

The
problem
with primary
care.....





Disclaimer

The views in this presentation are my own and do not reflect the views of opinions of any of the organisations that I work for or with



About me....



Kansas City 2016



KANSAS VS. WEST VIRGINIA

KANSAS VS. WEST VIRGINIA

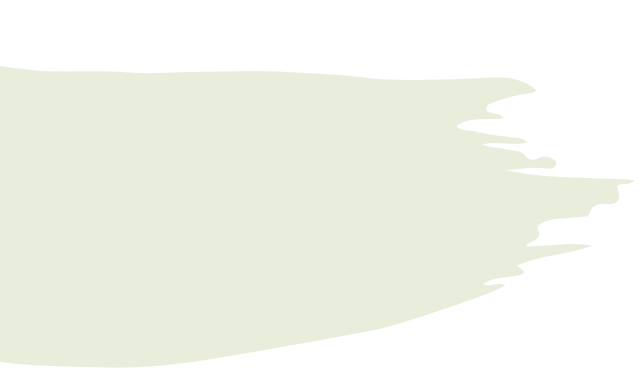
Sprint Center



24 39







Let me sell you a health plan

The Plan

Access to a community healthcare team 08:00 -18:30 M-F

Minor illness

Paediatric Care

Chronic Disease Care

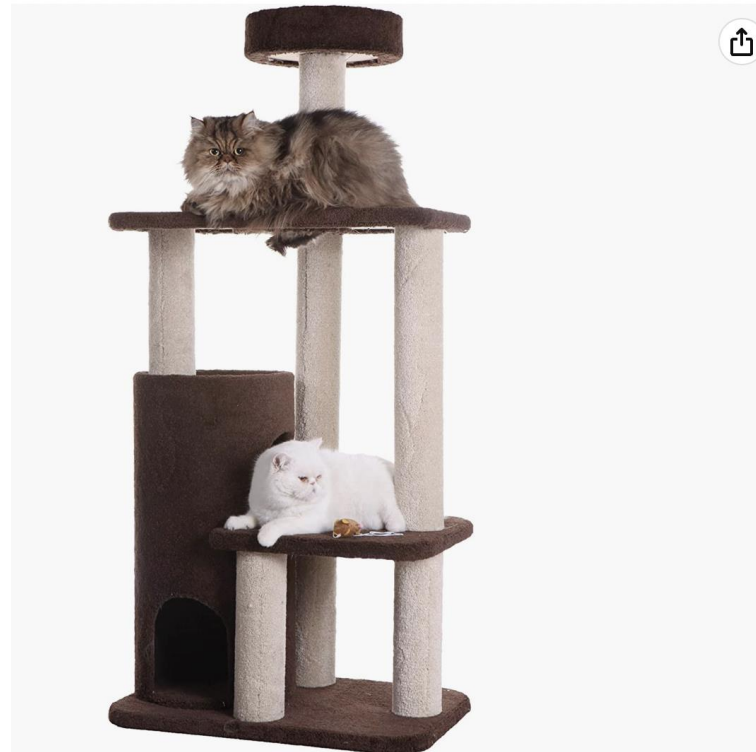
Palliative Care

Mental Health

Other services including : cervical, contraception vaccines and immunisations, childhood vaccines and immunisations, child health surveillance services, maternity medical services, minor surgery.....

How much per year.....

- a) \$200 (£160) ←
- b) \$2000 (£1600)
- c) \$20,000 (£16,000)



Roll over image to zoom in



Armarkat 3-Level Carpeted Cat Tree
Real Wood Condo F5602, Kitten
Playhouse Climber Activity Center,
Brown

[Visit the Armarkat Store](#)

★★★★☆ 10 ratings

\$201⁷⁵

Includes \$18.24 Amazon discount. [Details](#)

\$218.75 Shipping & Import Fees Deposit to United Kingdom [Details](#)

i Sales taxes may apply at checkout

i Use **Amazon Currency Converter** at checkout to pay for this item in your local currency. Terms & Conditions apply. [Learn More](#)

Target Species Cat

Breed Small

Recommendation

Specific Uses for Product Active, Teeth, Behavior, Indoor

Material Engineered Wood, Sisal rope

Age Range All Life Stages



Daily Mail
MONDAY, SEPTEMBER 20, 2021
www.dailymail.co.uk
Daily newspaper of the year 80p

JIMMY GREAVES 1940-2021
Greavsie, legend who tackled his demons... and won
SEE 12-13 PLUS THE VERDICT: CENTRE PAGES

Amid growing toll of cancers and devastating illnesses missed by 'remote' doctors, the Mail today demands...
LET'S GET BACK TO SEEING GPs FACE TO FACE
By Daniel Martin, Shaun Woolf

FREE INSIDE
Escape ESCORTED TOURS AND RAIL
SUPERB TRAVEL PULLOUT

Daily Mail
FRIDAY, MAY 31, 2019
www.dailymail.co.uk
70p

Can you trust any man who brags he's a feminist?
PAGES 24-25

++ Two surgeries closing every week ++ Hundreds of GPs quitting ++ Millions of patients affected
SO THAT'S WHY YOU CAN'T GET A DOCTOR

'It is impossible to get to see my GP'

Licence to thrill: Daniel Craig with Naomie Harris

FREE PREMIER LEAGUE FIXTURES WALLCHART
Daily Mail
How Mr. M...
40% OF GPs QUIT AFTER 5 YEARS

GP recruitment crisis shows no sign of abating



GP staff facing abuse from patients over cancelled blood tests

6 Sep 2021



GP surgeries in England cancel flu jabs amid vaccine shortage

3 Sep 2021

Scottish Daily Mail
ROYAL 'CASH FOR FAVOURS' STORM
So will Charles FINALLY axe closest aide?
RICHARD KAY PAGES 7-9

GPs CAN SEE JUST A THIRD OF



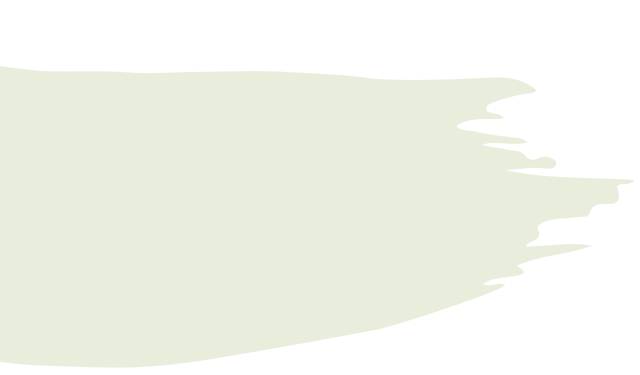
GP staff receive abuse every day over Covid vaccine reminders

14 Jul 2021



Girls Aloud star Sarah Harding dead at 39 from cancer

Crisis GP practice loses five partners while taking on 2,000 patients



How we got here?

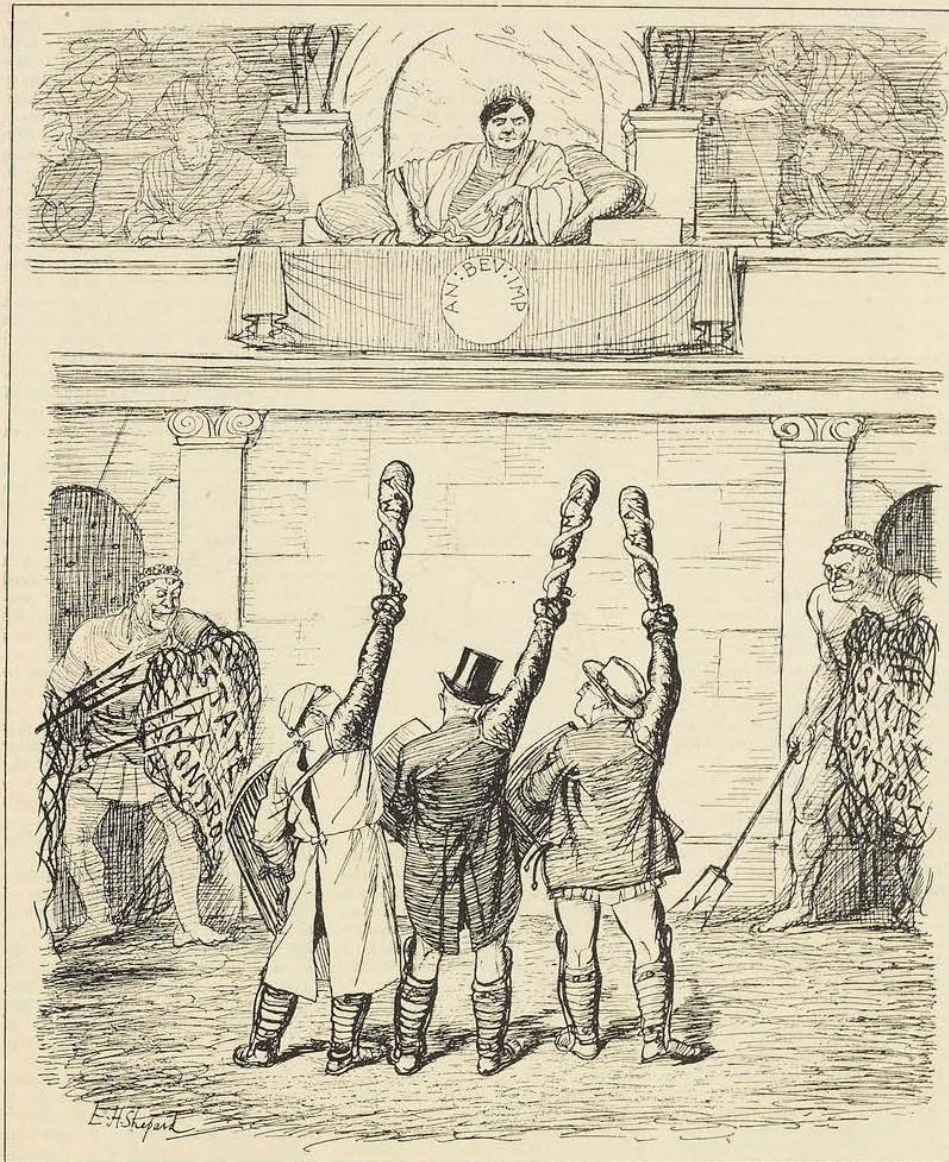
What is happening now?

What can (is)be done about it?

AP

B.M.A. PLEBISCITE CAUSES STIR

MOVIETONE
NEWS



MORITURI TE SALUTANT.



DO THE BOYS HALL

"It still tastes awful."



DEAR DOCTOR CHRISTMAS

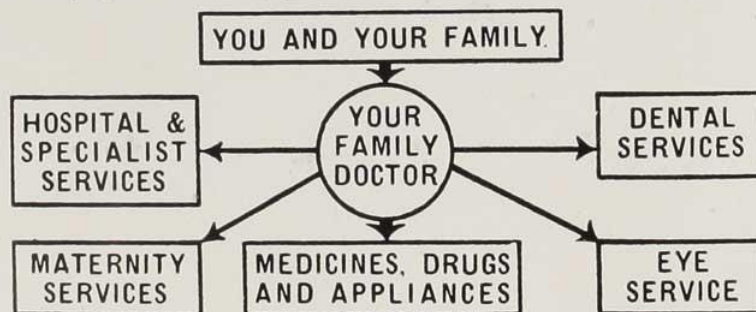
The Universal Provider



YOUR NEW NATIONAL HEALTH SERVICE

On 5th July the new National Health Service starts

Anyone can use it—men, women and children. There are no age limits, and no fees to pay. You can use any part of it, or all of it, as you wish. Your right to use the National Health Service does not depend upon any weekly payments (the National Insurance contributions are mainly for cash benefits such as pensions, unemployment and sick pay).



CHOOSE YOUR DOCTOR NOW

The first thing is to link up with a doctor. When you have done this, your doctor can put you in touch with all other parts of the Scheme as you need them. Your relations with him will be as now, *personal and confidential*. The big difference is that the doctor will not charge you fees. He will be paid, out of public funds to which all contribute as taxpayers.

So choose your doctor now. If one doctor cannot accept you, ask another, or ask to be put in touch with one by the new "Executive Council" which

has been set up in your area (you can get its address from the Post Office).

If you are already on a doctor's list under the old National Health Insurance Scheme, and do not want to change your doctor, you need *do nothing*. Your name will stay on his list under the new Scheme.

But make arrangements for *your family* now. Get an application form E.C.1 for *each* member of the family either from the doctor you choose, or from any Post Office, Executive Council Office, or Public Library; complete them and give them to the doctor.

There is a lot of work still to be done to get the Service ready. If *you* make *your* arrangements in good time, you will be helping both yourself and your doctor.

Issued by the Department of Health for Scotland

A

This advertisement appears in selected Sunday, Morning and Evening newspapers in Scotland.





1952

The roots of the problem....

Workforce

Workload

Estates

Autonomy

Morale



Where are we now?



To: Directors of Commissioning
Regional Heads of Primary Care
Heads of Primary Care
CCG Clinical Leads and Accountable Officers

Strategy and Innovation Directorate
NHS England
Quarry House
Quarry Hill
Leeds
LS2 7UE

31 January 2019

The NHS Long Term Plan set out the case for enhanced primary medical and community care, backed by an extra £4.5bn a year by 2023/24. Strong GP services are essential to this and the new contract will deliver the most fundamental change to primary care in decades. As well as significant increases in practice level funding, the settlement will help firmly establish primary care networks around the country, providing for a new network contract in which £1.799 billion would be invested annually by 2023/24 and directly reimbursing networks for the employment of 20,000 clinical pharmacists, physiotherapists, community paramedics, physician associates and



Primary Care Networks

July 2019



*then COVID-
19*

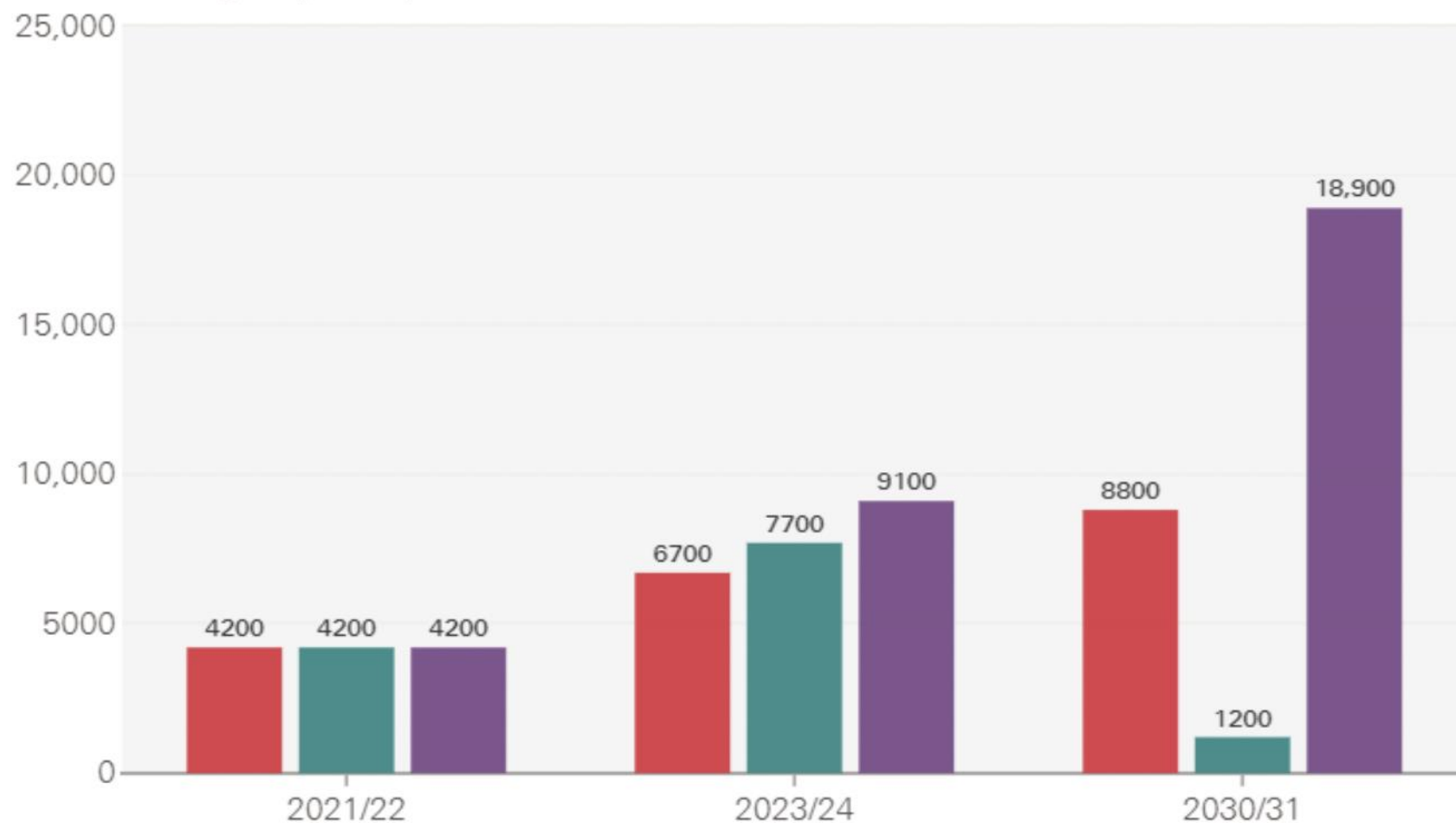




And now....

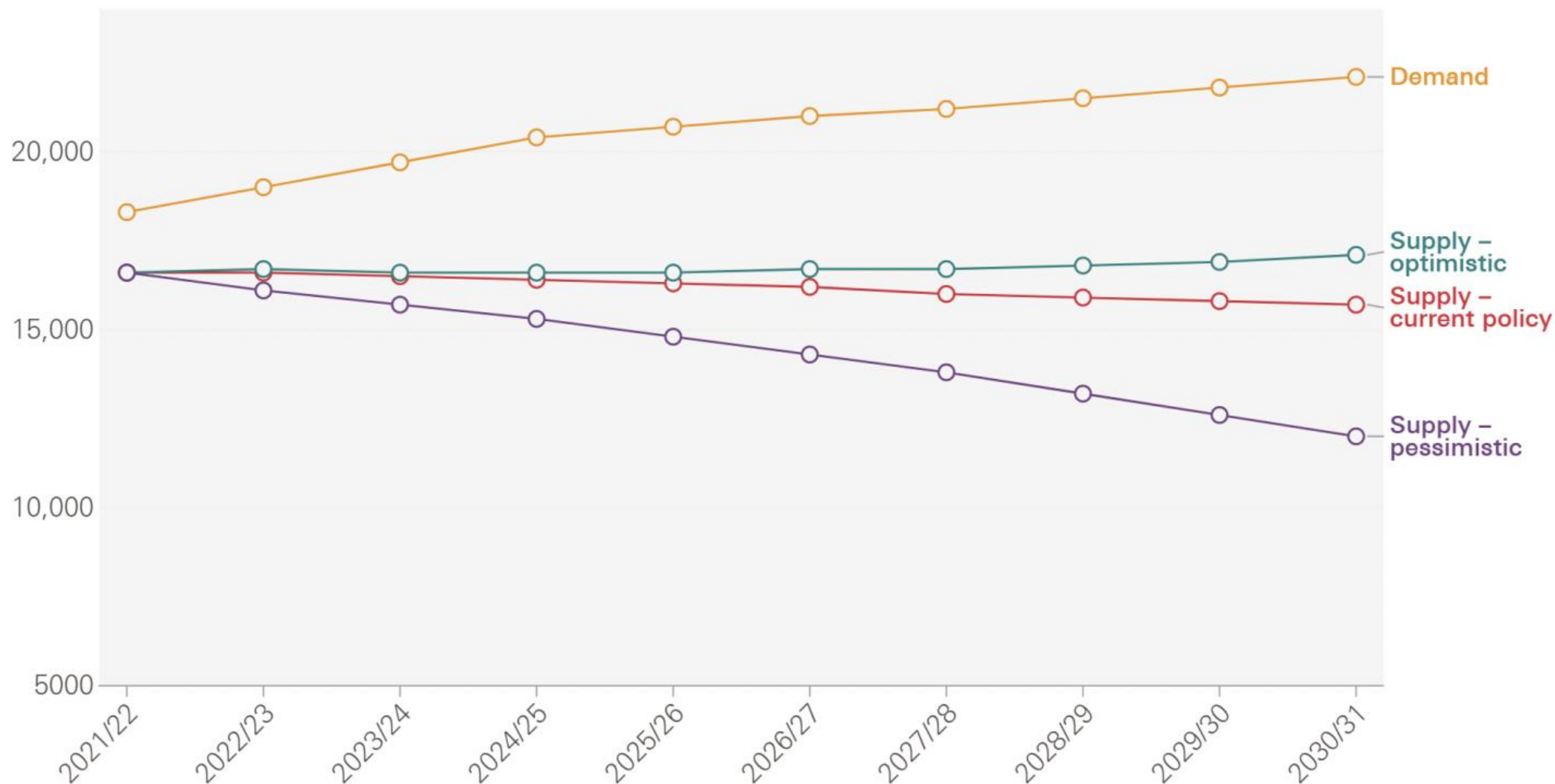
■ Current policy ■ Optimistic ■ Pessimistic

Estimated shortage of qualified permanent FTE GPs*



Source: REAL Centre analysis based on NHS Digital and Health Education England data • Qualified permanent GPs are all GPs excluding GPs in training and locum GPs. Numbers are rounded.

Full-time equivalents



Source: Analysis based on NHS Digital general practice workforce data and the REAL Centre nurse supply model (numbers are rounded) • 2021/22 nurse supply data are for March 2022 (source: NHS Digital)



Leaving direct patient care within 5 years

Over 50s - 60.5% among GPs aged 50 years and over

Under 50s 15.5% said they were considering leaving practice

**Eleventh National GP Worklife Survey
2021**

'most citing an unmanageable and sometimes unsafe workload as the main reason'

Shrinking GP numbers and soaring workloads puts future of general practice under threat, top NHS doctor warns

Professor Martin Marshall said primary care is now experiencing the “most worrying crisis in decades” with continuity of care becoming increasingly difficult to deliver

GP expansion hamstrung by outdated premises, warn primary care leaders

By Nick Bostock on the 8 November 2022

Outdated premises are ramping up pressure on general practice, with patients facing growing waits and risk to their health as practices struggle to expand or accommodate new staff to meet rising demand, a report warns.



Outdated GP surgeries risk derailing Government ambitions to improve access to primary care

Patients risk being put in danger and waits to see GPs are spiralling because primary care buildings and infrastructure are not fit for purpose.

7 November 2022

BMA to vote on organising GP withdrawal from PCNs by 2023





Understanding doctors' decisions to migrate from the UK

Prepared for the GMC by Jane Powell, Misha Gorsia, Matthew Wood, Rebecca Berry, Aparna Behar & Isadora Rackham - Shift Insight Limited

‘Burnt-out GPs: while many doctors in our study mentioned experiencing burnout, there were some specific issues in primary care driving GPs to migrate.’

So the current issues are pretty much...

Workforce

Workload

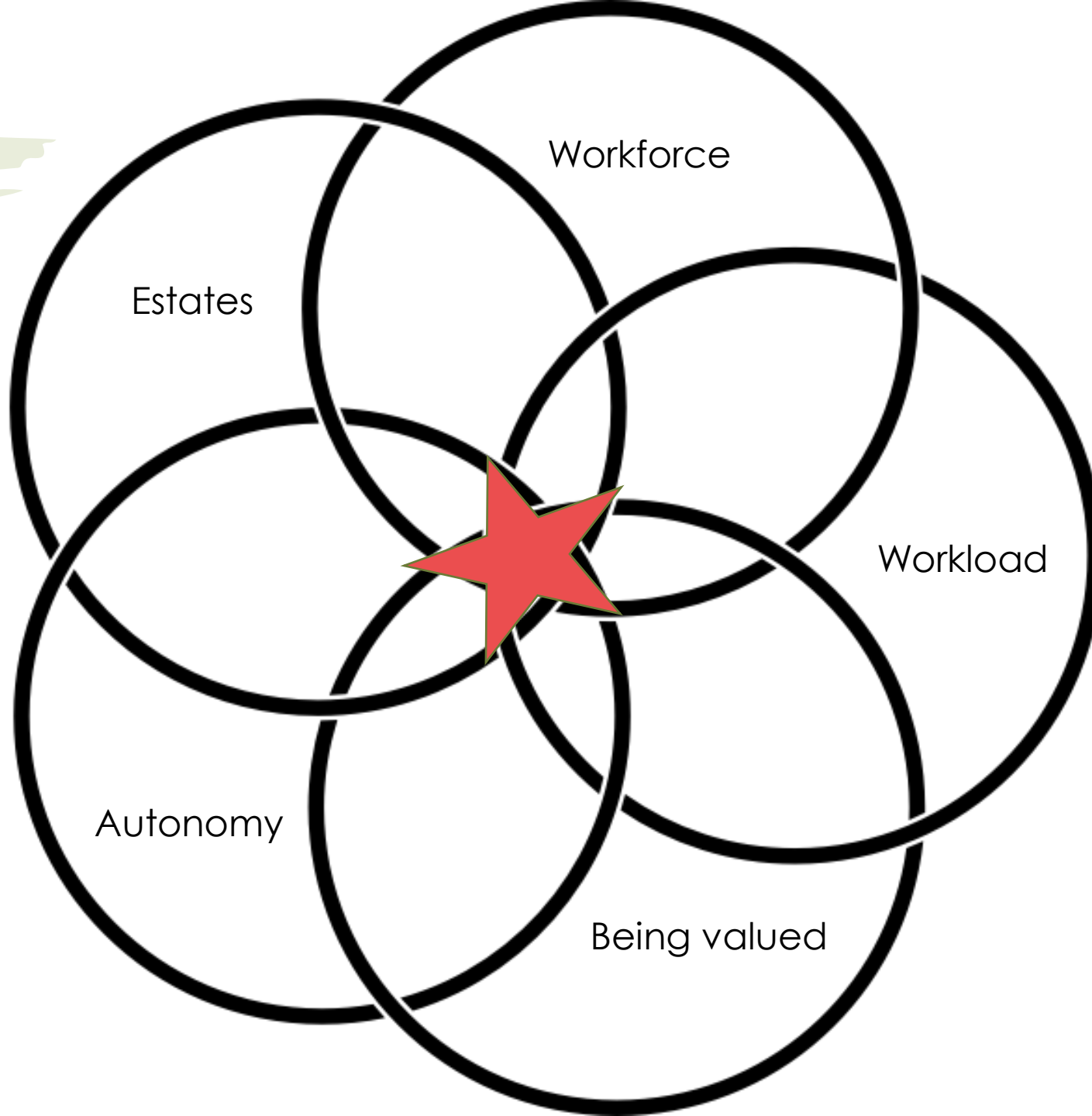
Estates

Autonomy

Morale



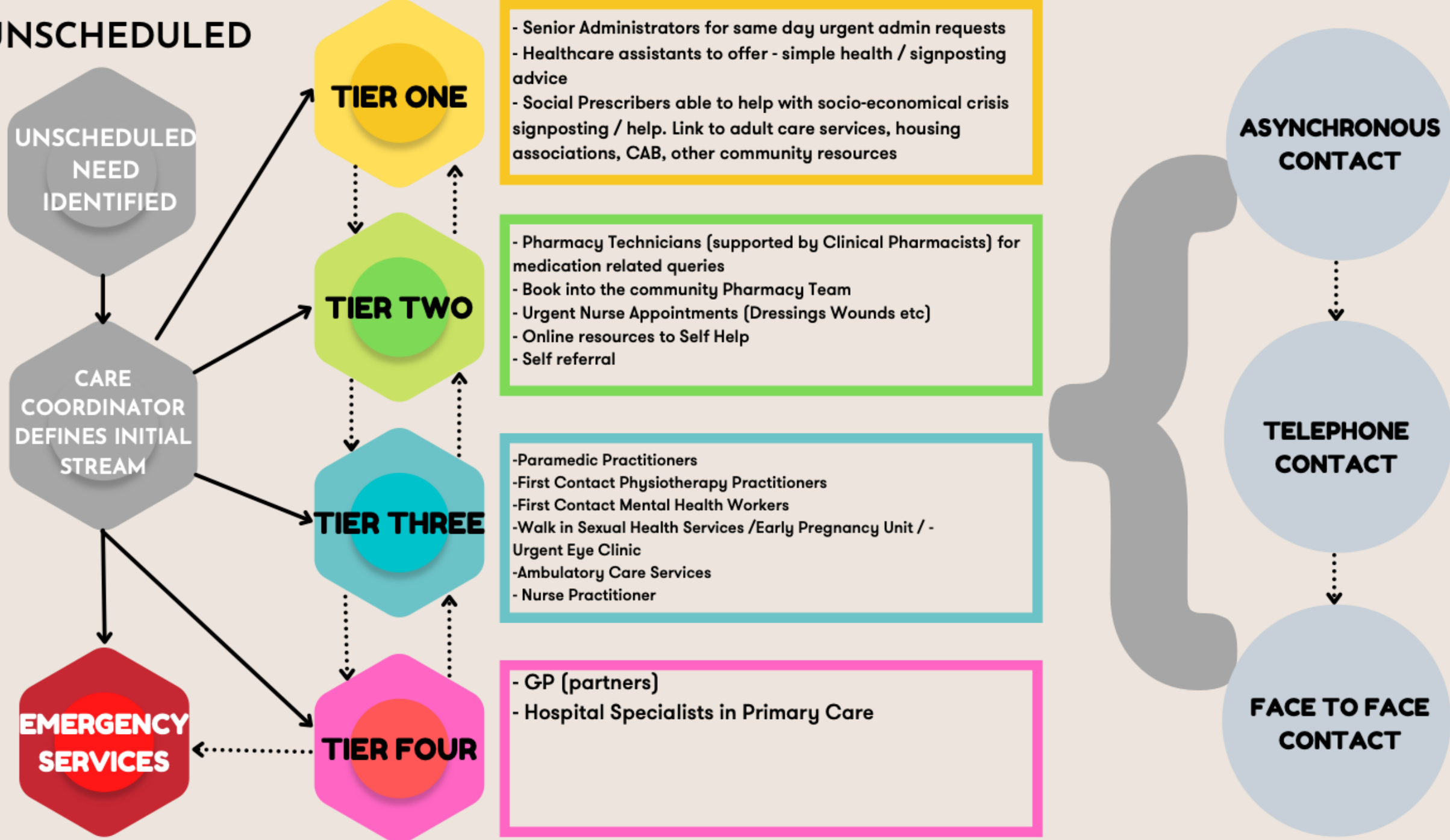
What can (is)be done about it?



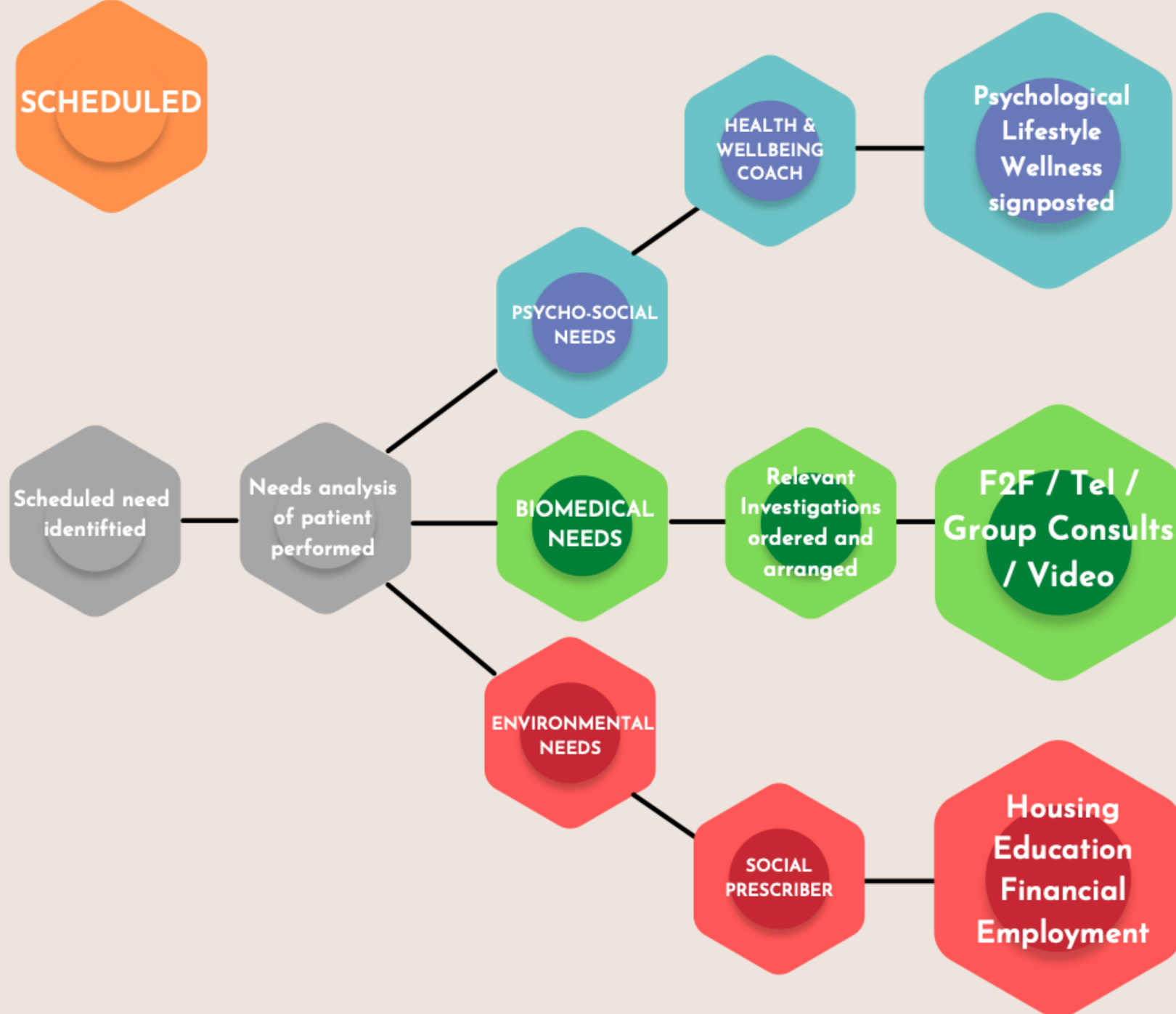
Workforce

- ARRS Roles
- Sharing the workforce
- Creating a community of 'integrated neighbourhood teams'

UNSCHEDULED



SCHEDULED



IAPT
Weight loss groups
Smoking Cessation Support
Professional Patient Groups
Other relevant community resources

As much information gathered before
Aim to use the appropriate member of
practice / PCN Team

Employment difficulties / Long term
sickness
Any educational / housing issues
addressed
Any financial issues addressed.
(Social Prescriber / CAB / Social / Council)

Workload

- Care coordinators
- Digital Access (not just push email)
- Empowering staff and patients
- Digital Solutions
- Patient Education

Estates

- Stop thinking about the GP practice....think about the neighbourhood teams (beyond health)
- Recognise there is a limited budget
- Think about the staff as well as the patients
- Think digital
- Clinical strategy then the design



Autonomy



Morale



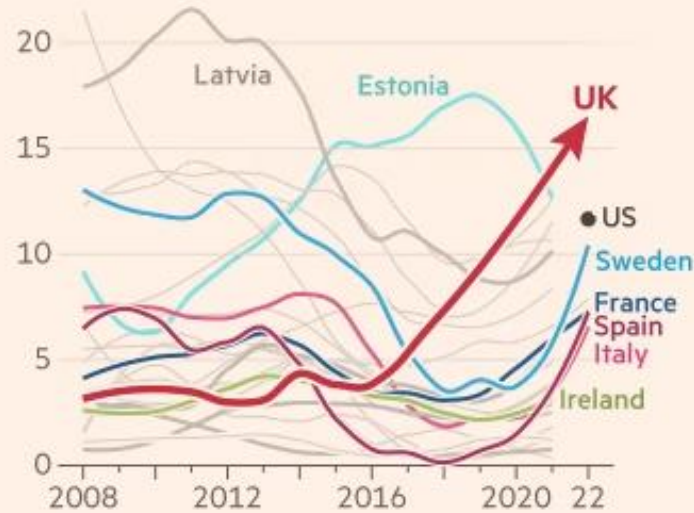


Its going to be tricky

And the price of failure is high...

Britons have the worst access to healthcare in Europe, due in large part to long waiting lists

% of adults whose healthcare needs* went unmet in the past year



% of adults who were unable to access needed healthcare due to a waiting list



*At least one occasion when the respondent "really needed medical examination or treatment (excluding dental)" but was unable to get it
Sources: FT analysis of EU statistics on income and living conditions database; YouGov. Trends have been smoothed for ease of reading
FT graphic: John Burn-Murdoch / @jburnmurdoch
© FT



*but the rewards
are so high if we
get it right....*