

Patient Update – May 2022

Dear Patients

I am writing to you all to update you on the current situation at our practice.

Recently we have seen a rise in the amount of feedback from patients who are finding it difficult to access appointments.

We fully appreciate how frustrating it can be when faced with long waits on the phone followed by difficulty obtaining appointments when you need them. I am hoping that by writing this letter I can explain to you why this is happening and what the surgery are doing to try and address these issues.

Demand for our services is up considerably, even on pre-pandemic levels. Across England there were 5.4 million more appointments offered in general practice in March 2022 than in the same period of 2020. GP Appointment utilisation at Kingswood Health Centre is at 100% and has been for months now. This means that there are no spare appointments – every appointment we offer every day is being booked.

We have recruited additional staff to try and help with the increased demand. We now have a practice physiotherapist, an additional paramedic, a pharmacy technician, an additional pharmacist (starting later this year), more reception staff and are hoping to bring on another paramedic later in the year. We also employ non-medical staff in the form of social prescribers and care coordinators to provide support to patients with learning difficulties, mental health problems and patients experiencing issues that stem from socio-economic issues rather than physical health problems.

We have at the same time had to accommodate staff on maternity leave, annual leave and increased levels of Covid-related sickness absence. This has all had an impact on the number of appointments we have to offer. When a staff member has to isolate because of Covid, we often have to rearrange their booked patients to other clinicians, which also impacts on our capacity for that day or week. Where possible staff who are unable to come in due to Covid-19 but are feeling well enough to work have worked remotely from home offering telephone appointments instead.

We are limited in the number of further additional staff we can recruit, and we are also running out of space in our building. We have bid for funding to try and increase the number of clinical rooms we have available but are awaiting an outcome on this. Otherwise there is no money available to increase the physical size of the practice to try and accommodate more clinicians.

As a GP surgery we have to offer a variety of different services. These include health checks for people with chronic conditions, health checks for new babies and their mothers, contraceptive fitting services, vaccinations and immunisations, annual reviews and regular blood tests for people on certain medications as well as the routine and urgent appointments that most patients contact us for.

We are also a training practice, so we support the universities in training up future doctors and also support junior doctors to finish their specialist training in general practice – as the profession is already facing a shortage of 6,000 GPs. Training requires supervision from our existing GP team.

Throughout the day we receive test results, prescription requests and documents that need reviewing and action from our GP team. Time to do this also has to be built into the working day.

We look after a number of nursing homes within our practice area. Contractually we are required to carry out a weekly ward round for each of these homes, which needs to be done by a GP. As the majority of these patients are frail and elderly, and many have dementia, these ward rounds are not something that can be done quickly.

All of our staff are also required to undertake regular statutory and mandatory training to enable them to continue to practice safely. In order to be compliant with regulations from the Care Quality Commission (CQC) we also need to have regular meetings to discuss significant events, update our clinical knowledge, and provide leadership to our team.

All of our GPs are what most people would class as “part-time”. However this does not often match up in reality. Our GP’s who work 4 clinical sessions a week are working around 36 hours each week to ensure all of the above workload is completed. Many of our GPs are also parents to young children, and so we experience the same pressures for annual leave around school holidays that many of our patients do too. Whilst we have limits on the number of staff who can be off at any one time, we have found it increasingly difficult to secure locum cover and many of our staff are regularly working overtime to cover extra shifts when we have gaps. If staff are on leave and we then also have someone off sick or isolating, this impacts even further. Sadly these things are often unavoidable.

Over the course of the pandemic we adapted our appointment model to try to maximise appointment availability for patients. A lot of the above services and requirements were put on hold to enable us to continue to meet patient needs. Gradually over the last 6 months, these requirements have been reinstated, will full implementation from the 1st of April 2022.

Pressures elsewhere in the health system – such as in hospitals or with community services – also have an impact on GP practices. Patients waiting for treatment will often come to us first to try and chase up a referral or help them manage their condition better at home while they await specialist input. This is having a huge impact on our appointment availability. We are unable to expedite appointments once a referral is made, and we understand this is frustrating for patients.

Since September 2021 we returned to offering patients the option to choose between a face-to-face and a telephone appointment at the point of booking (provided the patient is not reporting any Covid-19 symptoms). Despite what seems to be a growing opinion, a telephone appointment is still a full appointment. They are not any quicker than seeing someone face-to-face. Our Reception team advise any patient asking for a telephone appointment to consider whether a physical examination may be required, so that we avoid taking up to two appointments for the same problem. We continue to have to triage patients with potential Covid-19 symptoms over the phone to ensure we protect vulnerable patients and staff in the building.

Our phone lines are incredibly busy. Our Reception staff are working non-stop to answer them as quickly as possible. They also carry out other tasks such as processing repeat prescription requests, manning the front desk and calling patients to relay messages when asked to by other staff. We have unfortunately had some turnover in this team recently due to the pressures they are experiencing, and we have a number of new team members currently undergoing training. I can assure you that they are doing their very best in difficult circumstances. They want to help, and they also find it difficult when they cannot offer patients what they want.

I also need to highlight that we are not a limitless service. When we run out of appointments, we cannot offer more. Each day we have an on-call GP whose role is to deal with medical emergencies that come through from other health professionals – such as paramedics or hospital labs – or serious urgent problems from patients when we have no bookable appointments left. More frequently we are seeing patients insist on an urgent appointment for what is a routine matter, which is an inappropriate use of this service.

I am writing this letter to you as I want you to understand that we are doing our best as a practice in what really is an unprecedented time. I am also asking you to consider some of the following things that you can do to help us:

- 1) Firstly, consider if the surgery should be your first port of call. Your local community pharmacy can help with a range of common problems, and some can even see you and prescribe medication for certain conditions (such as urinary tract infections, eczema, coughs and colds). You can also call NHS 111 or visit www.nhs.uk for information on how to manage certain conditions and what symptoms to look out for. We are still seeing a large quantity of problems that do not need a GP appointment.
- 2) If you are able, use our e-consultation tool to help us guide you to the right care for routine, non-urgent or administrative queries. Visit www.kingswoodhealthcentre.co.uk and click on “Consult with your doctor online”. This helps us ensure we get you the right outcome, and also eases pressure on the phone lines for people who aren’t confident with technology.
- 3) If you are unable to attend an appointment, let us know so we can cancel it and offer it to someone else. We are still experiencing a high number of appointments where patients do not attend and do not tell us – meaning we cannot offer those appointments out to other people. This is very frustrating when demand is at such a premium.
- 4) Please do not book appointments asking for the doctor to expedite a referral or chase up the hospital on your behalf. They have no influence over this process. If you are struggling because an appointment or procedure has been delayed or cancelled, you should contact the Patient Advice and Liaison Service (PALS) at the hospital you have been referred to. We have seen a significant number of appointments being booked recently for this reason and there is nothing the doctor can do.
- 5) Support our Reception team when they ask you the reason for your appointment. Our team work to a protocol designed by our GPs which enables them to put you in with the right person, first time. We have a multidisciplinary team here at the surgery with staff other than GPs who can help with a wide range of problems. They are highly skilled and many of them are able to arrange prescriptions, scans and other investigations without the need for a GP

appointment. Please have patience with the Reception team – many of them are new and learning the role, and they are all doing their best to support you.

- 6) Familiarise yourself with how our appointment system works. Currently we release appointments either 2 weeks, 2 days or 1 day in advance (except on Mondays where a number are released the previous Friday). We also offer a number of appointments for same-day booking for non-emergencies. Each GP works a set pattern, so if you need to see a particular doctor check our website to see which days they are in: <https://www.kingswoodhealthcentre.co.uk/about-us/practice-staff/>. Please try and see the same doctor for any ongoing problems. If you have a new problem and are happy to see any doctor, please let Reception know.
- 7) Call us as early as possible. Our phone lines open at 8am and we advise patients to call as early as possible as appointments are booked up very quickly. Currently we are finding that we are normally fully booked by 9am. Some patients have suggested reserving some appointments to be released in the afternoon but from our experience this does not solve the problem – the appointments will still be booked, and patients have expressed anger towards staff for being asked to call back at lunchtime.
- 8) Follow our Facebook page for updates on our staffing levels, any planned closures or initiatives we are running to help patients – just search “Kingswood Health Centre”

We appreciate your patience during these difficult times. I hope this letter has helped raise awareness of how the surgery operates and all of the work that we are undertaking at the moment. Kingswood Health Centre is committed to providing a high-quality service to you and I want to assure you that we are doing everything we can to maximise availability of appointments.

If you have any suggestions of how you think we can improve things further, please email kingswoodhealthcentre@nhs.net or contact our Patient Participation Group, via kingswood.ppg@nhs.net

In the meantime, please bear with us.

With many thanks for your continued support,

Robyn Clark, Practice Manager

May 2022