

NORTH         AMBER 2         3         38 / 1000pts         75%           CENTRAL         RED         4         27 / 1000pts         75%           NO PCN         AMBER 2         3         29 / 1000pts         100%           UPPER         RED         4         23 / 1000pts         67%           LOWER         RED         4         24 / 1000pts         100%           CALDER & RYBURN         RED         4         32 / 1000pts         100%           Bold figures indicate over 50% return rate.         MIN NUMBER OF PATIENTS COVERED BY AMBER + PRACTICES*.         201,3%           GPAS to OPEL Conversion for the county wide assessment         4		GENE	RAL PRACTICE ALERT STAT	E (GPAS) - STIKEP	
CALDERDALE LMC  GPAS STATUS  OPEL CONVERSION  CLINICAL ACTIVITY  RETURN F  STATUS  NORTH  AMBER 2 3 38 / 1000pts 75%  CENTRAL  RED 4 27 / 1000pts 75%  NO PCN  AMBER 2 3 29 / 1000pts 100%  UPPER  RED 4 23 / 1000pts 100%  CALDER & RYBURN  RED 4 32 / 1000pts 100%  CALDER & RYBURN  RED 4 32 / 1000pts 100%  Bold figures indicate over 50% return rate.  WIN NUMBER OF PATIENTS COVERED BY AMBER + PRACTICES¹.  GPAS to OPEL Conversion for the county wide assessment  Indicative number of patient contacts in General Practice this week².  SEP  Response Overview  AMAT STABLE Proc			09 <sup>th</sup> January 2023	<b>.</b>	
STATUS					
STATUS					
CENTRAL RED 4 27 / 1000pts 75% NO PCN AMBER 2 3 29 / 1000pts 1009 UPPER RED 4 23 / 1000pts 67% LOWER RED 4 24 / 1000pts 1009 CALDER & RYBURN RED 4 32 / 1000pts 1009 Bold figures indicate over 50% return rate.  MIN NUMBER OF PATIENTS COVERED BY AMBER + PRACTICES¹.  GPAS to OPEL Conversion for the county wide assessment 4 Indicative number of patient contacts in General Practice this week².  See Parity of the county wide assessment 18  AMELIAN STATEMENT OF PATIENTS COVERED BY AMBER + PRACTICES¹.  CELECTRICATION OF THE COUNTY WIDE ASSESSMENT 18  AMELIAN STATEMENT OF THE COUNTY WIDE ASSESSMENT 18  CELECTRICATION OF THE COUNTY WIDE ASSESSMENT 199823			OPEL CONVERSION	CLINICAL ACTIVITY	RETURN RATES
NO PCN  AMBER 2  3  29 / 1000pts 1009  UPPER  RED 4  23 / 1000pts 67% LOWER  RED 4  24 / 1000pts 1009  CALDER & RYBURN  RED 4  32 / 1000pts 1009  Bold figures indicate over 50% return rate.  MIN NUMBER OF PATIENTS COVERED BY AMBER + PRACTICES¹.  GPAS to OPEL Conversion for the county wide assessment 1 Indicative number of patient contacts in General Practice this week².  Separation of the county wide assessment 1  AMERICAN STATES AND STATES OF THE STATES OF TH	NORTH	AMBER 2	3	38 / 1000pts	75%
UPPER RED 4 23 / 1000pts 67% LOWER RED 4 24 / 1000pts 1009 CALDER & RYBURN RED 4 32 / 1000pts 1009 Bold figures indicate over 50% return rate.  MIN NUMBER OF PATIENTS COVERED BY AMBER + PRACTICES*.  GPAS to OPEL Conversion for the county wide assessment 4 Indicative number of patient contacts in General Practice this week².  Separation of the county wide assessment 18  Calderdale 18  AMANT Status Trend	CENTRAL	RED	4	27 / 1000pts	75%
LOWER RED 4 24 / 1000pts 1009 CALDER & RYBURN RED 4 32 / 1000pts 1009 Bold figures indicate over 50% return rate.  MIN NUMBER OF PATIENTS COVERED BY AMBER + PRACTICES¹. 201,38 GPAS to OPEL Conversion for the county wide assessment 4 Indicative number of patient contacts in General Practice this week². 5,643  Response Overview  AMANT STANION Trend	NO PCN	AMBER 2	3	29 / 1000pts	100%
CALDER & RYBURN RED 4 32 / 1000pts 1009  Bold figures indicate over 50% return rate.  MIN NUMBER OF PATIENTS COVERED BY AMBER + PRACTICES'. 201,33  GPAS to OPEL Conversion for the county wide assessment 4  Indicative number of patient contacts in General Practice this week? 5,643  Response Overview 18  Calderdule 19  Alars Status Trend	UPPER	RED	4	23 / 1000pts	67%
Bold figures indicate over 50% return rate.  MIN NUMBER OF PATIENTS COVERED BY AMBER + PRACTICES¹.  GPAS to OPEL Conversion for the county wide assessment  Indicative number of patient contacts in General Practice this week².  Response Overview  The Calder falle  Calder falle  Calder falle		RED	4	24 / 1000pts	100%
MIN NUMBER OF PATIENTS COVERED BY AMBER + PRACTICES¹.  GPAS to OPEL Conversion for the county wide assessment  4 Indicative number of patient contacts in General Practice this week².  5,643  Response Overview  Alart Status Trend	CALDER & RYBURN	RED	4	32 / 1000pts	100%
GPAS to OPEL Conversion for the county wide assessment  Indicative number of patient contacts in General Practice this week².  5,643  Response Overview  Alert Status Trend	Bold figures indicate	over 50% return	n rate.		
Response Overview  Alert Status Trend	MIN NUMBER OF PA	201,399			
Response Overview  The status Trend  The status	GPAS to OPEL Conve	4			
Alert Slatus Trend  Alert Slatus Trend	Indicative number of	patient contacts	s in General Practice this	week².	5,643
Alert Status Trend  15  19  10  11  11  11  12  13  14  15  15  16  17  18  18  19  19  10  10  10  11  11  11  12  13  14  15  15  16  17  18  18  18  18  18  18  18  18  18	Response Ov	/erview			
Til 11			Calderdale		
Til 11			11-	_7	
Response Count of the count of	Alert Status Trend				
6	Response Count 01		11		
0 Tuesday, January 10, 2023 Tuesday, January 10, 2023 Wednesday, January 11, 2023 Thursday, January 12, 2023	0	1			

## **GPAS – COMMENT / ANALYSIS**

The county wide assessment this week is RED / OPEL 4 with all reporting practices assessed as covering a total patient population of 201,399, which is a decrease of 515,957 from last week's reporting. Eleven practices reported as red this week, which covers 144,442 patients, which is a decrease of 6,042 from last week's reporting. There are

56,957 patients who are covered by amber practices which is a decrease of 10,399 from last week's reporting. There were no practices who reported as green. The indicative number of patient contact has increased to 5,643 which is 29 more than last week's reporting. The submission data for this week was derived from 18 practices submitting, which is a decrease on last week's reporting. Currently there is 1 practice that identifies as not being in a PCN, which is outlined in the above table. Clinical activity has increased for North, Central, Lower and Calder & Ryburn. Clinical activity has slightly decreased Upper PCN and the practice who identifies as not being in a PCN..

## PRACTICE COMMENTS

The purpose of the weekly quotes, extracted from comments submitted in GPAS, is just to provide human context from the front line:

"High demand, workforce absence and ongoing winter pressures impacting service delivery."

"Patient demand incredibly high, workforce issues - illness and struggling to recruit. Reviewing current guidance sent out by LMC yesterday with the team. Our main concern is with the non urgent work, if we plan to move to a waiting system this with have a huge financial impact on our QOF/IIF. We only have until the end of March to achieve targets and the income received from these makes a huge impact on practices. Are there any further discussions with NHSE for any support with these?."

"All clinicians regularly consult with more than 25 patients each day. In addition to this our clinicians daily have admin patient contacts for blood test results, correspondence and tasks."

"Demand is decreasing to manageable levels. Staff levels are back to normal after sickness, bereavement, A/L over the most difficult 2 week period when pharmacies were less than helpful."

"Staff shortage and demand for extra urgent appointments am and pm."

"Demand still high, one clinician still down following covid."

## SYSTEM ACTIONS/COMMENTS ON LAST SITREP

The return rate has decreased this week, with 3 practices not submitting data, therefore the clinical data such as number of patient contacts in practices and clinical activity/1000pts submitted this week may not be truly representative of actual for all of Calderdale.

The LMC continues to have direct dialogue with practices and offer their support to practices.

The overall OPEL assessment is a confident position though as an average across PCN and Calderdale.

## SUMMARY - to be updated with current issues

The LMCs continue to be concerned about the resilience and forbearance of practice teams across the county; all the signs are that the exhausted workforce is under pressure and that is set to deepen.

The key issues summarised below remain extant.

ISSUE	FIRST RAISED	LEAD
Unauthorised Transfer of work from Secondary to Primary care		STP/CCP
Patient expectations Management (national)		NHSE
Practice capacity to sustain current rates of delivery above core contract		ССР
Workforce retention		System

Patient demand — A higher than expected level of patient contact with practices through both on-line access and telephones due to usual winter pressures has been exacerbated by the current Strep A concerns amongst the patient population, leading to, on average an increase of over 40% in initial patient contact.	12.12.22	System	
Workforce – Due to a combination of staffing vacancies and sickness, administration / reception teams across Calderdale are down by around 20%. This has led to long delays in meeting the above demands, and in some cases severe delays in responding.	12.12.22	System	
Clinical capacity – Again, vacancies/sickness levels amongst key clinical roles is now above manageable levels. This is now at a level where many of our GPs are delivering patient contacts at more than 50% of the anticipated number. This is also combined with a high level of shortfall in nursing/other clinical roles within general practice teams.	12.12.22	System	

The LMC is happy to discuss informally with the CCP on the above to ensure we are coherent on context etc.