



GPAS – COMMENT / ANALYSIS

The county wide assessment this week is AMBER / OPEL 3 with all reporting practices assessed as covering a total patient population of 214,502, which is an increase of 126 from last week's reporting. Three practices reported as red this week, which covers 37,623 patients, which is a decrease of 4 from last week's reporting. There are 131,758 patients who are covered by amber practices which is a decrease of 9,157 from last week's reporting. Five practices reported as green, which covers 45,121 patients, which is an increase of 9,745 from last week's reporting. The

indicative number of patient contact has increased to 5,706 which is 17 more than last week's reporting. The submission data for this week was derived from 20 practices submitting, which is the same as 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 and Lower PCN's and remained the same for Upper and Calder & Ryburn PCN's. Clinical activity has decreased for Central PCN. As the practice which identifies as not being in a PCN did not submit any data last week, there is no comparison in regard to clinical activity.

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 across clinical and non-clinical, plus vacancies in reception impacting whole overall service.."

"Staff shortages and sickness."

"Staffing issues and sickness."

SYSTEM ACTIONS/COMMENTS ON LAST SITREP

The return rate has increased this week, with only 1 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 chartfall in purcing (other clinical roles within general practice) | 12.12.22 | System | |
|--|----------|--------|--|
| of shortfall in nursing/other clinical roles within general practice teams. | | | |

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