Somerset County Council Scrutiny Committee – 27 July 2022

Report to the Somerset Scrutiny Adults Health Committee

Primary Care Services in Somerset

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Cabinet Member: No

Division and Local Member: No

1. Summary

1.1. This paper provides a concise update to the Scrutiny committee on key issues and developments related to NHS primary care services.

2. Background

2.1. GP Services

There are 64 practices in Somerset, offering a wide range of services to their registered patients.

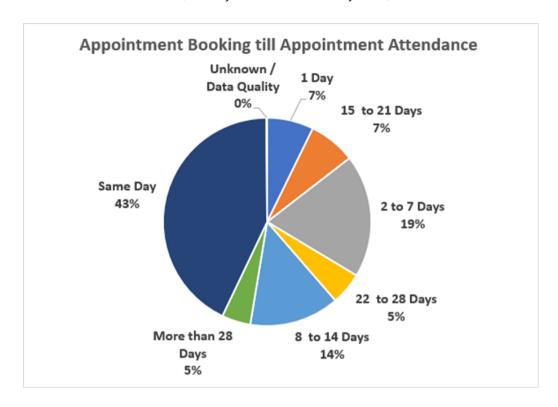
No practices are currently rated 'inadequate' by the Care Quality Commission. One is rated 'outstanding' (Exmoor Medical Practice) and one 'requires improvement' (Burnham and Berrow Medical Centre). The other 62 are rated 'good'.

In the latest national survey of patients, 76% of patients described their overall experience of GP services as good, compared with 72% nationally. However, the level of satisfaction has reduced considerably. In 2021 85% of Somerset patients described their overall experiences of GP services as good, compared with 83% nationally. The voice of patients is very important to us, and both Healthwatch and Practice Patient Participation Groups represented on our Primary Care Commissioning Committee

Waiting times are shown in the chart below. The data is taken from the national GP Appointments Dataset. This is an experimental data set which is not yet fully accurate. More information is available here:

https://www.england.nhs.uk/gp/gpad/more-accurate-general-practice-appointment-data.

There is an intensive work programme underway to improve the accuracy of the data, however it gives a picture of current service to patients.



Of particular note is that 43% of patient appointments take place on the same day as booking. 69% of appointments take place within 7 days.

Feedback from patients and practices both highlight the challenges to access, with patients experiencing difficulty contacting practices and practices reporting extremely high levels of demand, much higher than pre-Covid.

Currently at least 50% of consultations are face to face, with most others being telephone, with video and online forming smaller proportions.

Many areas of the country have seen practices closing in recent years. Communities in Somerset have been clear that they value local GP services and wish them to remain open. Although there are certain circumstances in which change can be good for patients, for example where two practices merge and move into a new building, it is important to maintain a local service, particularly in rural areas.

One practice in Somerset has closed, Victoria Park Medical Centre in Bridgwater, despite efforts by all stakeholders to find a way to keep it open. The contract was held by a single GP contractor, which is an arrangement the NHS is increasingly moving away from. Sickness of staff and a number of key staff leaving led to a situation in which the practice was no longer able to provide a safe service on a day to day basis. A plan was developed for the practice to join with another local practice but this proved undeliverable. Because it is so important to keep practices open, the Clinical Commissioning group invested significant resources of both staff and money to secure a viable long term future for Victoria Park Medical Centre.

The practice closed in August 2021 and patients were allocated to neighbouring practices. The building, which is part of Victoria Park Community Centre, will reopen later this year as a health hub, with a range of services for local people. This will be operated by Bridgwater Primary Care Network and Somerset NHS Foundation Trust working in partnership.

NHS Somerset has several mechanisms to identify and intervene in practices where necessary. These include:

- An Assurance Framework which collates various risk factors and provides a monthly ranking. All practices irrespective of risk rating are visited as part of a regular cycle of practice meetings. Practices of concern are visited whenever necessary.
- A weekly 'operational escalation level' assessment submitted by all practices, which when collated provides a 'heatmap' with all practices shown as one of the following:
 - OPEL 1: "Good access for all patients"
 - OPEL 2: "Some limitation of access for routine care"
 - OPEL 3: "Significant limitation of access for routine care, some delays for immediate care"
 - OPEL 4: "Routine and immediate care very restricted, delays for urgent care likely"
 - This information is used to determine whether additional support is required for any practice.
- A monthly review of all intelligence relating to practices, with multidisciplinary discussion to triangulate evidence.

2.2. Community Pharmacy

There are 101 community pharmacies in Somerset, providing a wide range of services to the population. These go well beyond the traditional functions of dispensing and over the counter treatment sales, and include:

- High blood pressure identification and treatment
- Medication reviews
- Specialist medicines including palliative care
- Contraception
- Consultation Service with direct triage from GP surgeries to pharmacies for patients to receive a pharmacist consultation within 4 hours

NHS Somerset is fully committed to developing the role of community pharmacy as part of our 'neighbourhood care' model. Further integration of community pharmacy into the wider NHS family will bring significant benefits for the people of Somerset.

2.3. Dental Services

Access to NHS dental services is currently a significant challenge nationally. It is a high priority for NHS Somerset and its collaborative commissioning partner, NHS England, to improve the situation. A regional Dental Reform Programme Board is overseeing a substantial work programme in this area. We would be happy to provide further specific briefing to the Committee on dental services if it would be helpful.

2.4. Optometry

The people of Somerset have access to a wide range of optometric services provided by independent practices and national chains. These provide NHS eye tests and provision of spectacles. An urgent care service is also commissioned from a number of high street optometrists which provides an alternative to

Emergency Department attendance for people with acute eye problems.

3. Next steps

3.1. Our priorities are firstly to ensure that Somerset residents have access to safe and effective primary care services, and that secondly, we further develop these services to improve the health outcomes of our population. We will be developing a primary care strategy as an Integrated Care System, of which Somerset County Council and its successor Council play a full part in.

4. Background papers

4.1. GP Appointments Dataset (https://www.england.nhs.uk/gp/gpad/more-accurate-general-practice-appointment-data).

Note For sight of individual background papers please contact the report author