

ADULTS AND HEALTH SELECT COMMITTEE

THURSDAY 13 APRIL 2023



GP ACCESS

Purpose of report: Update to the committee

Introduction:

1. Good access to general practice is an important element of quality of care. The COVID pandemic caused considerable changes to how patients access GP appointments and Primary Care services. The number of appointments in general practice fell quickly and considerably during the start of the pandemic and many practices adopted a digital first approach to the services they offered. Practices also adopted total triage in which patients provided some information on symptoms or reasons for contacting the practice and were triaged before appointments were made.

At the start of the pandemic the number of appointments in general practice fell by a third from 24m to 16m however same day appointments remained roughly the same. Since then, the number of appointments has returned to levels seen before the pandemic.

A remarkable achievement since the pandemic began has been the rollout of the COVID vaccination programme with GPs and Primary Care Networks (PCNs) being at the forefront of this programme – a service they continue to provide today within their communities with the ongoing booster campaigns.

Demand on Primary Care services continues to be high. Across the country there is ongoing strain to meet patient expectations and demand whilst experiencing a decline in GP numbers, ongoing recruitment into the profession and retention of staff. As of January 2023, there were 36,488 individual (headcount) fully qualified GPs working in the NHS in England. In Full Time Equivalent (FTE) terms of 37.5 hours a week, this equates to 27,287 full-time fully qualified GPs.

Over the last year, the NHS has lost 402 individual (headcount) GP partners and 244 salaried, locum and retainer GPs. This has created a net loss of 646 individual GPs since January 2022. In FTE terms of 37.5 hours per week, this

amounts to an equivalent loss of 470 full-time fully qualified GPs in the last year alone.

In January 2023, 26.8 million appointments were booked – a 9 per cent increase from the previous month. In terms of access, 45.3 per cent of appointments in January 2023 were booked to take place on the same day. 85.4 per cent of appointments were booked to take place within 2 weeks. In terms of appointment mode, 69.4 per cent of appointments were booked to take place face-to-face (including home visits) in January 2023, an increase from the previous month.

Expanding the workforce

2. The needs of our communities are greater than ever before. Our local populations are being impacted more and more by complex long term conditions (LTCs). Over a quarter of the population of England (15.4 million people) has at least one long term condition. An LTC is a health condition that cannot be cured but can be managed with medication and/or lifestyle changes. LTCs include diseases such as arthritis, frailty, asthma, diabetes, epilepsy, cardiovascular disease, COPD and mental health issues including depression and eating disorders. LTCs are rising in prevalence.
3. Care for people with one or more LTCs is complicated because different conditions and their treatments often interact in different ways. Health systems have traditionally been set up to manage discipline specific care, however we are now working with patients to manage their LTCs in a more holistic way, considering all conditions in the management of their care. Mental health problems such as depression are known to be common in patients with LTCs, the prevalence of mental health problems often increases with the number of LTCs. This can have negative impact on the patient's ability to manage their conditions and result in an increased demand on GP appointments presenting with complex needs.
4. There is also a concern about the longstanding unmet health need and as such the wider determinants of health are playing a bigger role. These challenges increase the pressure on the system and so there is more to do in focussing on treatment to preventing people becoming unwell whilst also tackling health inequalities within our local communities.
5. To support manage demand the additional roles reimbursement scheme also known as ARRS provides funding for PCNs in England to recruit additional 26,000 roles to build multi-disciplinary teams in Primary Care. ARRS brings specialist skills directly into practices along with general clinical knowledge and skills that can add important capacity to GP practices and nursing teams. It increases choice for patients who can be seen quicker and for longer which in turn allows GPs to focus on patients with complex needs.

6. The overall value of the ARRS programme in 2022/23 is in excess of £1 billion. At local level a PCN is allocated a sum for an entire year based on its weighted population. PCNs can then claim up to its maximum sum.

Surrey Heath Primary Care

7. Our population is 98,142 covering the towns and surrounding areas of Camberley, Frimley, Frimley Green, Lightwater Bagshot and Ash. Within the Surrey Boundary we have 7 GP practices and 1 Primary Care Network (PCN)
8. All seven of our GP practices offer services under a GMS contract working core hours between the hours of 8am and 6.30pm Monday to Friday. This excludes UK bank holidays. All practices offer triage services so that patients can be seen by the most relevant clinician and referred appropriately.
9. To further improve access to appointments outside of core working hours the GP practices work together on a rotational basis so that patients can access appointments outside of normal working hours, this also includes weekends.
10. Patients can book appointments by phone and econsult. All practices offer face to face and virtual appointments. In addition, we offer language line services, specifically for patients who for example may be hard of hearing, deaf or speak limited English.
11. Practices also communicate with patients using the Accurx text messaging system. This helps practices connect with patients by SMS message providing appointment confirmations and reminders, schedule screening, providing information and alerts.
12. Patients can also access the Frimley Healthier Together website (www.Frimley-healthiertogether.nhs.uk) A website designed to give local advice and support to help manage and improve the health and wellbeing of babies, children and young people. This site helps navigate parents and carers to services that can support them in the local area.
13. Clinicians routinely refer patients to this website for additional support, guidance and signposting. The number of people that have accessed the website is 155,098 with 358,943 page views. There is also a Healthier Together facebook page which has 764 followers.
14. Patient quote on using the website

Mrs B, Camberley

I used the Frimley Healthier Together website when my daughter was unwell with a sore throat and temperature. It helped me to manage her care at home and know what symptoms to look out for. After a few days with no improvement, I checked back on the site to see what to do next. Following their traffic light guidance, I spoke to our GP who prescribed treatment that afternoon. The site is very handy and really easy to understand. I'll be sure to use it again and again for my three children!

Signposting and self care

As demand for NHS services increases, particularly when services are under considerable pressure, for example our local A&E departments at Wexham Park Hospital and Frimley Park, it is important that patients are seen and supported by the appropriate service for their health concern.

The following information is available on our websites, social media sites, practice waiting rooms. Information is also disseminated in national NHSE campaigns and with wider stakeholders:

- Visit your local pharmacy
- During the day contact your GP practice via an online consultation or phone
- Contact NHS 111 online, www.111.nhs.uk or dial 111. If you are calling NHS 111, please be patient. NHS 111 may advise you to contact your GP or its out-of-hours service or attend the Bracknell Minor Injuries Unit.
- For minor injuries, such as sprains and strains, suspected broken limbs, minor head injuries, visit the Minor Injury Unit at Brants Bridge in Bracknell – open 8am-8pm 7 days a week. X-ray available Sunday to Friday. You can also visit the High Wycombe Urgent Treatment Centre <https://www.buckinghamshireccg.nhs.uk/public/your-services/feeling-unwell/urgent-treatment-centre/>
- Anyone with a life-threatening condition should call 999.
- There are many ways to access help and support close to home.

Know where to go when feeling unwell

Download the NHS App to:

- view your Covid-19 vaccination details
- book appointments
- view your health record and more
- order repeat prescriptions
- get health advice



Self Care

Be prepared to care for yourself with a well-stocked medicine cabinet and plenty of rest if you have:

- an upset tummy
- pain or headache
- sore throat (but if for two weeks or more contact your GP)

For health advice, visit www.nhs.uk

For self care advice, visit www.frimleyhealthandcare.org.uk and search 'stay well'

Not sure what to do when your child is unwell? If you are worried about a child, visit the Frimley Healthier Together website: frimley-healthiertogether.nhs.uk



Pharmacists

are qualified healthcare professionals, who can offer clinical advice and over-the-counter medicines.

Ask for help with:

- minor aches and pains, burns and scalds, head lice, etc.
- bites and stings
- queries about medication dosage, type or suitability plus urgent requests
- medication related to hospital discharge
- repeat prescriptions



GP surgery

Visit your GP surgery website and click on eConsult to:

- get help for a condition that has not improved after seeking help from your pharmacy
- to report urgent conditions that are not life threatening
- to report a deteriorating chronic condition

Please continue to use usual routes, including online patient access, to order repeat prescriptions. If you do not have access to the internet, you can continue to phone your surgery



Visit 111.nhs.uk or call NHS 111

when the situation is not life threatening and:

- if you think you need to go to hospital
- if you don't know the most suitable place to go or call
- if you don't have a GP to call or if your GP practice is closed
- if you need advice or reassurance about what to do

Available 24 hours a day, every day. If needed, an NHS advisor will help you to be seen quickly and safely.



Minor injuries

A minor injury service is only for conditions such as the following:

- sprains and strains
- suspected broken limbs
- minor head injuries
- cuts and grazes
- minor scalds and burns
- skin infections

Whether you're booked into the minor injury service via your GP, NHS 111 or you decide to walk-in, the service is available 7 days a week, from 8am-8pm.

The minor injury service is located at Bracknell Urgent Care Centre.



Emergency department or call 999

Only for very serious or life-threatening situations. This can include:

- loss of consciousness
- an acute confused state
- fits that are not stopping
- chest pain
- breathing difficulties
- severe bleeding that cannot be stopped
- severe allergic reactions
- severe burns or scalds

Call 999 immediately if you or someone else is having a heart attack or stroke.

Also call 999 if you think someone has had a major trauma, such as after a serious road traffic accident, a stabbing, a shooting, a fall from height, or a serious head injury.

If you are unsure, call NHS 111 or go on-line at 111.nhs.uk



For urgent help for your mental health, use the NHS 111 online service, or call 111 if you are unable to get help online.

If you've injured yourself, taken an overdose or are in an emergency and believe that your life is at risk, please dial 999. www.nhs.uk/oneyou/every-mind-matters provides NHS-approved expert advice and practical tips to help you look after your mental health and wellbeing.

You can also text Shout 85258. Shout is a free, confidential, 24/7 text messaging support service for anyone who is struggling to cope.

For mental health services local to you, please visit Mental health services (frimleyccg.nhs.uk)

Not sure what to do when your child is unwell? If you are worried about a child, visit the Frimley Healthier Together website: frimley-healthiertogether.nhs.uk

For more information visit www.frimleyhealthandcare.org.uk

Do you need help
with your mental health?



You can access these free services directly, but you can also talk to your GP about how you're feeling



Community Connections

1:1 support and wellbeing activities

- 01276 409415
- communityconnections@catalystsupport.org.uk
- Text: 07919 541 424



Richmond Fellowship

Employment support

- 01932 910942
- www.richmondfellowship.org.uk



Hope Hub

At risk of homelessness and/or unemployed

- Visit the portacabin behind Camberley library
- 01276 581174 - Leave a voicemail



Safe Haven

In a crisis visit instead of Accident and Emergency

- Safe Haven @ Wellbeing Centre, 121-123 Victoria Road, Aldershot, GU11 1JN
- 6pm-11pm Mon-Fri
- 12.30pm-11pm weekends and bank holidays



All ages crisis line 24/7

- 0800 915 4644
- Textphone: 18001 0800 915 4644
- SMS text: 07717 989 024



Talking Therapies

- Visit the Healthy Surrey website <https://www.healthysurrey.org.uk/>

We also actively promote self care, particularly throughout winter when common ailments such as cough, colds and seasonal influenza are in circulation



Winter Additional Capacity

15. This winter Frimley ICB committed £1.2 million funding to put in additional capacity from December through to April. In Surrey Heath this added an additional 7204 patient appointments. These appointments included paediatric twilight nurse led clinics, respiratory clinics, health check and GP appointments.

Additional Roles within the Network

16. The PCN have strengthened the Primary Care workforce by recruiting to several ARRS roles including:

- Social Prescribers
- Health and Wellbeing Coaches
- Pharmacists
- Pharmacy Technicians
- Dieticians
- First Contact Physiotherapists
- Occupational Therapists
- Trainee Nurse Associates
- Nurse Associates
- Care Coordinators

17. These roles form part of the wider multi-disciplinary team offering a range of clinical and support services. ARRS staff work both in practices and within the community, they also provide home visits and are an integral part of the wider network.
18. Some examples of how the ARRS roles have recently supported local patients:

Health and Wellbeing Coaches have been directly working with 200 patients diagnosed with Irritable Bowel Syndrome (IBS). These interactions have helped patients manage symptoms and support them in having better control of the disease. Patients reported fewer flare ups, fewer calls to the GP and felt more in control of their condition.
19. Pharmacists have been actively working in care homes in delivering structured medication reviews (SMRs). With over 1300 care home beds this is no small task. These comprehensive reviews take into consideration all aspects of health reviewing medications and having shared decision-making conversations with patients to suit their health needs, preferences, and circumstances. These reviews often result in improved experience of care, fewer risks of side effects, better value for the health system e.g., reducing medicine waste.
20. Further supporting the work in care homes, the ARRS dieticians are working closely with patients and care home staff to encourage healthier eating, lifestyle improvements and supporting wellbeing.
21. In Surrey Heath patients can see a musculoskeletal first contact practitioner at their local GP practice without being referred by their GP. They can help patients with back neck and joint pain by assessing and diagnosing issues, giving expert advice on how to best manage their condition, and referring them on specialist services if they need to. By making it easier for patients to access a practitioner patients will have quicker access to diagnosis and treatment helping them to manage their condition and recover faster. Having these roles in practices also helps GPs manage their workload more effectively and reduce the need for onward referrals.

COVID vaccination services

22. We have a PCN led vaccination hub at the square in Camberley, this service is both walk in and bookable on the national booking system (NBS). We have secured the use of this site for the spring booster campaign which is due to commence on 17 April 2023. This centrally located site has been very popular throughout the vaccination campaign offering ease of access for vaccination to all eligible cohorts. Up to Dec 2022 the site alone has given 188,000 vaccine doses.
23. To support the COVID vaccination campaign and support uptake in areas of lower uptake we also have access to a bus. This bus has proven to be

useful in outreach work particularly in those with learning disability, the clinically extremely vulnerable and addressing health inequalities.

24. We do have plans to utilise the bus for the spring booster campaign, consideration is also being given to how we could use mobile services to offer further support and signposting to our communities.

Asylum Seekers

25. Between 2015 and September 2022, 447,510 people were permitted entry to the UK via safe and legal protection routes. As of November 2022, there have been 231,597 refugees, 127,421 pending asylum cases and 5,483 stateless persons in the UK. In the year ending September 2022, the UK received 72,027 asylum applications from main applicants only (relating to 85,902 people). This is over double the number of applications in 2019 and the highest number for almost 2 decades. The increase in applications in the year ending September 2022 is likely linked to a sharp increase in irregular migration, predominantly small boat arrivals to the UK, of which almost all claim asylum.

Which countries do asylum seekers originate from?

- ❖ In 2021, 43% of asylum applicants were nationals of Middle Eastern countries, 28% were nationals of African countries, 18% were nationals of Asian countries, and 12% were from Europe.
- ❖ Iranian was the top nationality claiming asylum in the UK in 2021 (9,800 applications, main applicants only), as it has been in every year since 2016. Followed by Iraqi (6,141), Eritrean (4,648), Albanian (4,522), Syrian (3,353) and Afghanistan (2,471).

26. Over 1,200 people are being provided with temporary accommodations in Surrey. Around 60 per cent hosted in initial accommodations, 30 per cent in Afghan bridging hotels and 10 per cent in overflow dispersal accommodations.
27. Migrants will often come from countries with very different health care systems to the UK. Just like the rest of the general public, primary care services are the first point of contact for migrants looking to access to the healthcare system. Immigration status does not affect ones right to register with a GP in England. Primary care includes general practice, community pharmacy, dental, and optometry (eye health) services.
28. We have a hotel dedicated to housing asylum seekers which host 119 guests. On arrival all guests at the hotel are offered registration at our

Bartlett Group Practice. They are offered health checks, vaccinations and children and women are offered health visiting and maternity support. We are working closely with the local authority and practice to ensure new guests are offered healthcare support and signposting.

29. Engagement shed light on the high priority work that service providers across Surrey are currently striving to deliver to this population group; ranging from GP registrations to initial health assessments, from screenings to dental care. Having gained invaluable experience through supporting the influx of asylum seekers and refugees to Surrey over the last year, service providers in primary care have gained a clearer understanding of the needs of this population group and now have greater awareness of key challenges, gaps and priorities.

Digital Self-Management

30. The ICB have been working with getUbetter in supporting patients with digital therapeutics for minor injury. getUbetter is an app which provides 24/7 self-management support. This app helps strengthen the Musculoskeletal (MSK) pathway across the system. The app provides evidence based digital self-management support for all common musculoskeletal injuries including back, leg, shoulder, knee and ankle pain. At present the app is only available in English.
31. The app can support of 20 per cent of all GP appointments and reduce new and follow up appointments by 13 per cent. It is estimated that the app will reduce MSK physio referrals by 20 per cent and therefore result in direct cost savings to the ICB. The app can also reduce prescriptions for MSK by 50 per cent and evidence shows it reduced pain in 7 out of 10 patients. 86 per cent of users say it's easy to use and get started, with 71 per cent believing the app to have helped them self-manage their condition.

Since the App was launched in January 23, the ICB has 520 active users. These numbers are increasing each week.

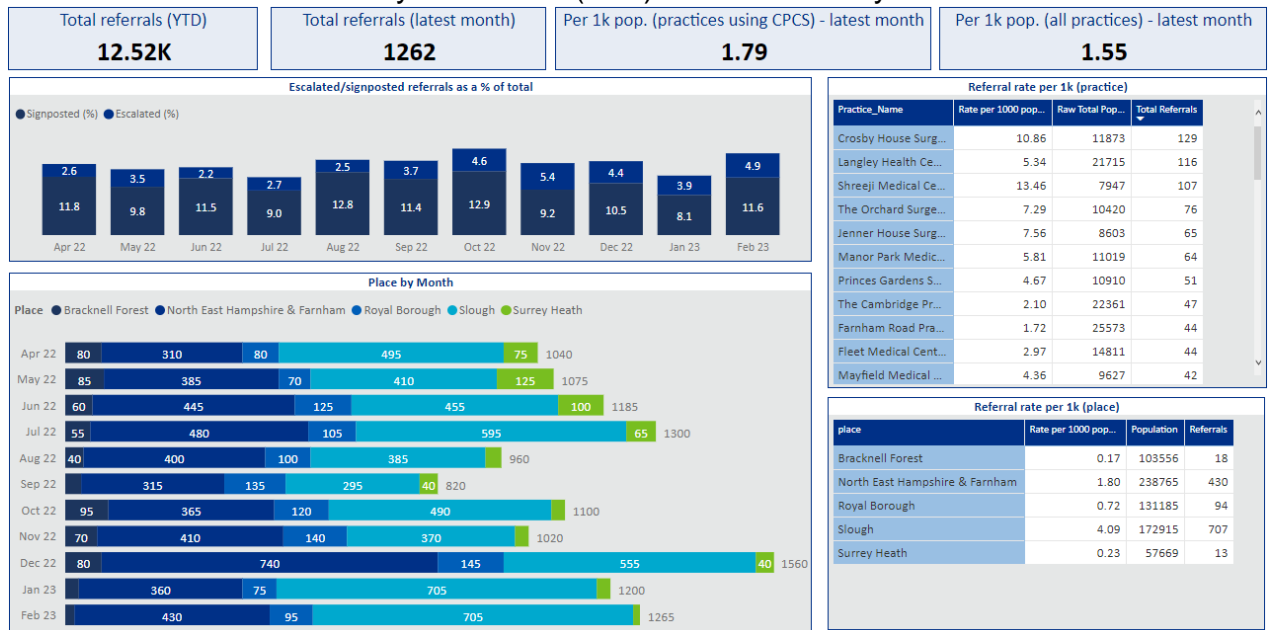
Community Pharmacist Consultation Scheme (CPCS)

32. The NHS Community Pharmacist Consultation Service (CPCS) launched on 29 October 2019 as an Advanced Service. Since 1 November 2020, general practices have been able to refer patients for a minor illness consultation via CPCS, once a local referral pathway has been agreed. In Surrey Heath six out of the seven practices are part of the scheme.
33. The service connects patients who have a minor illness or need an urgent supply of a medicine with a community pharmacy. As well as referrals from general practices, the service takes referrals to community pharmacy from NHS

111 and NHS 111 online, Integrated Urgent Care Clinical Assessment Services and in some cases, patients referred via the 999 service.

34. The CPCS aims to relieve pressure on the wider NHS by connecting patients with community pharmacy, which should be their first port of call and can deliver a swift, convenient, and effective service to meet their needs. Since the CPCS was launched, an average of 10,500 patients per week across the UK are being referred for a consultation with a pharmacist following a call to NHS 111; these are patients who might otherwise have gone to see a local GP.

35. The table below shows the year to date (YTD) data for Frimley ICB



Data correct as of 28th February 2023

A recent connected care report for Surrey Heath showed that 66 per cent of patients who have used the scheme do not represent at the GP within seven days.

Early Years Speech and Language Therapy Pilot – PCN Led

36. Speech and language difficulties are one of the most common developmental issues seen in pre-school children. Language delay that persists until school entry can have adverse effects on literacy, behaviour, social development, and mental health into adulthood. Early identification of children at risk for developmental delay or related problems can result in targeted intervention at a young age when chances for improvement are best. Given the high incidence of language and communication difficulties within the pre-school population (approx. 20 per cent) this pilot aims to support the quality of referrals from general practice to community SLT Services to support the best utilisation of SLT service. This pilot aims to transform the clinical pathway for pre-school children presenting with speech, language and communication difficulties to deliver early intervention through advice and support for children presenting

with mild delays and influence better utilisation of specialist services and thereby reduced waiting times for those with the highest level of need.

37. This Pilot started in April 2022 for a period of one year and was one of two national pilots. Funded by Health education England and supported by the speech and language therapy professional body. The pilot focussed on identifying and providing early support to children age 0-5 identified within Primary Care with communication and developmental needs. The therapist advised GPs with supporting these children early as well as providing direct support to children and their families whilst also working with wider partners to get the best start in life.

38. The pilot to date has been very successful and has resulted in significant benefits to children and their parents/carers.

Outcomes included:

- Parents/carers feeling supported having been given strategies and advice.
- Parents/carers feeling less anxious and frustrated.
- Supporting SEND referrals to school for early intervention.
- Follow ups by telephone.
- Children being able to speak clearer and with confidence.
- Swift and appropriate referral to appropriate support/service.

The pilot is near completion, after which a full evaluation will be conducted and recommendation with onward commissioning of the service.

PCN Telephony Hub

39. In 2021/22, post COVID lockdown, the system pressures in primary care in England were unprecedented. It was widely acknowledged that:

- Primary Care had unsustainable levels of demand
- Access was greater than capacity, which leads to increased urgent care demand which is also now at unsustainable levels.
- There was very poor patient experience of access to general practice services via telephone, leading to greater inappropriate A&E attendances.

40. Patients often criticise GP telephony, that calls are not always answered as quickly as they would like. With high demand, particularly in the mornings it is not always possible to meet patient expectations in this area. Regardless we strive to invest in telephony systems that enable calls to be answered and monitored effectively.

41. All staff within GP practices are trained on telephony and administrative systems using both in house and accredited training programmes. Several IT systems are used within practices to manage patient care, throughout the year

regular top-up or refresher training is offered both in house and with relevant external providers.

42. To support the increasing demand Surrey Heath PCN are in the process of developing a telephony hub to support practices manage flow and call handling. This at-scale telephony solution will provide an overflow call management system which will support manage call response and handling during peak times.
43. The PCN telephony hub aims to:
- increase the number of calls answered, reduce call wait times and abandonment rates.
 - Book additional appointments in the evenings and at weekends.
 - Provide a total signposting solution using training care navigators to appropriately signpost demand to the correct intervention.

Recruitment is currently underway for this new service which the PCN plan to launch in April/May 2023.

General Practice Appointment System GPAD

44. GPAD is **General Practice Appointment Data** collected from general practice appointment systems (TPP SystemOne, EMIS Web, Cegedim (InPS Vision), Microtest Evolution and Informatica) and published by NHS Digital (NHSD).

NHS Digital has been collecting data from general practice appointment systems and publishing local monthly data, since 2018. The data provides a picture of general practice appointments and includes details such as the number of appointments, the healthcare professional carrying them out and where possible the mode of delivery e.g. face to face, telephone.

45. Variation in how general practice appointment books are used and how the different IT systems function means that the GPAD publication has its limitations. *The data published could therefore potentially result in an inaccurate reflection of overall activity and workload.*

Appointment Type	Definition/description	Included in GPAD?
General Practice Core	8am to 6.30pm Monday to Friday (excluding bank holidays).	All on GP practice systems so included in GPAD.
General Practice Extended Access	Precursor to IAGP, commissioned from PCNs through the Directed Enhanced Services (DES).	All on GP practice systems (so included in GPAD) except 2 practices (Symons and Binfield)
Improved Access in General Practice (IAGP)	8am to 8pm opening Monday to Friday and some access on weekends. Introduced after Extended Access. Each Place commissions it in different ways from different providers.	Some may be on GP practice systems so included in GPAD, some may not.
General Practice Additional Urgent/same day	Urgent/same day appointments not delivered by the practice but by a different provider.	
General Practice Hot site/pathway	Appointments for suspected COVID positive patients, often delivered at a designated "hot" site not at the practice.	
Out of Hours (OOH)	8pm to 8am Monday to Friday and weekends.	Not General Practice so not included in GPAD and should be reported separately.

46. Due to the variation in systems and to ensure that future publications fairly represent activity there are a range of improvements being made. These improvements include:

- introducing new standard appointment categories to provide a consistent view of appointments.
- Guidance on how to get the best out of appointment systems therefore accurately recording appointments.

47. Benefits and use of the GPAD information:

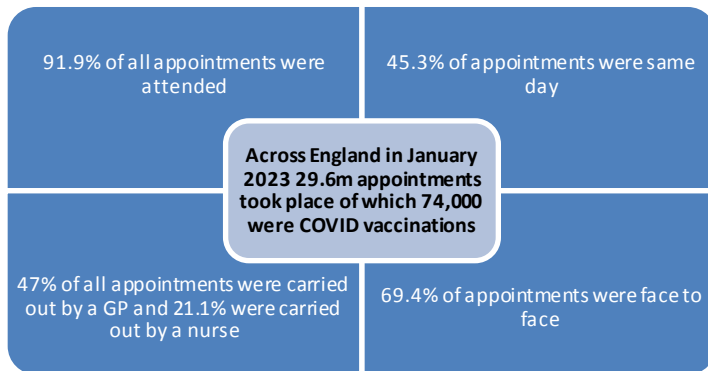
- **Practice level:** Accurate appointment data demonstrates the activity and need for different services and supports understanding of practice activity, workforce planning and identification of pressure points.
- **Local level:** Accurate data is key for local decision making and workforce planning across the local health system.
- **Nationally:** GPAD provides commissioners with an understanding of how capacity is changing in each locality and identifies different ways of working. The COVID-19 pandemic has also demonstrated the importance of understanding appointment activity in general practice, informing our national response to the outbreak.

48. In October 2022 this data was made public. Prior to publication in Surrey Heath we were concerned about how the data would be perceived by our patients and the public, a feeling felt within place teams around the country and with our Local Medical Council (LMC) and British Medical Association (BMA) reps.

49. The figures did show the highest level of GP appointments on record despite of a decline in GP numbers, demonstrating how busy practices are meeting local demand. Additionally, practices have seen an increase in seasonal vaccination appointments adding to workload. The data should therefore always be considered factoring variation, demand, patient choice, additional workload, demographic and other nuances.

Working closely with our practices we received no negative direct feedback from patients following the publication of the data.

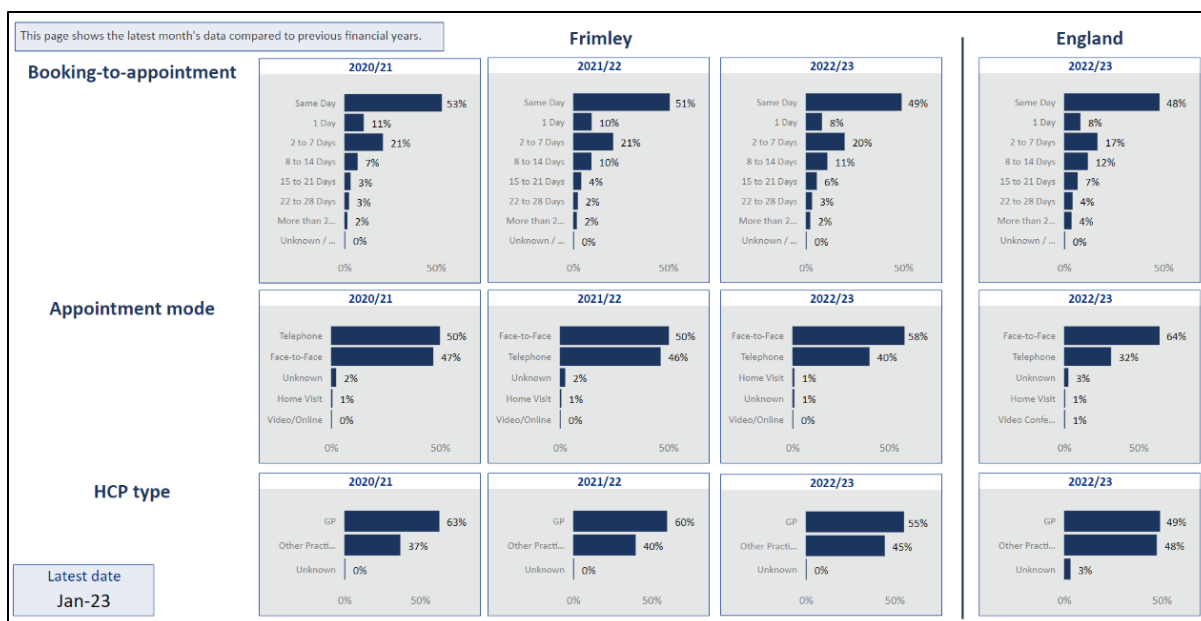
50. January GPAD Data



The mix of activity has changed with face-to-face appointments having decreased from 75 per cent for the last full month before the start of the pandemic to 58 per cent for the most recent month. This continues to be considerably lower than for England (68 per cent). The proportion of telephone appointments has increased from 19 per cent in February 2020 to 40 per cent in January 2023.

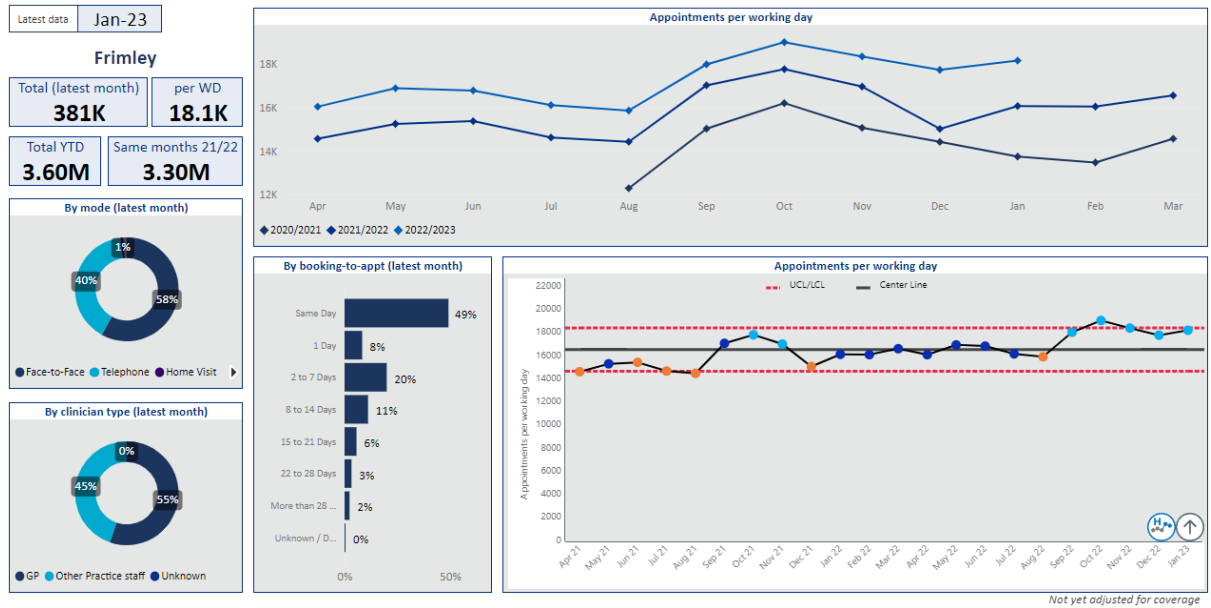
- 51. Same-day and next-day appointments increased sharply around the start of the pandemic reaching a peak of 76 per cent in May of 2020. They are now in line with pre-pandemic levels; January 2023 data shows a combined figure of 57 per cent for same-day and next-day appointments compared with 51 per cent in February 2020.
- 52. 55 per cent of appointments in January 2023 were with GPs, and this is greater than the 50 per cent for England (even allowing for England having 3 per cent unknown).

Data table below details January GPAD data for Frimley against the England average.

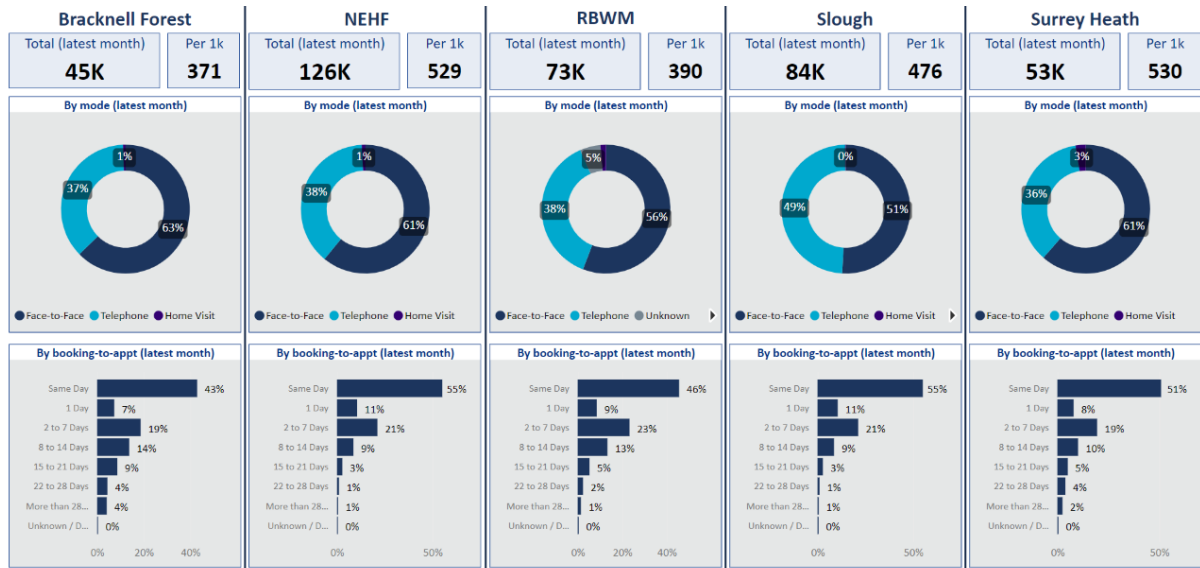


Source: NHS Digital experimental statistics publication

53. Appointment counts for Frimley ICB increased slightly in January, and they are still above the mean for the past 18 months. YTD total appointments are at 3.6 million, compared to 3.3 million this time last year. January appointments per working day were at 18,144; a 2 per cent increase on December and a 13 per cent increase on January 2022.
54. A small percentage (~3 per cent) of appointments are not captured in GPAD. Efforts to capture this data as well as a new Enhanced Access (EA) data collection are ongoing.
55. The mix of activity has changed with face-to-face appointments having decreased from 75 per cent for the last full month before the start of the pandemic to 58 per cent for the most recent month. This continues to be considerably lower than for England (64 per cent).



Data table below detail January GPAD data for Frimley by place



Taken from Frimley Primary Care Appointments PBI dashboard | Not yet adjusted for coverage | Source: NHS Digital GPAD

Data table below detail January GPAD data by practice (Jonas providing Update)

Month	GP Name	Face to Face	Home Visit	Telephone
Jan-2023	BARTLETT GROUP PRACTICE	6,170	511	7,118
Jan-2023	PARK HOUSE SURGERY	4,252	0	0
Jan-2023	STATION ROAD SURGERY	3,491	17	276
Jan-2023	PARK ROAD GROUP PRACTICE	5,666	711	8,748

Jan-2023	UPPER GORDON ROAD SURGERY	5,383	0	693
Jan-2023	CAMBERLEY HEALTH CENTRE	2,554	109	1,901
Jan-2023	LIGHTWATER SURGERY	5,052	0	376

GP Patient Survey

56. The GP Patient Survey is designed to give patients the opportunity to feed back about their experiences of their GP practice. The information can also help practices improve on patient experience and improve local health service in communities.

57. Collated below are survey results for Surrey Heath practices. The percentages can be seen alongside the Integrated Care System (ICS – Frimley) and against the national average result.

Overall patient experience in Surrey Heath ranges from 71 per cent to 93 per cent above both the ICS and national averages.

Making an Appointment	Park Road Group Practice	Lightwater Surgery	Park House Surgery	Upper Gordon Road Surgery	Camberley Health Centre	Station Road Surgery	Bartlett Group Practice
% of patients who were offered a choice of appointment when they last tried to make a general practice appointment <i>ICS result: 54%</i> <i>National result: 59%</i>	69%	66%	52%	49%	62%	76%	57%
% of patients who were satisfied with the appointment they were offered <i>ICS result: 68%</i> <i>National result: 72%</i>	70%	93%	75%	68%	63%	76%	79%

% of patients who took the appointment they were offered <i>ICS result: 96%</i> <i>National result: 96%</i>	99%	100%	94%	99%	88%	93%	98%
% of patients who describe their experience of making an appointment as good <i>ICS result: 53%</i> <i>National result: 56%</i>	62%	84%	60%	57%	54%	78%	57%

Your last appointment	Park Road Group Practice	Lightwater Surgery	Park House Surgery	Upper Gordon Road Surgery	Camberley Health Centre	Station Road Surgery	Bartlett Group Practice
% of patients who were given a time for their last general practice appointment <i>ICS result: 89%</i> <i>National result: 90%</i>	89%	100%	93%	93%	90%	87%	93%
% of patients who say the healthcare professional they saw or spoke to was good at giving them enough time during their last general practice appointment <i>ICS result: 82%</i> <i>National result: 83%</i>	86%	92%	90%	83%	81%	91%	80%
% of patients who say the healthcare professional they saw or spoke to was good at listening to them during their last general practice appointment <i>ICS result: 83%</i> <i>National result: 85%</i>	88%	90%	92%	90%	80%	91%	88%

<p>% of patients who say the healthcare professional they saw or spoke to was good at treating them with care and concern during their last general practice appointment</p> <p><i>ICS result: 82%</i> <i>National result: 83%</i></p>	84%	88%	89%	88%	82%	92%	85%
<p>% of patients who felt the healthcare professional recognised or understood any mental health needs during their last general practice appointment</p> <p><i>ICS result: 79%</i> <i>National result: 81%</i></p>	90%	91%	96%	86%	85%	96%	86%
<p>% of patients who were involved as much as they wanted to be in decisions about their care and treatment during their last general practice appointment</p> <p><i>ICS result: 89%</i> <i>National result: 90%</i></p>	94%	95%	91%	88%	89%	92%	93%
<p>% of patients who had confidence and trust in the healthcare professional they saw or spoke to during their last general practice appointment</p> <p><i>ICS result: 93%</i> <i>National result: 93%</i></p>	97%	98%	96%	98%	90%	97%	95%
<p>% of patients who felt their needs were met during their last general practice appointment</p> <p><i>ICS result: 90%</i> <i>National result: 91%</i></p>	94%	97%	93%	91%	89%	95%	90%

Your Health	Park Road Group	Lightwater Surgery	Park House Surgery	Upper Gordon Road Surgery	Camberley Health Centre	Station Road Surgery	Bartlett Group Practice
% of patients who say they have had enough support from local services or organisations in the last 12 months to help manage their long-term condition(s) <i>ICS result: 65%</i> <i>National result: 65%</i>	74%	71%	88%	59%	59%	81%	55%

Overall Experience	Park Road Group Practice	Lightwater Surgery	Park House Surgery	Upper Gordon Road Surgery	Camberley Health Centre	Station Road Surgery	Bartlett Group Practice
% of patients who describe their overall experience of this GP practice as good <i>ICS result: 70%</i> <i>National result: 72%</i>	78%	93%	81%	73%	73%	89%	71%

Source: [GP Patient Survey \(gp-patient.co.uk\)](http://gp-patient.co.uk)

Complaints

58. Official NHS complaints data for 21/22 shows that written complaints in England are on the rise. Complaints to GP practices rose by 38 per cent from 72,087 in 20/21 to 99,459 in 21/22. Of these complaints 50 per cent were not upheld as there was a lack of evidence to support the complaint.
59. The most common causes for GP complaints were communications (14 per cent) clinical treatment including errors (13 per cent) and staff attitude/behaviour (13 per cent). Appointment availability or length was behind 10 per cent of patient complaints.

60. Patients are always advised to speak to the practice or practice manager verbally before making a formal complaint. If the concern cannot be resolved within 48 hours then patients can make a formal complaint in writing to the practice.
61. If patients do not wish to make the complaint directly to their practice then they can contact NHS England (www.england.nhs.uk) or the parliamentary health Service Ombudsman service (www.ombudsman.org.uk)
62. In Surrey Health our practices all stand by the philosophy to provide the best possible healthcare services to the communities they serve. All practices have an inhouse complaints department or designated point of contact, as specified by the department of health.
63. Practice Contact details:

Practice	Address
Bartlett Group Practice (Ash Vale)	Wharf Rd, Ash Vale, GU12 5BA
Bartlett Group Practice (Frimley Green Medical Centre)	1 Beech Road, Frimley Green Camberley GU16 6QQ
Camberley Health Centre	159 Frimley Road, Camberley, GU15 1PZ
Lightwater Surgery	39 All Saints Rd, Lightwater, GU18 5SQ
Park House Surgery	Park Street, Bagshot, GU19 5AQ
Park Road Group Practice (Heatherside Surgery)	73 Cumberland Road, GU15 1SE
Park Road Group Practice (Park Road Surgery)	143 Park Road, Camberley, GU15 3NN
Park Road Group Practice (Old Dean Surgery)	Berkshire Road, Camberley, GU15 4DP
Station Road Surgery	4 Station Road, Frimley, GU16 7HG
Upper Gordon Rd Surgery	37 Upper Gordon Road, GU15 2HJ

Managing Patient Expectations

64. Managing patient expectations is becoming increasingly difficult with the continued increasing demand in Primary Care. As individuals our expectations can be very different from person to person. A clinician will tend to view successful care in terms of clinical outcomes, but patients are much more likely to place importance on other factors. These can include the emotional impact of the experience, or whether they feel cared about and cared for by the clinician.

Other factors can impact on patient expectations:

- Lack of information / too much information
- Contradictory advice
- Treatment availability
- Waiting times / long waits
- Anxiety

65. Patients might attend their GP with a preconception of how they will be treated, which could be for a variety of reasons.

- Websites patients have viewed might be inaccurate or aimed at patients from other countries where the medical care may be different.
- Patients might expect investigations or treatment currently unavailable in the UK or on the NHS.
- They might base their expectations of the experiences of friends or relatives whose clinical scenario may have been different (such as expecting antibiotics for a sore throat).

66. In primary care we aim to ensure that clear and consistent messaging is available, via websites, telephony systems, in person and with posters in waiting rooms. We aim to be clear about waiting times, process, opening times and services available.

67. Practices staff show empathy and understanding with patients and try to build rapport and support patients to achieve outcomes. Being aware of any anxieties or concerns patients have can also help improve patient experience and build confidence in the care that we provide.

Conclusions:

68. GP Access remains to be a hot topic of conversation both within the health system and in the public domain. Whilst we do face increasing demand whilst managing patient expectations, we are committed to providing excellent Primary Care services for the people in Surrey Heath. Within this report are examples of how we have expanded our workforce to provide a range of clinical services to the patients we serve. Examples of encouraging outcomes and best practice. Through proactive triage we can offer patients appointments with a number of highly qualified clinicians who can meet the needs of the patient. We work closely in collaboration with our practices and PCN to innovate and develop tailored services for our population.

Next steps:

69. We are currently working on a communications and engagement plan for 23/24. We held a public engagement event in October 2022 which was well attended, taking on board feedback from that event we are planning to host further events of this type and inform our public on local plans and developments. We are linked in with the borough council, HealthWatch and other local organisations to support each other in promoting services, engaging with patients, and signposting. As we build our engagement schedule, we are also committed to addressing unmet need, health inequalities and the wider determinants of health with a population health approach. As an ICB and a local place team we are working on our priorities for 23/24 and beyond. These plans will include Primary Care access, estates maintenance and development, business continuity planning, recovery, and resilience - amongst other things.

Report contact

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