

Social Care and Health Overview and Scrutiny Committee

23rd September 2021

Primary Care Access

1. Purpose

This report aims to set out how the pandemic has and will continue to change service delivery within primary care.

2. Recommendations

That the Committee note the contents of the report.

3. Primary Care Services

3.1. Primary care services are usually the first point of access to the healthcare system. For most people this is your local GP. Walsall has 52 GP practices, divided into seven Primary Care Networks. These are groups of closely connected local practices, working together with community, mental health, social care, pharmacy, hospital and the voluntary sector to provide a wide range of services.

All practices are members of the CCG, but the CCG does not run GP practices as these are individual businesses. The CCG commissions (buys) primary care services from GP practices to meet the needs of local people.

The regulator for GP practices, like other NHS services, is the Care Quality Commission (CQC).

3.2 Primary care challenges

Demand: There is an increasing demand for services, with a growing and ageing population with changing health needs, e.g. more people managing long-term health conditions.

GP workforce: the NHS cannot train and recruit GPs quickly enough to keep up with growing demand for their services.

A greater focus on prevention: modern practice roles/responsibilities include screening, vaccination and social prescribing.

For some time, the NHS has recognised the need to change how things are done in primary care, to make best use of resources and better meet modern healthcare needs.

3.3 Impact of COVID-19

Practices are working differently to keep patients and staff safe, restrictions have lifted but COVID-19 has not gone away. COVID-safe measures continue in all parts of the

NHS and where possible people are asked that they don't attend GP practices unless asked to do so. However all Walsall GP practices are open and anyone who is unable to access care remotely will be triaged face to face at the practice.

GPs have been at the forefront of delivering COVID-19 vaccination programme, this has been a vaccination drive of unprecedented-scale and has therefore presented challenges to ensure local delivery of the vaccine programme versus maintaining primary care access to core services. There has been an increase in demand on primary care services post-lockdown with patients now seeking help with issues they may have put off during lockdown.

The pandemic has caused the NHS to accelerate transformation plans – especially in digital technology – that might otherwise have taken years to bring in.

3.4 Current primary care performance

The average number of appointments for Q1 2021/22 were the same level as Q1 2019/20 before the pandemic. Over half a million GP appointments are carried out per month across BCWB. More than half (56%) of appointments have been face to face. Almost half (49%) of all appointments are same day appointments – up from 43% before the pandemic. 56% of appointments are with a GP, the same proportion as before the pandemic (average 54%).

Data shows that supply is broadly what it was pre-pandemic, but it demonstrates that demand is up – practices report up to 150% of the call volumes experienced pre-pandemic.

We are aware that there are challenges getting an appointments in certain areas of Walsall. The CCG is working with these practices to improve access for patients. All GP practices are open for business.

In response to the increased demand, GPs are investing in new technologies to support virtual appointments and prescription ordering. They are introducing telephone triage/healthcare navigation to ensure that patients are directed to the right professional at the right time for their specific healthcare needs. Face to face GP appointments are still happening and are available depending on the levels of demand and the type of concern where a face to face appointment is clinically appropriate. Patients who are vulnerable, are unable to use technology, or who clinically need to be examined in person by a doctor, will always be prioritised for in-person appointments.

GP practices are also using different clinical roles within primary care to support managing the increase in demand such as Pharmacists, Physician Associates and Advanced Clinical Practitioners.

4. Conclusion

Primary care is changing and it is acknowledged that patients have quickly adapted to the new ways of working. There have been benefits seen from the new way of working, over and above the need to protect services. It's likely that some of these will remain in the future, for example increased use of online and virtual consultations where it meets the patient needs.

Background papers

Report information sources:

- Presentation given to Health Watch members on 6th August 2021 by: Geraint Griffiths-Dale – Managing Director, Walsall Place; Dr Sukhpal Gill – GP and Walsall Commissioning Board member; Corrine Ralph – Head of Primary Care (Strategic Commissioning and Contracting), BCWB CCG

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