

Report to Solihull Health Adult Social Care Scrutiny Committee

Access to GP Services for Solihull Residents - Wednesday 9th November 2022

1. Introduction and Background

The purpose of the report is to update Solihull Health Adult Social Care Scrutiny Committee regarding how Solihull, and in the context of the wider Birmingham and Solihull system (BSol), general practice (GP) teams are responding to ongoing operational pressures. BSol Integrated Care System recognises the strength of feeling regarding access to GP services for Solihull residents. We are committed to working together to meet increasing demand and improve access for Solihull residents. The report sets out progress since the last update to Scrutiny Board in June 2022.

The NHS and GP continues to experience severe pressures. GP practices across the country reflect this with rising demand and workforce pressures leading to demand out stripping capacity. Solihull's GP practices continue to be at the forefront of the NHS response to the COVID-19 outbreak, supporting system recovery and ongoing patient care.

BSol currently holds 20 contracts with GP providers across Solihull, delivering services from 37 sites. A further 162 contracts are held with Birmingham GP providers, delivering from 201 sites. There is no practice within Solihull rated lower than Good by the Care Quality Commission (CQC) this includes more recent reviews by the CQC of practices that have been under scrutiny.

2. Demand and Activity

General Practice have made significant strides in increasing appointments:

- Across BSol - General practice is offering 16.6% more appointments on the same day and up to 7 days compared to April 19 to March 2020 - with 5.5 million offered in the baseline period compared to 6.4 million in the 12 months up to August 2022.
- Specifically in Solihull General Practice teams offered 24% more patient appointments for the post pandemic period of February 2022 to August 2022 compared with the same months in pre pandemic 2019.
- In August 2022, 87% of patients in Solihull were seen within two weeks. A number of the remaining 13% of patients will be those requiring a routine longer term follow up. 46% of these patients were seen on the same day.
- In August 2022, the Solihull General Practice Appointment rate per 10,000 weighted patients was 4,469, significantly above the England rate of 4,284.
- Across BSol there has been a 5% increase in patient appointments being offered on the same day - 50% in August 2022 compared with 45% in August 2019.

3. GP Operating Model

In England, prior to the COVID-19 pandemic, almost 80% of all appointments in general practice were delivered face-to-face. National guidance set the direction to transform general practice to provide a more integrated and accessible digital service, the COVID-19 period accelerated this digital transformation.¹ As part of the response to COVID-19, all practices across Birmingham and Solihull switched to a locally agreed operating model based on national guidance, based on national guidance and codeveloped with frontline clinicians and commissioners. Solihull practices have kept this model under review and as they continue to develop the model and respond to patient needs

¹ [Digital-First Primary Care \(england.nhs.uk\)](https://www.england.nhs.uk/digital-first-primary-care/)

and feedback. The percentage of face to face appointments as a total of all appointments has increased month on month during 2022, from 58% in January to 70% in August..

4. Patient experience

Between May 2022 and September 2022, 19 Solihull complaints out of a total of 158 for Birmingham and Solihull were received by the ICB in relation to primary care services from patients and MPs/Councillors. This is a 63% decrease compared to the previous 5 months data between December 2021 to April 2022, whereby 52 complaints were received. The top two themes in Solihull related to telephone waiting times and access to same day appointments.

The 19 Solihull complaints all related to Solihull Health Partnership (SHP) – for SHP this is a 32% decrease compared to the previous 5 months data between December 2021 to April 2022, whereby 28 complaints were received. SHP and the ICB have agreed an action plan specifically focusing on improving access. SHP routinely provide updates to the ICB and regularly update their patients through their Patient Participation Group and practice website.

5. Ensuring access and increasing capacity

Solihull practices continue to work collaboratively, and in conjunction with the ICB are responding to meet demand and operational pressures through both local and national initiatives.

5.1 Range of services

General practice teams across Solihull continue to provide the following services:

- Urgent same day primary care access, including referrals and urgent treatment/tests
- Long term condition management
- Supporting secondary care for elective backlog
- All annual health checks
- Phlebotomy and diagnostics
- National screening programmes
- Vaccinations and immunisations for all groups, including 700,000 COVID-19 vaccination.

5.2 Recruitment and Retention and the Additional Workforce

Recruitment and retention in general practice has been challenging nationally, the number of full time GPs in England falling from 5.2 per 10,000 patients in 2015 to now being 4.5 per 10,000 patients². Solihull has a slightly higher position than the national position with 4.6 GPs per 10,000 patients. The national position is reflected at a local level and in response to this there has been a focus on recruiting additional health professional roles to help bolster staffing levels. There are currently a total of 401 FTE PCN Additional Roles in BSol, with Solihull specifically identified to benefit from 68 FTE Roles. This is a rate of 2.9 additional roles in Solihull per 10,000 weighted patients versus 2.8 additional roles across BSol as a whole.

5.3 Winter Planning Guidance

In September, the publication of two documents focussed on improvements for patient access and supporting general practice. *'Our Plan for Patients'*³ a Department of Health and Social Care Policy Paper set out a range of measures to meet patient expectations, this included the following key national delivery areas:

- an expectation that everyone who needs an appointment can be seen within 2 weeks

² [NHS Confederation submission to HSCSC inquiry future of general practice.pdf](#)

³ [Our plan for patients - GOV.UK \(www.gov.uk\)](#)

- patients with urgent needs are seen on the same day, including opening up time for more than a million extra appointments over winter
- make it easier to contact your practice, by making an additional 31,000 phone lines available
- inform patients by publishing data on how many appointments each GP practice delivers, and the length of waits for appointments, to enable patient choice
- require the local NHS (integrated care boards) to hold practices to account, providing support to those practices with the most acute access challenges to improve performance

This was followed by an NHSE letter - *'Supporting general practice, primary care networks and their teams through winter and beyond'*⁴

- The letter set out key actions for operational resilience and increased capacity
- Asked for proposals to increase capacity and access to acute episodic care, which then integrate with the wider ICS system
- Set out an ICB Framework for Supporting General Practice
- Identifies areas to reduce workload in primary care and examples of principles/tools to reduce unnecessary burdens on general practice.

Solihull PCNs are currently developing their responses to this document as well as setting out broader access proposals for consideration by the ICS to support additional winter access, this will build on learning from last winters primary care surge planning.

5.4 Improving Communication and Engagement with our Local Population

Information is communicated through a variety of printed and social media routes regarding how BSol patients can access primary care services and specifically general practice care.

To support the consistency of messaging approach a GP access toolkit has been developed and shared with ICS communication and engagement leads to share through their own communication routes. At a practice level, patients are signposted to services on practice websites, telephone systems have signposting and messaging services recorded to support patient direction.

The ICB website has been updated to provide a resource for practices and patients.

<https://www.birminghamsolihull.icb.nhs.uk/health-information>

With the development of the integrated care system, two-way communications between patients, carers, local people and primary care will be more essential than ever before. It is equally important that that engagement benefits everyone and as such the Integrated Care Board will be putting in place a primary care communications plan and supporting primary care across Birmingham and Solihull to more fully engage with patients.

6. Solihull Healthcare Partnership

As stated in section 4 of the report Solihull Health Partnership (SHP) and the ICB have agreed an action plan specifically focusing on addressing patient experience concerns associated with access. In addition, an Intensive Support Plan has been developed and agreed between NHS England Primary Care Transformation Team and SHP, with the aim of improving services to SHP registered patients.

- Appointments - SHP have increased appointment capacity. SHP delivered a total of 112,698 appointments between April 22 and August 22, this is a 46% increase on pre covid activity levels April 19 to August 19, and an increase of 8% on activity during the same period in 2021.

⁴ [NHS England » Supporting general practice, primary care networks and their teams through winter and beyond](#)

- Telephony - SHP telephone answering performance improved significantly in August 2022 from 21 minutes and 32 seconds in June to an average wait time of 11 minutes and 31 seconds. The most recent audit in October 2022 showed an average call time of 19 minutes and 49 seconds, compared to Solihull average of 24 minutes and 34 seconds. The ICB remain in dialogue with SHP to maintain ongoing focus improving performance.
- Workforce recruitment - SHP continue to develop the retention and recruitment approach to their Care Navigation team. There has been further recruitment of additional healthcare professionals aimed at supporting GPs continues, including Physician Associate, Clinical Pharmacist and Pharmacy Technician. In October 2022, SHP have added the role of Mental Health Nurse.
- Training & Development – The SHP Care Navigation team are trained to ask questions to direct all callers to the most appropriate resource. SHP are continuing to further upskill their Care Navigation team with an improved training/development programme and support for wellbeing.
- Telephone Access System Review and Reconfiguration is in progress to improve call flow and telephone audio messaging, resolve technical issues following patient feedback and to ensure improved patient journey.
- Digital Access – there remains an ongoing focus on developing digital offer. For example, improving their web site to support patient access, with support and engagement from NHS Birmingham and Solihull ICB and the SHP Patient Participation Group, to achieve this.
- Appointment scope and capacity review - This review is in progress to ensure patients see the right healthcare professionals at the appropriate time.
- Community Pharmacy Consultation Scheme - SHP have also increased utilisation of the Community Pharmacy Consultation Service, with 1,025 referrals to the Community Pharmacist Consultation Service from July to September 2022.

7. Conclusion

General Practice in Solihull continues to be faced increasing demand for GP appointments. This trend is consistent with national and local comparison. In order to improve access for patients, many of the initiatives that have been implemented appear to have been well received locally, with evidence demonstrating increased activity levels being delivered at both a practice and PCN level.

Complaint numbers are reducing, but despite this a proportion of Solihull residents continue to have concerns regarding access to GP services.

Winter plans will need to further address and support improvements in capacity and access, although it must be noted this will remain a challenge.

8. Next Steps

The ICB is currently engaging with GPs, community teams and UHB to design an Integrated Neighbourhood Team exemplar in Solihull, to support improved access to primary care and same-day urgent care. We have described this model in our recently-published Operating Framework and will return to the committee at a future meeting to update progress on this.

The ICB is supporting our PCNs and practices through additional managerial and clinical leadership resources. A dedicated GP access team and system clinical lead has been established; along with the development of a new GP Provider Support Unit. This function will work with GP teams to align additional and existing clinical, managerial and business support teams to encourage collaboration, service improvement and promote practice resilience.