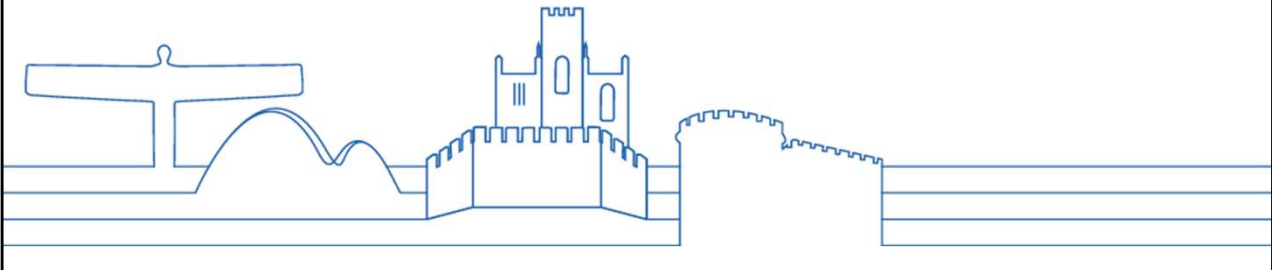




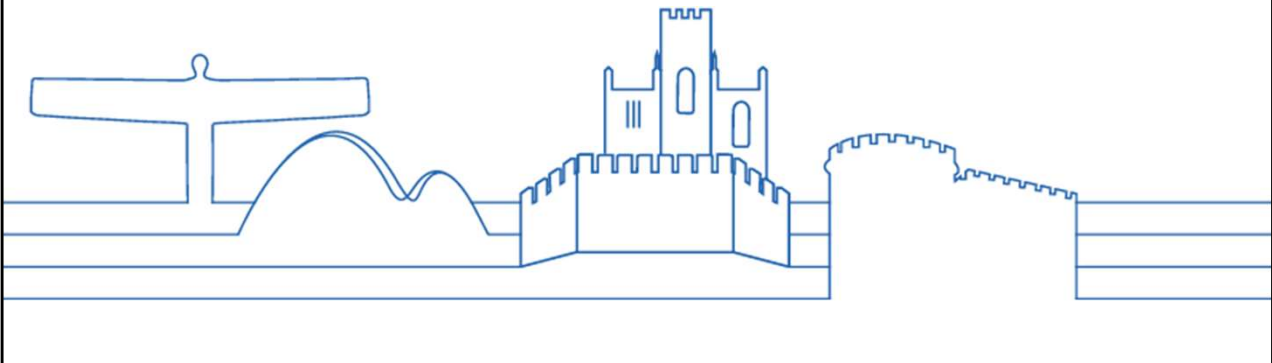
**North East and
North Cumbria**

Primary Care Access

Emma Joyeux – Commissioning Lead, Primary Care



Overview of primary care in Tees Valley

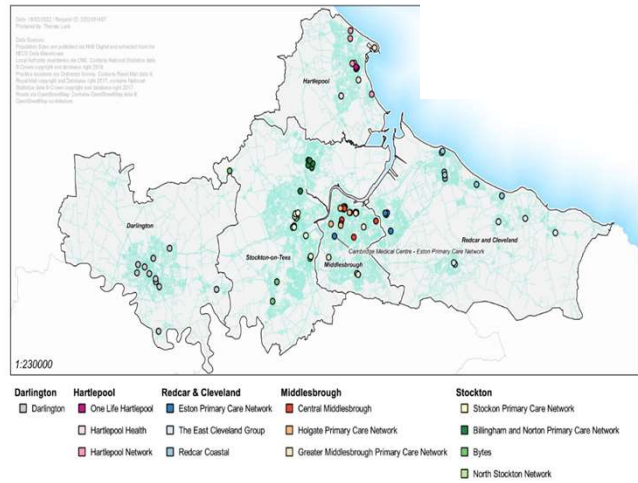


Tees Valley is a sub-Integrated Care Partnership (ICP) of the North East and North Cumbria (NENC) Integrated Care Board (ICB). It covers 5 Places: Hartlepool, Stockton-on-Tees, Middlesbrough, Redcar and Cleveland and Darlington.

Configuration (as of Oct 2022)

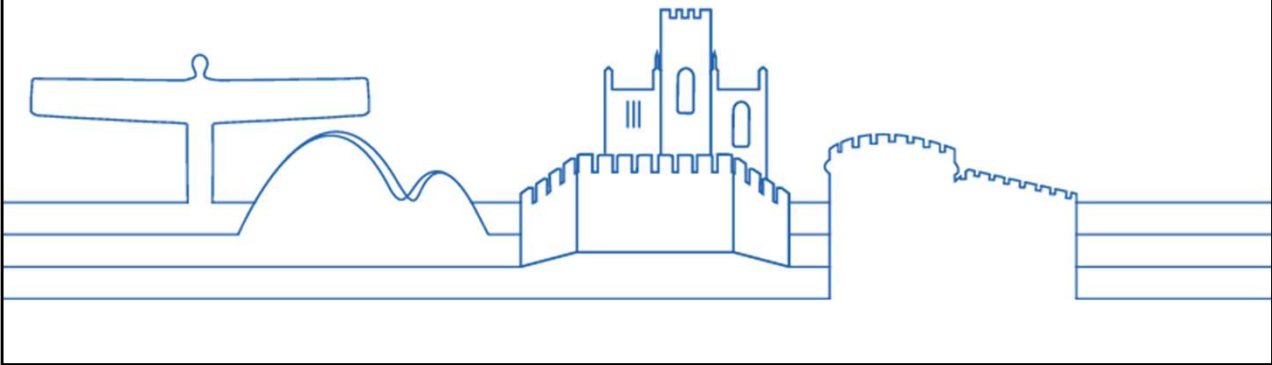
- 5 Local Authority areas
- 80 Practices
- 14 Primary Care Networks (PCNs)
- Tees Valley patient population 721,135

| Locality | No. of practices | Smallest list size | Largest list size | Average list size | Number of PCNs |
|---------------|------------------|--------------------|-------------------|-------------------|----------------|
| Hartlepool | 11 | 3,783 | 18,713 | 8,847 | 3 |
| Stockton | 21 | 2,319 | 21,657 | 9,808 | 4 |
| Darlington | 11 | 4,721 | 15,312 | 10,148 | 1 |
| Middlesbrough | 21 | 737 | 20,105 | 8,003 | 3 |
| Redcar | 16 | 3,345 | 14,573 | 8,635 | 3 |



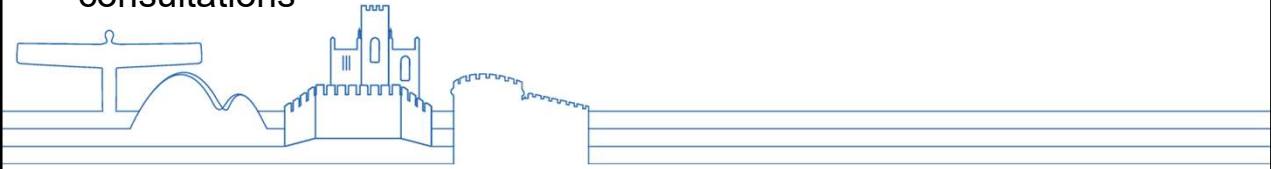
In Darlington, there are 11 practices in one Primary Care Network, covering a registered population of 111,630.

Access - Contract



GMS/PMS/APMS Contract

- Practices must provide essential services at such times, within core hours, as are appropriate to meet the reasonable needs of its patients
- Core hours are 8.00am until 6.30pm, Monday to Friday, except Good Friday, Christmas Day or bank holidays
- Practices must also keep aside appointments for NHS 111 to book
- Practices must offer and promote online consultations and video consultations



There are three different types of GP contract arrangements used by NHS commissioners in England:

- General Medical Services (GMS)
- Personal Medical Services (PMS) and,
- Alternative Provider Medical Services (APMS).

Practices must keep aside one appointment per 3,000 registered patients for NHS 111 to directly book into (this is enhanced locally to one appointment per 2,000 registered patients)

All directly bookable appointments should be made available for online booking, whether or not those appointments are booked online, by telephone or in person

Many practices use triage and navigation processes to make an initial assessment of patients' needs so that patients can be provided with care from the most appropriate member of staff and with regard to the relative urgency of the issue. Therefore, any appointments that do not need to go through a triage process, could be available for patients to book directly online, by phone and/or by visiting the practice.

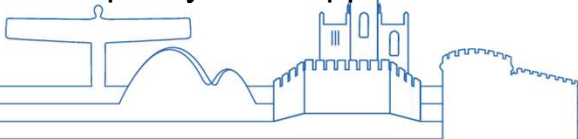
The below list gives examples of appointment types that may be appropriate to be offered via direct booking:

- Asthma clinic
- Blood tests
- B12 injection
- Childhood vaccinations
- Contraception appointment
- Cholesterol monitoring
- Carer health check
- Chronic obstructive pulmonary disease (COPD) clinic/monitors
- Diabetic review
- Dressing/wound care
- Dementia assessment
- Flu vaccination
- Anti-coagulant clinic
- Medical examinations for employers e.g. heavy goods vehicle (HGV) licence
- New patient health check
- Removal of stitches/wound dressing
- Routine injections (non-travel)
- Cervical screening
- Travel vaccinations.

As individual practice population needs can vary significantly, this list should not be seen as mandatory or exhaustive.

Primary Care Network Contract Directed Enhanced Services (DES)

- **Enhanced access** – from 1st October 2022 each Primary Care Network (PCN) is required to provide 60 minutes of additional General Practice Capacity per 1,000 Adjusted Population between 6.30pm – 8.00pm on weekday evenings and 9.00am - 5.00pm on Saturdays
- **Investment and Impact Fund (IIF)** - Points based scheme similar to Quality and Outcomes Framework (QoF). NHSE/I have released funding associated with 4 indicators to create a capacity and support fund for PCNs between Oct 22- March 23



DES' are nationally negotiated. To be eligible to participate in a Network Contract DES, a practice must hold a primary medical services contract, have a registered list of patients and the practice's primary medical services contract must require the practice to offer in-hours (essential services) primary medical services.

A practice may choose not to participate in the DES; however all practices in Tees Valley have chosen to participate and as such the provisions set out in the Network Contract DES Specification therefore become part of the practice's primary medical services contract.

The Network Contract DES forms part of a long-term, larger package of general practice contract reform originally set out in 'Investment and Evolution: A five year framework for GP contract reform to implement the NHS Long Term Plan' and subsequent updates.

Primary Care Networks (PCNs) are groups of practices working together, along with other healthcare staff and organisations - providing integrated services to their local population which is usually around 30,000 to 50,000 people

The Primary Care Network DES includes a number of specifications, including, Supporting Early Cancer Diagnosis, Tackling Health Inequalities, Social Prescribing, Personalised Care, Cardiovascular Disease, Structured Medication Reviews.

Two elements of the DES support access, as follows:

Enhanced access: As a minimum this must be provided between 6.30pm – 8.00pm on weekday evenings and 9.00am - 5.00pm on Saturdays by PCNs or their sub-contractor per 1,000 adjusted population* These are known as Network Standard Hours (NSH). Although there is no requirement for this service to be provided outside of the NSH, PCNs can, with Commissioner approval, provide a proportion of these hours outside of the NSH where they can evidence that these appointments would better meet the needs of their patients

There is no requirement for this service to be provided on Bank or Public Holidays, although any hours that would have been provided on these days must be re-provided within the following two weeks. PCNs can deliver part or all the service themselves or sub-contract to an alternative provider

*The adjusted population is a primary medical care weighted populations including the health inequalities adjustment at GP practice level

IIF: 4 IIF requirements have been deferred or retired and the funding related to these indicators has been freed up to provide PCNs with additional funding between Oct 22 and March 23 to support PCNs create additional clinical support and to increase the workforce over the winter months.

There are three deferred indicators:

- ACC-02: Number of online consultation submissions received by the PCN per registered patient
- EHCH-06: Standardised number of emergency admissions on or after 1 October per care home resident aged ≥ 18
- ACC-08: Percentage of patients whose time from booking to appointment was two weeks or less.

And one will be retired:

- ACC-05: By 31 March 2023, make use of GP Patient Survey results for practices in the PCN to (i) identify patient groups experiencing inequalities in their experience of access to general practice, and (ii) develop, publish and implement a plan to improve patient experience and

access for these patient groups, taking into account demographic information including levels of deprivation.

Within IIF there was an access indicator: % of patients whose time from booking to appointment was two weeks or less – this has been deferred to 23/24

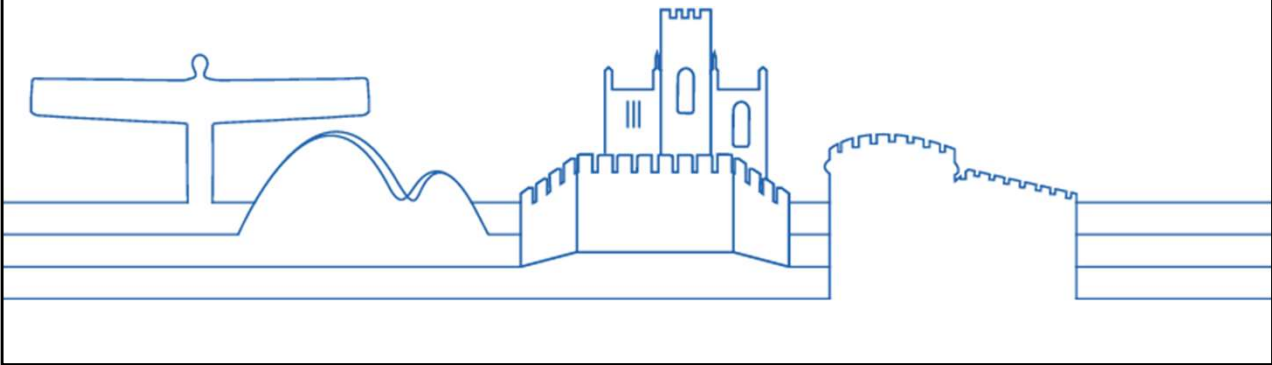
Enhanced Access- Normal provision

| Locality | Site | Days Offered | Times Available |
|------------|---------------------------------|-----------------|-------------------------|
| Darlington | All 11 practices within the PCN | Monday – Friday | 0730-0800 and 1830-2000 |
| | Forsyth House | Saturday | 0830-1700 |
| | | Sunday | 0900-1300 |

This slide shows the opening days and times of the PCN enhanced access services. The services is available to all Darlington patients.

- Darlington PCN are operating a mixed model of practices providing some of the hours, with the remaining being provided by Primary HealthCare Darlington [PHD]

Access – Current Status



GP Patient survey 2022 – Darlington results



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- 54% of patients surveyed found it easy to get through to someone at their GP practice on the phone (National average is 53%). Range 26% - 96%
- 86% of patients surveyed found the receptionists helpful (Nat. av. 82%). Range 77% - 96%
- 62% of patients surveyed were satisfied with the GP appointment times available to them (Nat. av. 55%). Range 35% - 89%
- 75% of patients surveyed were satisfied with the appointment(s) offered (Nat. av. 72%). Range 59% - 97%
- 63% of patients surveyed would describe their experience of making an appointment as good (Nat. av. 56%). Range 39% - 91%
- 76% of patients surveyed would describe their experience of their GP practice as good (Nat. av. 72%). Range 64% - 93%

The GP Patient Survey is an independent survey run by Ipsos on behalf of NHS England. The survey is sent out to over two million people across the UK. The results show how people feel about their GP practice. The survey is sent out every year in January.

It should be noted that the GP patient survey is only issued to a small percentage of practice population, and with less than 40% response rate, the survey results should not be used in isolation. For Darlington (practice population of 111,630) it was sent to 3,594 patients with 1,237 surveys returned (response rate of 34%).

For more information, please see: <https://www.gp-patient.co.uk/>

Primary care appointment activity



North East and
North Cumbria

| Darlington practices | November 2022 | December 2022 |
|---|---------------|---------------|
| Total number of appointments | 56,166 | 47,920 |
| Appointments per 1,000 population | 502.99 | 428.38 |
| % of appointments where the time between booking and the date of the appointment was either same day or 1 day | 40% | 45% |
| % of appointments where the time between booking and the date of the appointment was over 2 weeks | 22% | 20% |
| % of appointments categorised as face to face | 76% | 80% |
| % of appointments categorised as telephone or video | 20% | 17% |

<https://digital.nhs.uk/data-and-information/publications/statistical/appointments-in-general-practice>

The aim of the publication is to inform users about activity and usage of GP appointments historically and how primary care is impacted by seasonal pressures, such as winter.

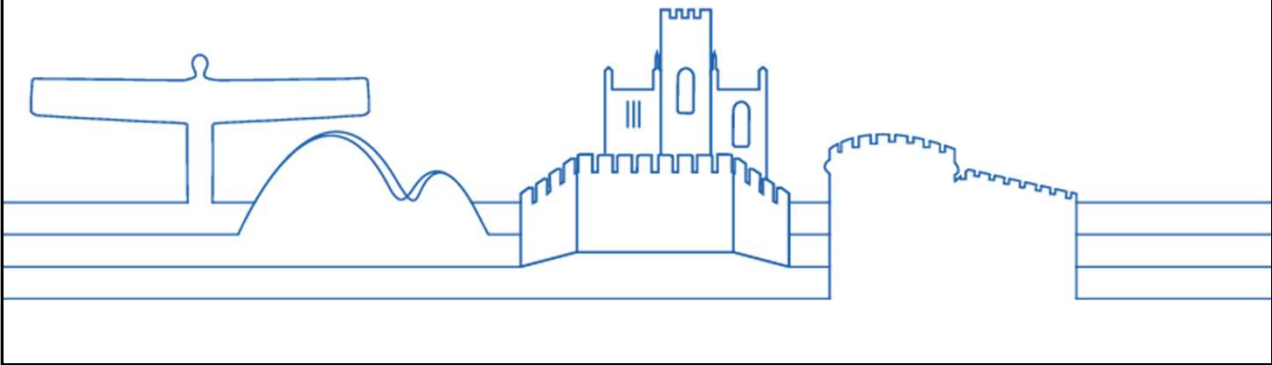
The publication includes important information, however it does not show the totality of GP activity/workload. The data presented only contains information which was captured on the GP practice systems. This limits the activity reported on and does not represent all work happening within a primary care setting or assess the complexity of activity.

There are several factors that drive the time from a booking to an appointment. This includes appointment availability at the practice, patient availability, the urgency of the appointment and GP advice. The range between practices in Darlington in Dec 22 for same day or 1 day appointments was 38-70%.

The range between practices in Darlington in Dec 22 for face to face appointments

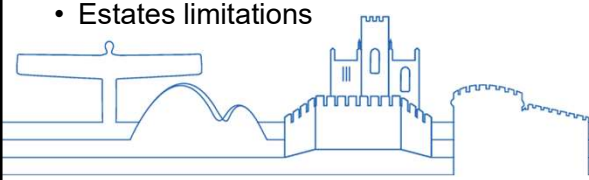
was 57-96%.

Access – Challenges



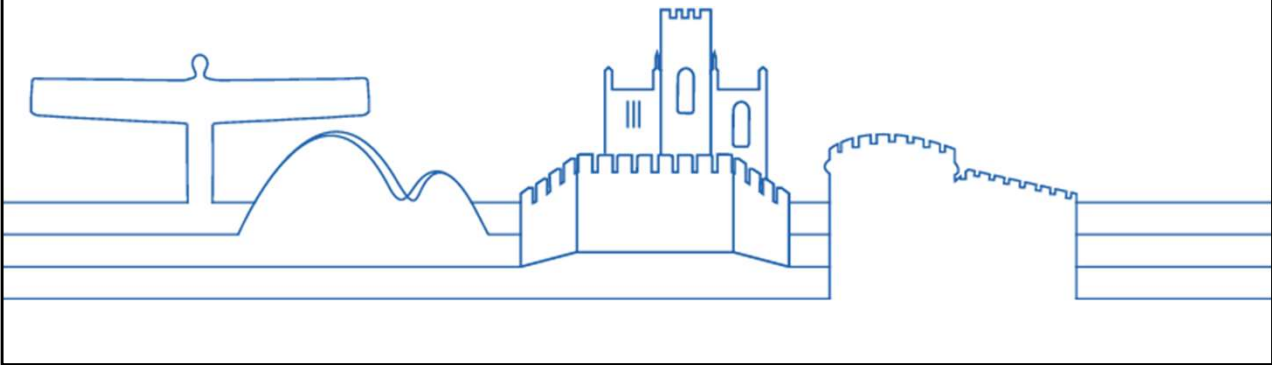
Causes of access challenges

- Covid ways of working – total triage
- Staff sickness and isolations
- Back log of care - long term condition management
- Continued high-level demand for same-day access
- Public health concerns in press e.g. mpox, Strep A
- Increased call waiting times
- Patient frustrations leading to increased complaints
- Increased abuse to practice staff
- Recruitment and retention difficulties
- Estates limitations



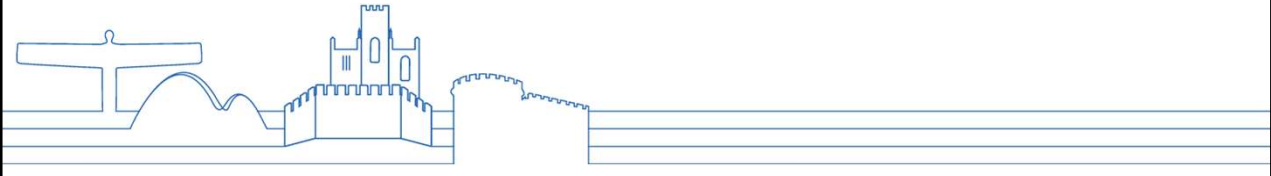
The Standard Operating Procedure (SOP) was in operation from March 2020 until July 2021

Access – ICB Improvements



Practice workforce

- December 2022 workforce data from NHS Digital:
 - 69 GPs (55.75 WTE)
 - 58 nurses (43.43 WTE)
 - 31 direct patient care (24.46 WTE)
 - 160 admin/non-clinical (120.63 WTE)
- All 4 workforce roles have remained fairly stable since Dec 2021



Dec 21 data:

GP 70 (60.15 WTE)

Nurse 61 (45.10 WTE)

DPC 30 (23.70 WTE)

Admin 161 (120.77 WTE)

Sept 20 data:

GP 73 (56.58 WTE)

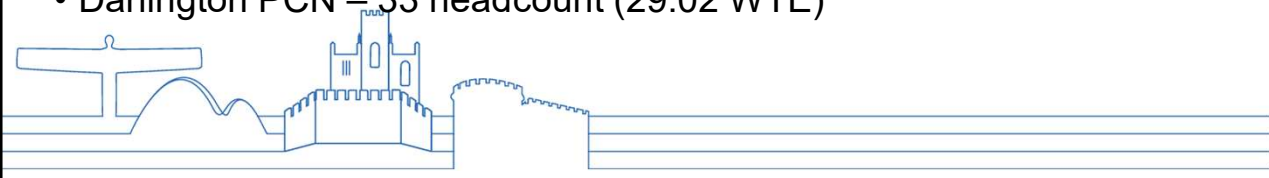
Nurse 53 (39.47 WTE)

DPC 34 (25.27 WTE)

Admin 165 (121.23 WTE)

Increased PCN workforce

- PCNs can claim funding [Additional Role Reimbursement Scheme-ARRS] to bring in a new workforce to support primary care to ensure a multi-disciplinary approach
- Staff funded through ARRS must be to support the DES requirements and in addition to current practice workforce
- PCNs across Tees Valley have employed 244 ARRS staff (224.28 WTE) as at Oct 22 from the roles available
- Darlington PCN – 33 headcount (29.02 WTE)



A PCN may employ or engage any one or more of the reimbursable roles in accordance with PCN DES Specification.

The DES Specification sets out the minimum role requirements for each of the reimbursable roles and the associated requirements placed on PCNs (banding, role detail).

ARRS funding covers salary, NI and pensions up to maximum reimbursable amounts as set out in the DES contract and guidance documents.

The roles available to PCNs under the ARRS scheme are:

- Clinical pharmacist
- Pharmacy technician
- Social prescribing link worker
- Health and wellbeing coach
- Care coordinator
- Physician associate
- First contact physiotherapist
- Dietician

- Podiatrist
- Occupational therapist
- Trainee Nursing Associate
- Nursing Associate
- Paramedics
- Advanced Practitioner
- Adult Mental Health Practitioner and Children & Young Persons Mental Health Practitioner
- GP Assistants
- Digital Transformation Lead

As at October 2022 the head count of AARS staff roles employed by Darlington PCN is:

- 8 Care Coordinators
- 2 First contact Physiotherapists
- 4 Health & wellbeing coaches
- 1 Mental Health Practitioners
- 3 Pharmacy Technicians
- 12 Social Prescribing Link Workers
- 3 Trainee Nurse Associates

(Total headcount 33; 29.02 Whole Time Equivalent)

Winter resilience- Planned opening hours on Sundays and Bank Holidays

- Additional access on Sundays and Bank Holidays is now available through a Winter Resilience scheme commissioned by the ICB and provided by the GP Federations.

| Location | Provider | Sunday | Bank Holiday |
|-----------------------------|--------------------------------------|---------|--------------|
| Darlington – Forsyth House, | Primary Health Care Darlington [PHD] | 9am-1pm | 9am-1pm |

The scheme commenced on 27th November 2022 and will run until 26th March 2023 to respond to winter pressures, in line with the ICB planning priorities.

It provides capacity to GPs and 111 for urgent and on the day primary care conditions, with 50% of the GP slots available to practices and 50% available to 111, all other clinician slots are made available to practices only.

As there is no requirement for the PCN Enhanced Access Service to be provided on Sundays, Bank or Public Holidays this winter resilience service will help ensure additional capacity is available for urgent and same day primary care conditions.

Activity will be monitored to help inform future plans, including uptake, trends and themes of appointments.

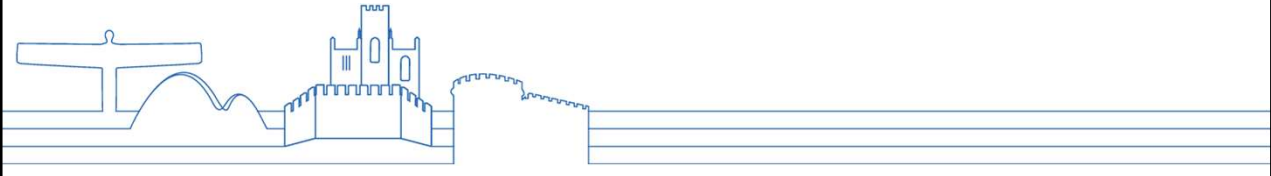
Winter resilience – Capacity and utilisation over Christmas and New Year

| 25-Dec | | | | 26-Dec | | | | 27-Dec | | | |
|----------------|--------------|------|-------------------|----------------|--------------|------|-------------------|--|--------------------|------------------|-------------------|
| Appts provided | Appts Booked | DNAs | Total utilisation | Appts provided | Appts Booked | DNAs | Total utilisation | Appts provided | Appts Booked | DNAs | Total utilisation |
| 10 | 8 | 2 | 6 | 10 | 10 | 0 | 10 | 11 | 9 | 0 | 9 |
| 01-Jan | | | | 02-Jan | | | | Total appts provided | Total appts booked | Total no of DNAs | Total Utilisation |
| | | | | | | | | 56 | 47 | 4 | 43 |
| Appts provided | Appts Booked | DNAs | Total utilisation | Appts provided | Appts Booked | DNAs | Total utilisation | | | | |
| 15 | 11 | 2 | 9 | 10 | 9 | 0 | 9 | | | | |
| | | | | | | | | % appts booked against commissioned | | 84% | |
| | | | | | | | | % utilisation against commissioned | | 77% | |
| | | | | | | | | % DNAs against booked | | 9% | |

As there is no requirement for the PCN Enhanced Access Service to be provided on Sundays, Bank or Public Holidays this winter resilience service helped to create additional capacity that was available for urgent and same day primary care conditions during this 5 day period.

Further support

- Exploring opportunities to facilitate upgrades to practice telephony systems
- Working with North East Commissioning Support (NECS) Communications team to develop improved communications to patients and Patient Participation Groups about general practice
- Digital team working with practices to improve website design and navigation for patients
- Exploring opportunities for additional resources through NHS England processes regarding resilience, retention and workforce development funding Resilience bids





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Thank you

