**North West LEF Engagement Report:**

**GP Services and Primary Care Plans and**

**Out of Hours Progress**

**30 January 2020 in Albany Centre, 44 Ashley Street, G3 6DS**

**Introduction**

On the 30 January 2020 in the Albany Centre, Robert Smith, chair of NW Locality Engagement Forum (LEF), welcomed representatives from NW LEF, 3rd Sector Projects and the wider community to an engagement event focusing on changes to GP services, the Primary Care Implementation Plan and the Review of Out of Hours.

**GP Services and Primary Care Implementation Plans**

Kerri Neylon, Clinical Director, NW Locality and Margaret Black, NW Locality, Primary Care Development Officer provided the meeting with a very informative presentation (attached) covering the background, challenges, changes to services and expected outcomes of the Primary Care Implementation Plan. The following comments and discussion points were noted:

* The demand and waiting times for physiotherapy services were too long.
* The allocation of Link Workers in Glasgow is based on deprivation but there isn’t enough funding to provide a Link Worker for all the areas of need in Glasgow. Therefore areas with ‘pockets of deprivation’ such as Knightswood miss out. However the GP Clusters, especially those covering a more diverse patient population, are looking at the best use of the additional funding they are allocated and it may make sense to ‘pool’ resources to develop a service. These are discussion and decisions for GP Practices in the GP Clusters (7 – 8 GP Practices in each Cluster). Kerri advised that both Link Workers and pharmacy support can make a huge impact on a GPs time.
* It was agreed that it was an advantage when Community Pharmacists (local chemists branches of Boots, Lloyds, etc) who are Independent Contractors, had space for a consultation room/facilities in their shop.
* There was a discussion on the role of physiotherapist and referral pathways into other services. It was noted that a full assessment by a qualified practitioner was the best way to determine the correct course of treatment.
* There needs to be investment in a range of services such as, community supports to managing self care, encouraging exercise etc, to reduce reliance on anti depressants but GP’s also need time ‘within practice’ to discuss options and supports that patients can access. The additional staff and multidisciplinary teams should help create time for GP’s to spend time with patients with more complex needs.
* Link Workers ‘map out’ what community and voluntary services and supports are in their area. Building up knowledge and sharing information is a really important aspect to improving access to services and support for patients. Information about Waverly Care Support and Outreach Project will be circulated to all the Link Workers and GP’s in NW Locality.
* An example was provided where a patient phoned into the GP for a repeat prescription however the prescription was not forwarded to the Community Pharmacist. It took 3 days, a lot of phone calls and a number of visits to the Community Pharmacist before the prescription was send by the GP Practice. This was not an isolated incident as other patients were experiencing the same delay. There needs to be better system/communication between GP Practices and local Community Pharmacist.
* There were worries expressed about increasing demands on GP Practices and that those patients with severe, enduring and multiple health concerns were least able to access the time and support of the GP. Kerri advised that investing in multi-disciplinary teams would hopefully ‘free up’ GP time in order to tackle health inequalities and support the patients most in need.
* There were a number of comments about the need for a general education campaign for the public on ‘what health service to access and when’.
* There were concerns about the utilising the ‘mish mash’ of independent contractors. There were comments that some opticians are focussed on selling spectacles and some dentists seem to prioritise cosmetic treatments and that it is difficult for members of the public to know which practice to choose.
* As GP Practices change and develop so will the role of the receptionist and all the practice staff who will all become more knowledgeable and proactive at signposting patients to services. Additional training of all practice staff is ongoing and the education of the public on ‘what to expect from your GP Practice’ was noted. It was noted that leaflets / materials need to reflect that levels of literacy across the city are not high.
* It was noted that the physical health needs of people who have mental health issues can be neglected. There has been some inmprovement in this regard with the introduction of a Physcal Health Policy, and it is hoped that as the new GP contract takes effect, it will be become much more usual to have 15 minute appointments with GPs and this should be helpful for more complex consultations.
* The introduction of the new contract will be evaluated both locally and nationally.
* There was discussion of the lack of GP facilities in the city centre and that this reflects that until recently, there were few people living in the centre of the city. There are GP practices based in the Townhead Health Centre at the Glasgow Royal Infirmary, and in Argyle Street and St George’s Cross.

**Review of Out of Hours – Progress Update**

Kirsty Orr, Planning Manager, Review of Out of Hours Services (OOH), provided the audience with a presentation on the work that has been undertaken so far in relation to the Review of Out of Hours Services. (attached)

The review covered the whole of the Greater Glasgow and Clyde Board area and encompassed a number of services across the Health and Social Care Out of Hours system including: Home Care; District Nursing, Mental Health Services, Emergency Social Work and GP Out of Hours service. After the scoping and mapping exercise and several development sessions with all the key partners the recommendation was to create a professional facing Urgent Care Resource Hub (UCRH). It was agreed that Glasgow City’s HSCP would be the first to set up UCRH as Glasgow ‘hosted’ a number of Board wide OOH services. A location has been identified and is expected that the URCH will ‘go live’ in the summer of 2020.

The UCRH is a professional facing development which should deliver a more streamline and co-ordinated OOH service to the public as there will be co location of some teams, linked IT systems and skilled call handlers. It is also anticipated that co-ordination between OOH services and ‘daytime’ services will improve along with closer links with 3rd sector provision in the community.

**How patients and carers access OOH services will not change.**

The following comments and discussion points were noted:

* Edinburgh Gateway is a good example of a single point of access to information and services for patients and service users.
* Kirsty reassured the audience that this review is not about a reduction of teams or services it’s about better co-ordination and integration of exiting services. The review will also contribute to sustaining services as in recent years it has become increasingly difficult to recruit and retain staff to Out of Hours services and teams.
* There was reassurance that GPs would still provide home visits as required – the GP OOH service will be part of the UCRH.
* It was noted that the 3rd and voluntary sector projects and service have had cuts in budgets and funding over the last few years and find it difficult to meet demands. Kirsty advised the meeting that the HSCP had identified a sum of money which would be invested in 3rd and voluntary sector projects as part of the ‘Maximising Independence’ work stream.
* There were a number of comments on ‘when does the public know who and when to contact’ for support especially ‘out of hours’. It was agreed that information on where and how to access services needs to be accessible in order to reach patients and public with poor literacy skills, disabilities and for patients whose first language is not English etc.
* There will not be a change in telephone numbers of OOH services – the contact number for the Crisis Team will not change but the response will be better co-ordinated as many of the OOH teams and service will be co-located and virtually co-located via the new UCRH.
* The audience were re assured that a communication plan was in place for both the ‘lead in’ period and the launch of the UCRH – all key partners and services identified would be notified.
* The audience were reassured that the new UCRH would have access to interpreting services as normal.
* Support for people or carers affected by Learning disabilities would be covered by the UCRH during the out of hours periods.
* The GP Out of Hours Service was included in this review as maintaining GP OOH’s services in recent years it has become increasingly difficult. The ability to recruit and retain GP to staff the Out of Hours service had been difficult resulting in the closure of some of the GP OOH services. Addition staff capacity and management support had been allocated to address this problem and attract GP’s into the services. Employing salaried GPs the OOH service was being looked at as an option.

The meeting finished with a discussion on the need for additional support for carers and the suggestion of the HSCP providing the carers with a basic carers kit to support personal care and that Carers Services keeping in regular contact with known carers.

Robert thanked the speakers and audience for their participation in an informative and lively discussion.

**Appendix 3 – Attendance**

|  |  |
| --- | --- |
| **NAME** | **ORGANISATION** |
| Mariegold Akomode | Waverley Care |
| Andy Bell | NW Carers Team – Glasgow HSCP |
| Catherine Benton | Jordanhill Community Council |
| David Cowan | Merchant City and Trongate Community Council |
| Sadie Gordon | NW LEF |
| Alan Gow | NW LEF |
| Rita Hepburn | NW LEF |
| Mohammed Jamil | NW LEF |
| Anne Kilgour | NW LEF |
| Margaret Lance | Waverley Care |
| Elizabeth Lochrie | Glasgow City HSCP |
| Derek Manson-Smith | Woodlands & Park Community Council |
| Margaret Muir | Marie Curie |
| Gillian McCamley | Community Connectors – GCVS |
| Alan McDonald | NW LEF Member |
| Peter Goodwillie | (PA) |
| Gordon McInnes | NW LEF & MHN |
| Morag McKerrell | Broomhill CC |
| Mary Angela McKenna | Glasgow City HSCP |
| Thomas McKinlay | Local Resident |
| Raylene McLaggan | NHS GGC |
| Winnie McPhail | NW LEF |
| Mary McShane | NW LEF |
| John McVicar | NW LEF |
| Dr Alan Rodger | Community Representative |
| Mags Smith | NHS GGC |
| Robert Smith | NW LEF |
| Lillian Woolfries | NW LEF Member |
| Ellen Wright | High Knightswood & Anniesland Community Council |
| **In Attendance** | |
| Margaret Black | Glasgow City HSCP |
| Kerri Neylon | Glasgow City HSCP |
| Kirsty Orr | Glasgow City HSCP |
| May Simpson | Glasgow City HSCP |