

	GENE	RAL PRACTICE ALERT STAT	E (GPAS) - SITREP	
		03 rd April 2023		
		CALDERDALE LI	MC	
	GPAS STATUS	OPEL CONVERSION	CLINICAL ACTIVITY	RETURN RATES
NORTH	AMBER	3	31 / 1000pts	100%
CENTRAL	AMBER	2	23 / 1000pts	50%
NO PCN	GREEN	1	26 / 1000pts	100%
UPPER	AMBER	2	30 / 1000pts	100%
LOWER	AMBER	3	21 / 1000pts	60%
CALDER & RYBURN	GREEN	1	26 / 1000pts	100%
Bold figures indicate	over 50% retur	n rate.		
MIN NUMBER OF PA	TIENTS COVER	ED BY AMBER + PRACTIO	CES ¹ .	133,573
GPAS to OPEL Conve	ersion for the co	ounty wide assessment		2
Indicative number of	patient contact	s in General Practice this	week².	4,495
GP AS Response C	Overview	submission Count	4/3/2023 4/6/2023)
		Calderdale	-5	
Alert Status Trend				
15		3		
Response Count 0				
5		5	2	
GPAS – COMMENT / A	day, April 03, 2023	Tuesday, April 04, 2023 Date	Wednesday: April 05, 2023	

GPAS – COMMENT / ANALYSIS

The county wide assessment this week is AMBER / OPEL 2 with all reporting practices assessed as covering a total patient population of 178,252, which is a decrease of 20,462 from last week's reporting. Three practices reported as red this week, which covers 37,625 patients, which is an increase of 3 from last week's reporting. There are

95,948 patients who are covered by amber practices which is a decrease of 10,642 from last week's reporting. Five practices reported as green, which covers 44,679 patients, which is a decrease of 9,823 from last week's reporting. The indicative number of patient contact has decreased to 4,495 which is 908 less than last week's reporting. The submission data for this week was derived from 17 practices submitting, which is a decrease from 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 the practice which identifies as not being in a PCN and remained the same for Lower PCN. North, Central, Upper and Calder & Ryburn PCN's have decreased in clinical activity this week.

PRACTICE COMMENTS

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

"Absence from clinicians and staff impacting overall service."

"Sickness and annual leave."

"Demand very high, not enough capacity. We are struggling with juggling the on the day and book in advance as routine care is being booked up to 8 weeks in advance meaning numbers for on the day drop. We are reviewing and looking at new ways to manage on the day."

SYSTEM ACTIONS/COMMENTS ON LAST SITREP

The return rate has decreased this week, with 4 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	12.12.22	System

around 20%. This has led to long delays in meeting the above demands, and in some cases severe delays in responding.			
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.