

Primary Care Resilience Webinar #9

Improving access to general practice

Webinar #9 Summary | Tuesday 14 June 2022

Session 1 – Improving access from a patient perspective



Click image below to play this session in YouTube

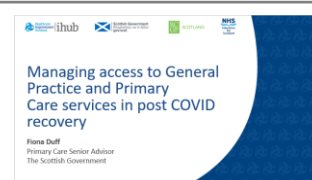
Introduction to first session

Dr Michelle Watts, Medical Advisor (Primary Care Division),
Scottish Government



Managing access to General Practice and Primary Care services in post COVID recovery

Fiona Duff, Primary Care Senior Advisor, The Scottish
Government



Patient Participation Group (PPG) contribution in improving GP practice access

Dr Kate Dawson, General Practitioner, NHS Western Isles



Session 2 – Improving times to access care



Click image below to play this session in YouTube

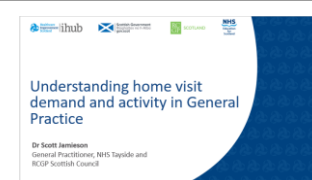
Introduction to second session

Dr Scott Jamieson, General Practitioner, NHS Tayside and
Royal College of General Practitioners Scottish Council



Understanding home visit demand and activity in General Practice

Dr Scott Jamieson, General Practitioner, NHS Tayside and
RCGP Scottish Council



How to set up a new appointment booking system to manage patient demand

Lynne Martin, Practice Manager, NHS Tayside



Understand clinical demand and time in general practice using data collection tools

Anne Ribet, Practice Manager, NHS Shetland



Resources mentioned during the Webinar

- [GP Access Tools](#)
- [Care Navigation 10 Step Guide](#)
- [Right Place Receptionist Campaign](#)
- [Learning summary - Understanding home visit demand and activity in General Practice](#)
- [Learning summary - How to set up a new appointment booking system to manage patient demand](#)
- [Learning summary - Understand clinical demand and time in general practice using data collection tools](#)
- [NES Facebook page for General Practice Managers](#)

Chatbox analysis

Thematic analysis of webinar chatbox

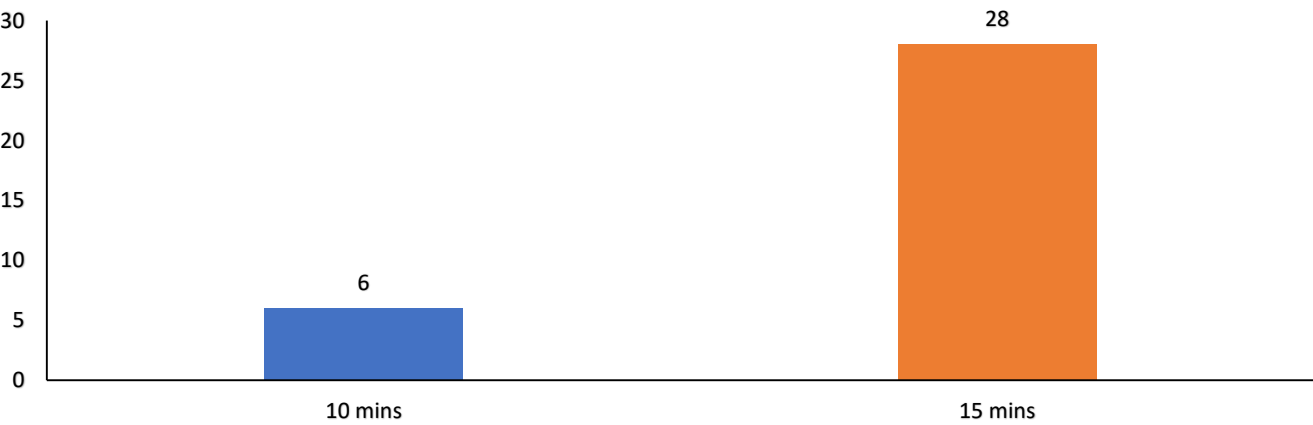
The conversation in the chat was very rich and insightful. You can [access the chat](#), which has been organised under the following **themes**:

- Managing the demand
 - Understanding the demand
 - Approaches to manage the demand
 - Using technology to manage demand
 - Public messaging and education
- Capacity issues
- Using technology to maximise capacity
- Appointments
- Communication with patients
- Patient Participation Groups (PPGs)
- Other comments

Chatbox poll question result

Appointment length	When asked whether F2F appointments were currently 10 or 15 minutes in their practice, over 80% respondents answered 15 minutes.
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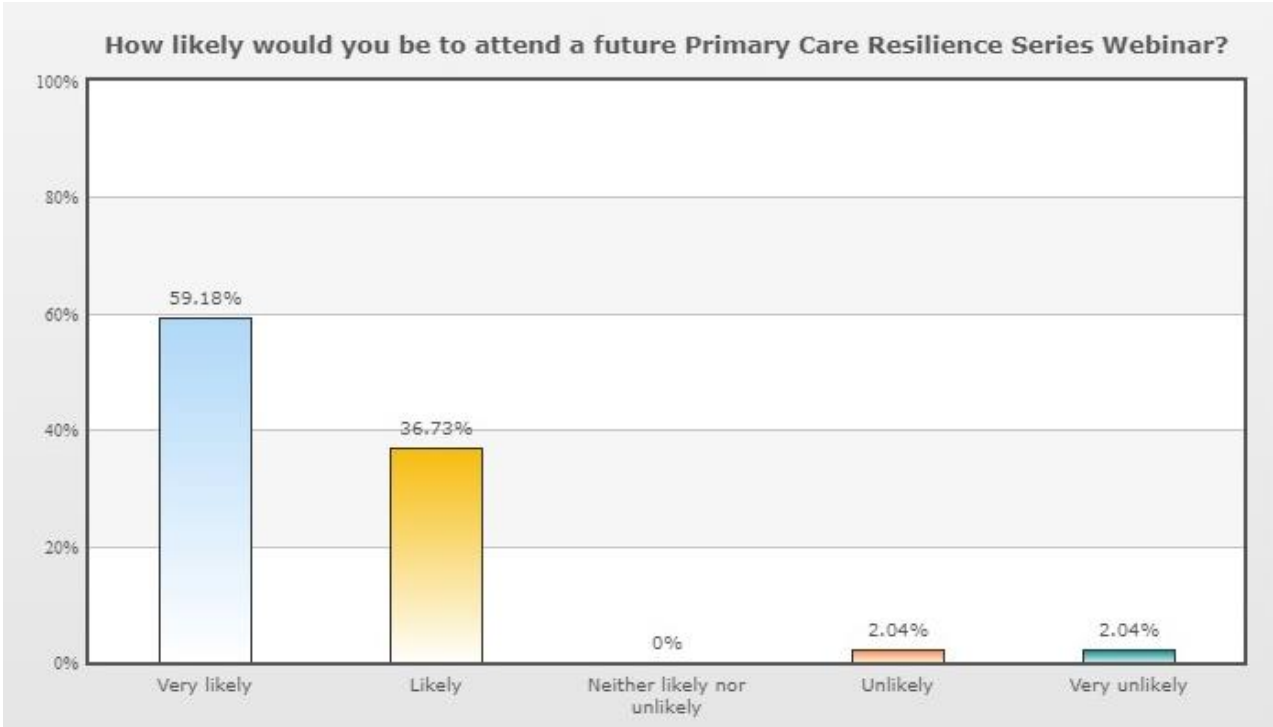
Number of responses to question
‘How long are F2F appointments in your practice?’



Evaluation Feedback

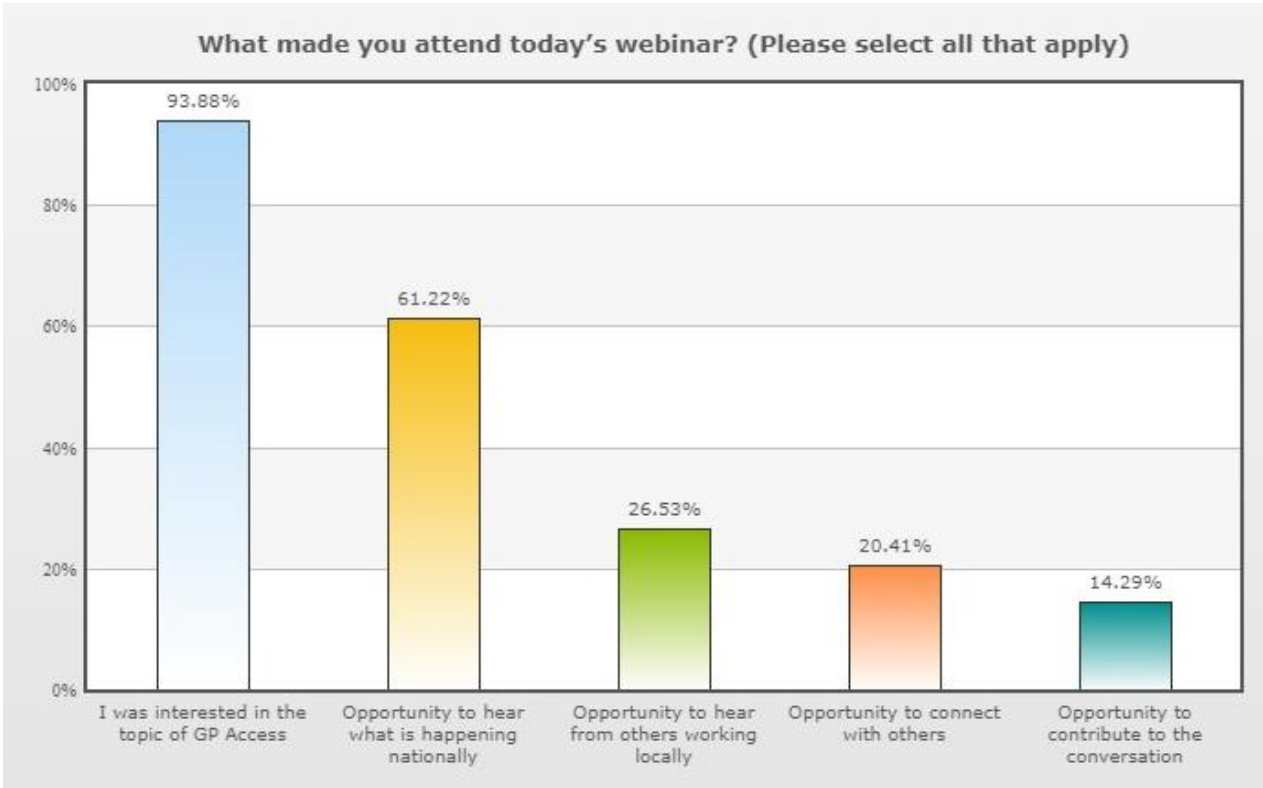
How likely would you be to attend a future Primary Care Resilience Series Webinar?

47 attendees completed the evaluation survey. Nearly 96% of respondents said it was very likely/likely they would attend a future Primary Care Resilience Series Webinar.



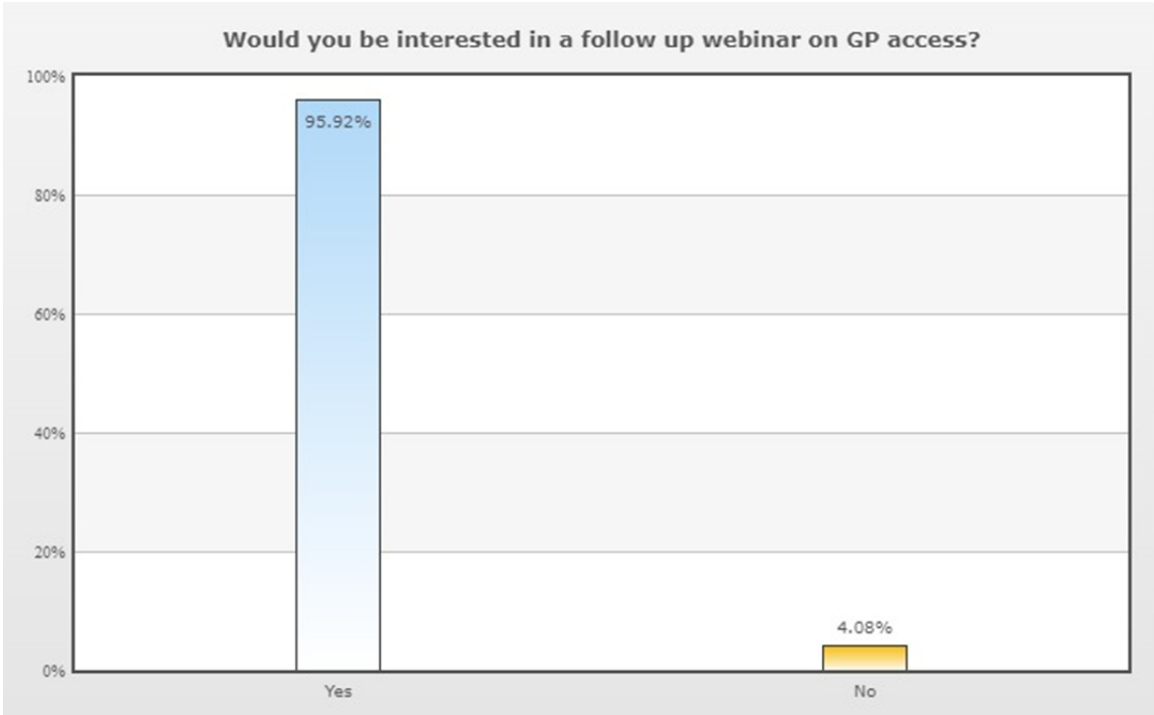
Top Reasons for attending

Respondents’ reasons for attending the webinar were mainly having an interest in the topic of GP Access and hearing what is happening at a national level.



Interest in a follow up webinar

Nearly 96% of respondents said they would be interested in a follow up webinar on GP access.



What will you take away from today’s Webinar and apply to your own work?

Shared/increased knowledge

Hearing about other practices’ experiences	It is good to see that other practices are also moving back to what they offered before pandemic. We have never been a lover of triage and were pleased to move back to patient choice mixed with care navigation.
	In fairness, all that was discussed was already known by myself. Although I didn't really learn anything new, I found it helpful to listen to the challenges and what is being done to face those challenges.
	An overview of what other places are doing and how that could be applied to my locality.
	Raises my awareness of how other practices are managing the challenges of demand and access.
GP practices facing similar issues	Interesting chat. Good to know that we are all experiencing similar issues.
	That the issues facing our practice are widespread and across all of Scotland.
	That we are moving in the right direction and Its not only my practice that need a bit of help to try and help with demand.
	We are working similarly to larger practices.
	That we are all in this together.
GPs are under big pressure	GP practices are under immense pressure.
	All Practices are working under extreme pressure.

What will you take away from today's Webinar and apply to your own work? (cont)

Shared/increased knowledge (continued)

Increased awareness of national activity	Awareness of what is happening nationally to support practices.
	To hear what is happening elsewhere.
Resources available	The tools that we can use to look at access and the importance of reliable technology to look at it.
	PM newsletter. Access evaluation.
Useful ideas / interesting points	GP access is variable across Scotland...but some useful ideas were shared which will improve patient access if adopted.
	Interesting points made of how other GP surgeries work their appointment system, what works and what doesn't.
Need for data before changing	Lot of work to be done to provide data and then change.
Multi-faceted solutions	Everyone seems to know what problems are but no clear path to fixing yet.
	Fine balance between access, demand, quality and survival. There's no simple answer.
	Tackling issues regarding access requires multi-faceted solutions involving the whole practice team and patient groups.
	Bigger subject than I imagined with lots of issues for practices.
Potential benefits of Patient Participation Group (PPG) /social media	Liked the patient participation on Facebook in Benbecula.
	Thing about PPG and/or Facebook patient groups.
	Social networking done properly works.
	I wish I'd filled this in at the time but from memory but I felt that other surgeries were reporting good results from patient participation groups.
	The potential of a PPG to enable more communication with the Practice and the community.
Telephone system a clear source of frustration for patients	Telephone wait times are clearly a source of frustration for our patients which we can only hope to improve.
	It was helpful to learn that we are not alone with the biggest complaint we receive at practice level being about the telephone system. We will look further into what can be done with cloud based system.

Negative

Not learnt much - case studies not representative	Was actually attracted by the resilience heading-first of these that I have heard about 1 to 8 passed me by! Didn't learn much though hearing other's positions of mild interest.Felt the whole thing was rather guilty of confirmation bias and rather disingenuous to present topics from such outlying practices in terms of situation/geography/size.
Disappointed	I was disappointed.

What will you take away from today's Webinar and apply at to your own work? (cont.)

Intention to apply learning (continued)

Explore / use available GP access tools	I will access the toolkits that were discussed and look at which may be helpful to use in my practice
	I plan to look at the data collection tool. I will do an audit of unseen demand.
	Visiting the HIS website for ideas. Probably going to run an audit.
	Reviewing data collection, using iHub tools.
	Would perhaps be interested in getting together some figures about our access.
Review appointment system/data	Review our appointment system and try to adapt to make access to appointments easier for patients.
	Audit with other practices to see what everyone uses for their appointment system now.
	Revisit need to specify encounter type in Vision.
	Will see if we can use the appointment reporting in vision to inform our appointment spread
	I am new in Practice Management and I will further investigate the HIS Access tools to use in our Practice to ensure we make the right type of appointments available to our patients.
	Appointment data extraction - still need to find out more. Not clear what is going to be extracted? Maybe it will become clear but more information on which consultation types etc. would be good so that data is comparable.
Find out more about DACS	Email Fiona Duff about DACS.
Share resources with others	I will share the practice manager resource with our practice manager.
	NES Newsletter - getting all the City Practice Managers access to it.
	Feedback / support our local practices to navigate the demand for access.
Look at comm. with patients and working with PPG	Look at how we communicate with patients in general.
	Try to reinvigorate our PPG!
Other	
Chance to feedback to SG	I like that policy makers / advisers are interested in grassroots' comments. I feel that it is a vital function for us to feedback from the "front line".
	Good to have opportunity to influence Scottish Government on pressures facing General Practice.
Patients to be made more aware of changing GP world	GP world is changing and the public need to be made more aware from a SG level communicate this message to our public and also MDT (Multi-Disciplinary Team) working re PCIP more integrated.

Other comments	
Thank you/ positive	Thank you for this. It's a useful staring place. I think we could do with doing discussions regionally and locally.
	Thanks very much for providing these events, they are well run and very helpful.
	Thanks
	Excellent webinar. Fast paced, informative, interesting, relevant, fab!
	Well delivered and structured. Short, bitesize pieces of info.
Chat box/poll distracting	I think the webinar would work better if we just focussed on the chats as I was so distracted by this and I have to be honest and say that I did not really engage with some of the presentations. Perhaps, having someone to lead on the chat function would work better.
	Having the poll during the session was very distracting with the boxes popping up all the time.
	Webinar was great although I have to admit I became very distracted by the chat box and let my attention drift from the presenters.
Fewer sessions to allow more discussions	It was very quick paced, I think perhaps one less presentation in the time might have allowed more discussion.
Patients default to complain and think we're rubbish due to media, lack of proper support to primary care and bad mouthing by colleagues in secondary care	Any initiatives undertaken tend to be directed to those practices struggling most (which is fair) but it does mean that the patients of practices that are not struggling as much because they have invested more heavily in systems, software, staffing, better management etc, are being prejudiced in terms of available services. These surgeries are much less profitable for the GP partners. The patients have no concept of whether their own surgery is better run or less well run compared to others and so they default to the position that their own surgery is rubbish. So it almost doesn't matter if you try really hard to run the surgery for the patient's benefit or not, they still complain and think we're rubbish and this concept comes from the media and directly from Scottish Government's lack of proper support to primary care. This comes from their ignorance of how primary care is run and funded and what is physically possible, or not. There is a real problem that has even percolated into secondary care and we frequently have patients abusing us on the phone because of the bad mouthing by our supposed colleagues in secondary care.
Good discussion	Good discussion. Good to have the chat function on as generates discussion.

Published August 2022



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