Nottinghamshire Local Medical Committee

Representing and supporting GPs

FOCUS ON...

ISSUE 4: NOVEMBER 2022

SAFE WORKING IN GENERAL PRACTICE

OUR EASY TO READ SUMMARY OF CURRENT ISSUES FOR GENERAL PRACTICE

Safe Working in General Practice

Sadly, we hear on a regular basis how practices are struggling to cope with workload. We know that a combination of factors has created this situation affecting the capability of practices to cope with the demands placed upon them, not least, years of inadequate funding for the work you do.

We also know that recruitment and retention of the workforce is a massive problem. We are working hard to try to improve the situation on all fronts but now urge you to consider what you may want to do to ensure safe care for your patients.

WHAT IS THE BMA GPC ENGLAND GUIDANCE ON SAFE WORKING IN GENERAL PRACTICE?

The General Practitioners Committee England (GPCE) of the BMA has sought to provide guidance on how practices can try to ensure safe care for patients and has backed up their recommendations with legal advice to ensure that none of the changes represent a breach in the General Medical Services (GMS) contract.

As with any guidance, it is completely up to practices to consider what you would like to adopt, amend, ignore etc but we encourage you to consider all measures detailed to decide what is right for you, if anything.

For any further support on this or anything else please email us at liaison@nottslmc.co.uk or call on 0115 977 1341.

Safe Working in General Practice

WHAT DOES THE GPCE RECOMMEND TO HELP YOU TO SERVE PATIENTS SAFELY?

- Continued use of remote consultation with triage where appropriate.
- Move to standard 15-minute slots for GP appointments.
- Take urgent action to move towards safe consultation numbers per day. Consider 25 patient contacts per day as set out by the European Union of General Practitioners.
- Move away from a duty doctor system with **uncapped** demand.
- Use alternative options to service unmet demand where there is more pressing need for care e.g. Walk-in centres, greater use of ARRS staff to reduce demand GP appointments where clinically appropriate, extended access appointments, clinical pharmacy consultation service (CPCS).
- Reassess where 111 has directly booked into GP appointment books to decide what is needed for the patient which may not be a GP appointment.
- Discuss any potential changes with your sessional GP workforce (salaried & locum) as they may be able to assist with ideas of how to work differently.
- Move to a waiting list system for patients who do not need to be seen on the day if capacity on the day is exhausted.
- Advise the patients on the waiting list to contact the practice should there be any change in condition requiring more pressing assessment/treatment.
- Start to account for patient contacts within appointment books as a way of accounting for extra, less visible workload. This can be where a patient is called about a result or discussion had with community teams etc about a patient for example.
- Escalate any extra work requests from external agencies to the LMC/ICB e.g. secondary care trusts, public health etc.
- Consider applying to close your patient list if patient safety is being compromised.
- Consider all non-core activity and decide if you need to concentrate on core work and serve notice on enhanced services and stop providing private work. Assess the cost-effectiveness of services you have signed up for.

For any further support on this or anything else please email us at liaison@nottslmc.co.uk or call on 0115 977 1341.

Safe Working in General Practice

WHAT DOES THE CONTRACT SAY ABOUT PROVIDING APPOINTMENTS FOR PATIENTS?

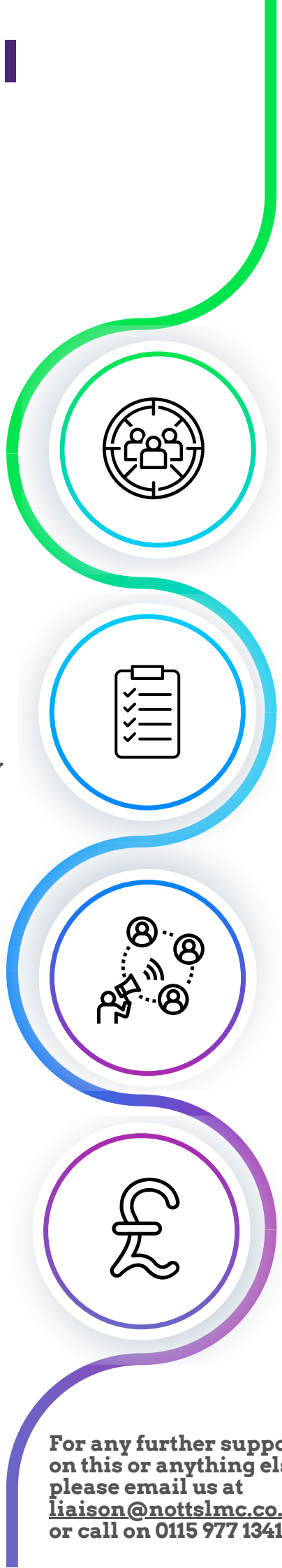
The GP contract states that contractors must provide enough appointments to meet the reasonable need of their patients. However, these must be within safe bounds for patients and GPs and there is guidance on what 'reasonable needs' actually means. They must assess the needs of the patients to ensure that appropriate care is offered to them.

General practice is not an emergency service, emergency or urgent problems can be directed to the emergency department, 999, or NHS 111.

GMS regulations allow practices to provide *"services delivered in the manner determined by the contractor's practice in discussion with the patient."*

WHAT DOES THE LMC THINK OF THIS?

Let us be clear, we are in this situation primarily due to insufficient commissioned safe capacity within general practice. The NHS does not understand the scale of the challenge in general practice as so much of the work undertaken is invisible and delivered in a way that is not itemised or paid for. Effectively we have the 'all you can eat buffet' style of contract here with a global sum payment, QOF and localised and national enhanced services for targeted work. Something must change as those working in the profession are getting fed up and leaving and others are being put off from coming into the profession seeing how pressurised it is. We cannot realistically expect the government to change this situation on their own, we must take whatever control we can of this at practice level – easier said than done, we know.



For any further support on this or anything else please email us at liaison@nottslmc.co.uk or call on 0115 977 1341.

Safe Working in General Practice

WHAT DOES THE LMC THINK OF THIS?

Many in general practice will feel uncomfortable with elements of the guidance. It is important to keep in mind the reason for changing how practices manage demand, it is to maintain safe patient care (and indeed prevent clinician burnout). There is a risk that patients are exposed to potential harm because practices are working so hard to try to meet all demands placed upon them. Practices have more control on this than they may feel they have.

We feel that as practices you must do whatever you need to do to continue to provide safe care for patients, nobody could argue with the rationale behind taking such action. We hear regularly of working on days off, failing to spend time with their families due to work, reading bedtime stories to their children etc. As independent contractors, GPs can choose how to distribute their working hours across core hours and must do so wisely if the current model of care is to be maintained.

We know that many people will read the guidance and find laughable the recommendation to limit patient contacts to 25 per GP per day. We would encourage capping of work to control workload and enable GPs and other clinicians to work to a more predictable level – whatever the limit is set at.

We have discussed this guidance with ICB colleagues as we know that there is a risk that practices changing how they work - implementing caps on activity, operating waiting lists etc may in the short-term generate patient dissatisfaction. We also need to ensure that any changes are within the requirements of the GP contract and do not place contract holders at any risk.

For any further support on this or anything else please email us at liaison@nottslmc.co.uk or call on 0115 977 1341.

Safe Working in General Practice

WHAT DOES THE LMC THINK OF THIS?

The notion of a 'waiting list' is to avoid the repetitive calls at 8-9am every morning where people are encouraged to call to get an appointment on the day, and then if unsuccessful asked to call again the next morning. It would reduce strain on phone lines and frustration of patients and enable more planned provision of care.

With any significant changes to how you deal with patient demand we would suggest strongly that you discuss the challenges and your plans with your Patient Participation Group (PPG), your patients can be your allies in this and help you to plan services and communicate with your wider patient population.

We would be very happy to assist practices in meetings/communications with the PPG. Healthwatch are also an organisation speaking up for patients that we can work with for you to make clear the challenges and explain why and how some practices will change how they work. It's all on the grounds of patient safety which again is hard to argue against and indeed is a cornerstone of GMC Good Medical Practice.

For any further support on this or anything else please email us at liaison@nottslmc.co.uk or call on 0115 977 1341.

Safe Working in General Practice

DOES THE LMC HAVE ANY FURTHER ADVICE ON HOW TO PROVIDE SAFE WORKING?

We feel that there is more that practices can consider doing to try to provide safe working. A checklist follows:

- Monitor clinics for repetitive appointments where unnecessary. Some GPs routinely invite patients back in e.g. 2-4 weeks and their clinics look very similar at those intervals, this way of working may compromise the capacity of the practice to serve its population.
- Consider where working at a wider level e.g. PCN may enable a different way of managing demand, particularly same day demand. Can a hub clinic, like that utilised by many for extended access, be used for same day demand across practices to free up space and reduce strain on practice phone lines etc?
- Is there an option to outsource call-handling or operate this at hub level? A hosted phone solution linked to the clinical systems may allow handlers to answer for a collection of practices thus freeing up reception/admin staff.
- If an acute event occurs that compromises your ability to provide safe care, you may exceptionally pause on new patient registrations (different to applying for a formal list closure). If considering doing this, please contact us at the LMC and then the ICB.
- Be prepared to reduce the service to preserve safe working. During the festive season some practices move primarily to same-day appointments and during periods of pressure practices sometimes cancel an afternoon clinic for example. Practices do not have to provide a set number of clinics every day all day but must show that they are meeting the reasonable needs of their patients within their means to do so. There must be GP cover in place during core hours but, that does not mean that they have to be providing clinics all day every day.

If you want to bring changes to how you work into the practice and want to discuss it with us then please do.

For any further support on this or anything else please email us at liaison@nottslmc.co.uk or call on 0115 977 1341.