

## GENERAL PRACTICE ALERT STATE (GPAS) - SITREP

02<sup>nd</sup> May 2023

### CALDERDALE LMC

	GPAS STATUS	OPEL CONVERSION	CLINICAL ACTIVITY	RETURN RATES
NORTH	AMBER	3	34 / 1000pts	75%
CENTRAL	AMBER	3	24 / 1000pts	100%
NO PCN			/ 1000pts	0%
UPPER	AMBER	2	39 / 1000pts	67%
LOWER	AMBER	3	22 / 1000pts	80%
CALDER & RYBURN	AMBER	2	32 / 1000pts	75%

Bold figures indicate over 50% return rate.

MIN NUMBER OF PATIENTS COVERED BY AMBER + PRACTICES<sup>1</sup>.

160,773

GPAS to OPEL Conversion for the county wide assessment

3

Indicative number of patient contacts in General Practice this week<sup>2</sup>.

4,690

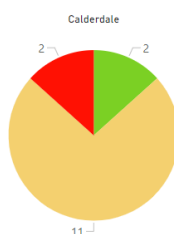


Response Overview

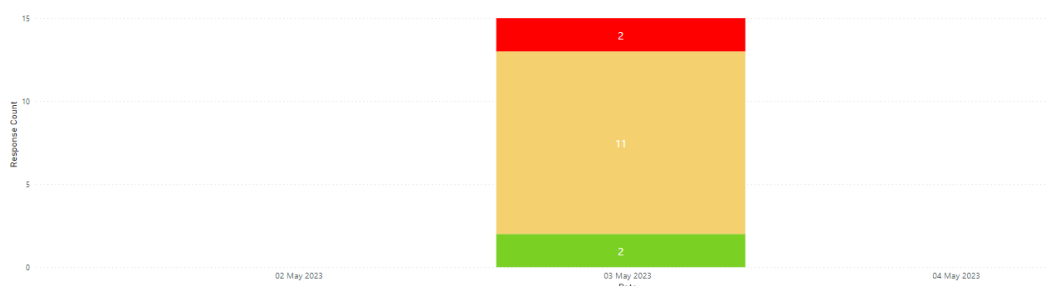
submission Count

15

02/05/2023 04/05/2023



Alert Status Trend



### 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 174,967, which is a decrease of 39,535 from last week's reporting. Two practices reported as red this week, which covers 24,446 patients, which is a decrease of 13,177 from last week's reporting. There are 136,327 patients who are covered by amber practices which is an increase of 4,569 from last week's reporting. Two practices reported as green, which covers 14,194 patients, which is a decrease of 30,927 from last week's reporting. The indicative number of patient contact has decreased to 4,690 which is 1,016 less than last week's reporting. The

submission data for this week was derived from 15 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 Central, Upper and Calder & Ryburn PCN's and decreased for Lower and North PCN's.

## PRACTICE COMMENTS

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

*"Aligning merged s1 systems, plus increased BH demand and vacancies in reception have increased pressure on services. Adopted full BMA safe working guidance across clinical rota for all GPs."*

*"Staff shortages and sickness."*

*"Annual leave and sickness."*

## SYSTEM ACTIONS/COMMENTS ON LAST SITREP

The return rate has decreased this week, with only 5 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		CCP
Workforce retention		System
<b>Patient demand</b> – 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
<b>Workforce</b> – 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
<b>Clinical capacity</b> – Again, vacancies/sickness levels amongst key clinical roles is now above manageable levels. This is now at a level	12.12.22	System

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.			
---	--	--	--

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