Agenda and Minutes of the Health Overview and Scrutiny Committee on 9 January 2024, 7 December, 11 September, 15 June and 10 February 2023, 1 December, 17 October 2022, 18 October 2021 [Health Overview and Scrutiny Agendas and Minutes](#)

All agendas and minutes are available on the Council's website here.