



Churchmere Medical Group

Patient Newsletter

Firstly, thank you to all our patients that provide feedback about our service in a variety of ways.

The aim of this newsletter is to respond to feedback from our patients.

We receive comments directly from patients and via our patient participation group. Recently we have had the results of a survey from Ellesmere Town Council, plus the ongoing Friends and Family Test feedback.

OVERVIEW OF GENERAL PRACTICE AS WE APPROACH 2024

The role of a GP continues to change, driven by Government / new treatments / reduced funding per patients in real terms / ageing population / patients with ever more complex problems / demand for increased efficiency and value for money.

Covid forced the health service to change and adapt to using technology. Some of these changes such as e-consult, responses via text or email have persisted.

The other big change has been to direct urgent care to minor injury units and emergency departments. Care of long term conditions has been shifted into GP practices.

To manage this workload we have been told by NHS England to use other health professionals much more by signposting patients to Pharmacists / Mental Health Nurses / 111 / Nurse Practitioners etc.

In this practice this means that our staff on the phones or on the front desk have to ask more about the condition you need help with in order to get you to the most appropriate clinician, and an appropriate appointment in terms of time and urgency.

WORKLOAD PRESSURES

All public services have seen unprecedented demand following Covid and we are not alone in having to manage illness-related absence in our workforce.

The effect of backlogs in hospital care, long waiting times in Emergency Departments and ambulance response times etc. have all meant that practices are endeavouring to manage complex long term conditions with inadequate support from Secondary Care.

Despite this the emphasis from government is on delivering “access” with a target of 85% of patients being seen within 2 weeks. Unfortunately, it is not possible to have access AND continuity of care.

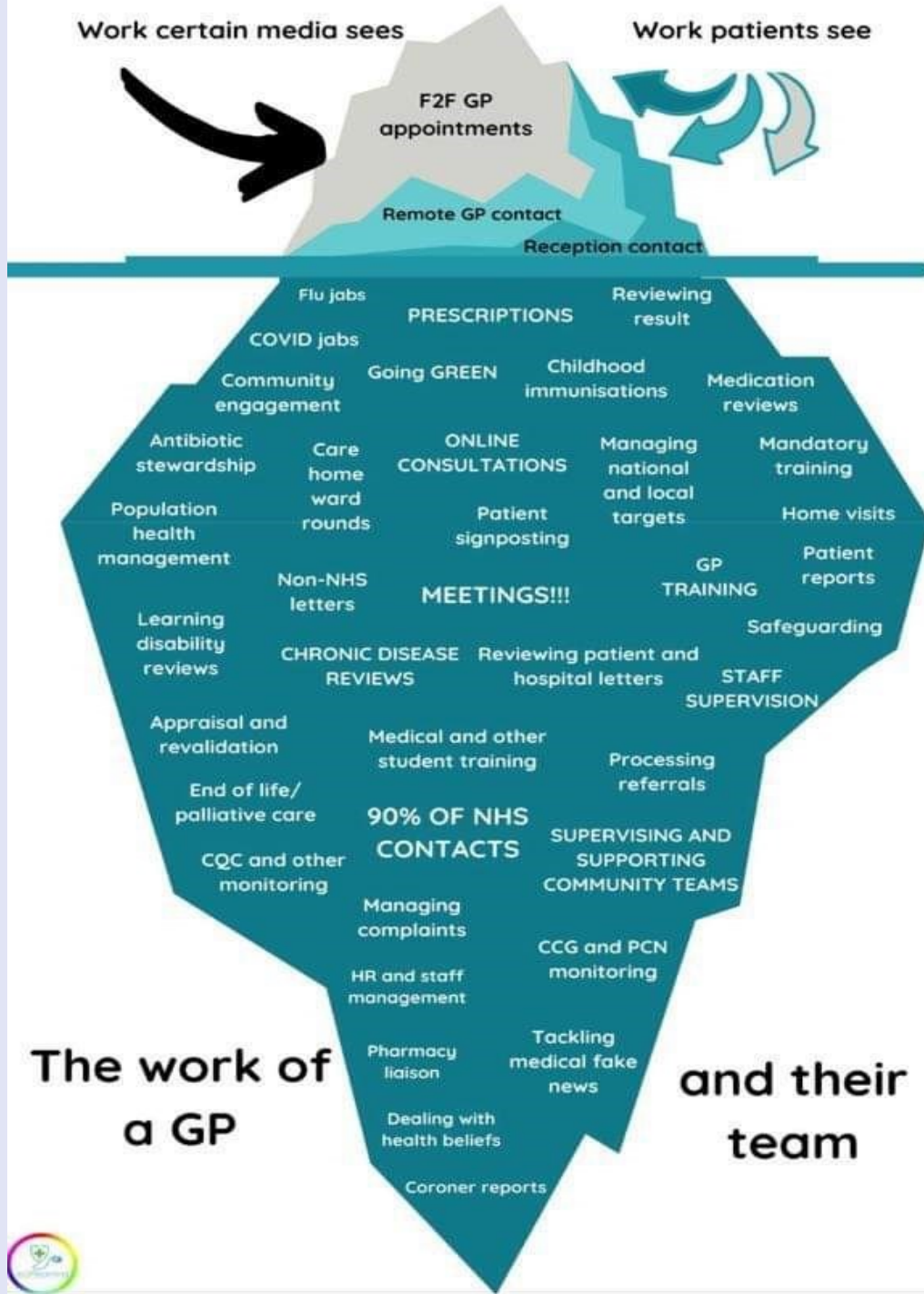
A recent parliamentary report said that “seeing a GP should not be like hailing an Uber”. We agree - most doctors and nurses in General Practice went into the profession to develop ongoing therapeutic relationships with “their” patients. We just cannot do everything.

The infographic of an iceberg illustrates all the behind the scenes work that is done.

General Practice

Work certain media sees

Work patients see



The work of
a GP

and their
team



PATIENT FEEDBACK

We constantly receive patient feedback in a variety of ways and recently Ellesmere Town Council carried out a health survey, the results of which they have shared with us. We wanted to respond to some of the regular questions and feedback we receive, to show that we are listening to your feedback and doing the very best we can.

Telephone system is not fit for purpose / long wait for calls to be answered

We agree. All practices in the West Midlands were moved to a single contract which wasn't adequate. We have at our own expense, moved to a better telephone system but that still relies on a limited number of people responding to an unlimited number of calls. At times our staffing levels are significantly affected by Covid and other illnesses.

The callback function makes the system more user friendly and patient feedback has been very positive about this new feature.

Over the last two months our team have on average taken over 1600 calls a week, with an average waiting time of 6 minutes and 22 seconds. Remember - with the availability of the call back service there is no need to wait on the line for your call to be answered.

Long wait to see a GP / lack of continuity / cannot see own doctor

The overview explains some of the reasons we have had to change and use other professionals.

It has also been difficult to recruit GP's in the current health care environment but we do have another GP starting in 2024.

Our GP's are having to oversee care provided by other clinicians so that even if we are not seeing all the patients we are available to advise on management of treatment options etc.

Need more face-to-face appointments / waiting room usually empty

Again see the overview and iceberg diagram.

We have increased the number of face to face appointments available and offer patients the choice of booking a face to face or telephone appointment. We would like to see more people face to face, that is what we were trained to do. However, if we do more of one thing we would have to do less of something in the iceberg. More and more we have this coordinating, advising and supervising role.

Uncaring and unhelpful reception team

Our team of hard-working receptionists, or patient services advisors as we call them, are trained professionals who want to appoint you with the right person and service for your needs. The team receive regular training and will continue to work very hard to reassure and help patients.

They are committed to confidentiality and have to ask you questions about your symptoms and health to ensure we offer you the most appropriate appointment. Please remember they can only offer appointments available to them, they may not always have an appointment that fits with your required date/time or preferred healthcare professional.

Please treat our team with respect and understanding. An important cause of loss of staff is the abuse they face on a daily basis.

eConsult should be available out of hours

In order for our team to have enough time to triage every eConsult received, we turn off the eConsult service each night and at weekends to ensure clinical safety.

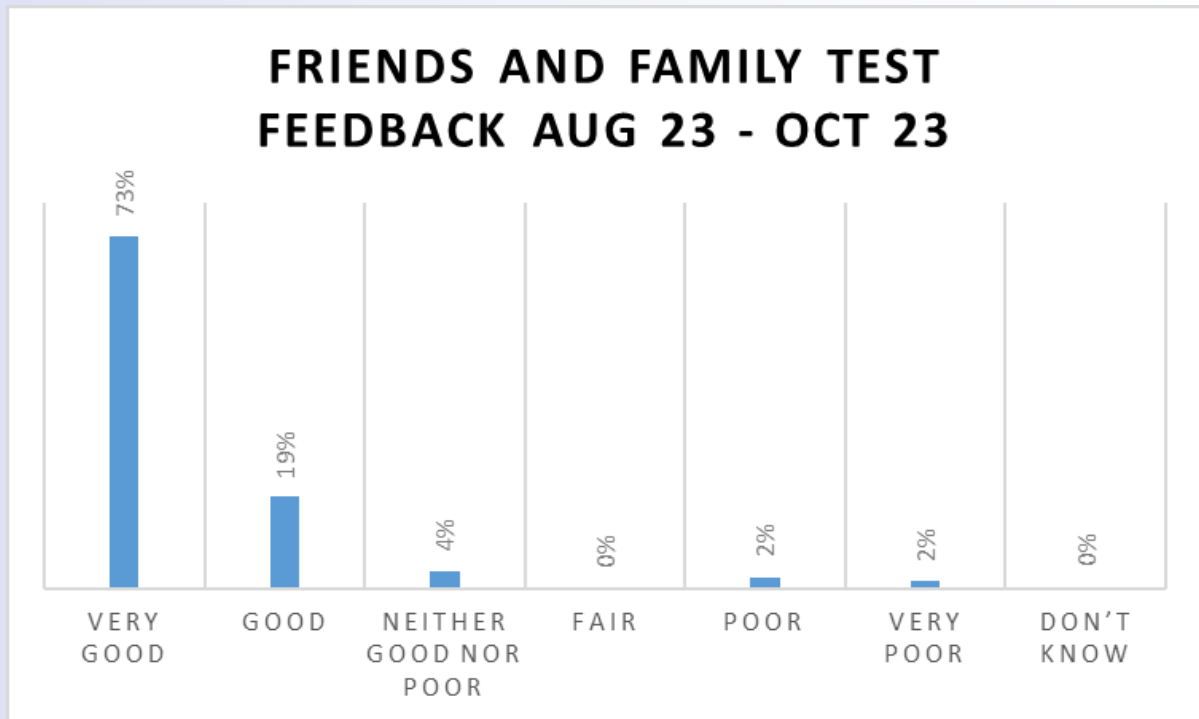
We are not commissioned to provide a 24-hour service and therefore when the practice is closed the eConsult service will be turned off and you will be directed to other appropriate services.

We respond to eConsults based on clinical priority, with the vast majority of clinical eConsults receiving a response the same day or next day. We respond in a variety of ways, including by telephone as well as text message replies. If it is clear from your eConsult that an examination is required, our team will call you to arrange a face-to-face appointment.

Again, this is a new workstream and in order to do more of one thing we have to do less of something else.

FRIENDS AND FAMILY TEST

Over the last three months 1377 patients have fed back to the practice via our Friends and Family Test survey, with 92% rating the practice as good or very good.



Our patients can provide feedback via the friends and family test following the link they are sent after their appointment or alternatively completing a paper form in the practice waiting room.

We are trying to juggle all the competing demands on our practice in a very difficult time for the NHS as a whole. Please be assured we are all working as hard as we can. General Practice continually evolves and we want to respond to our patients and keep you informed about that evolution.

Thank you for your continued support.