

Digital-first primary care and its implication for general practice payments

Healthwatch Birmingham welcomes the opportunity to respond to NHS England's consultation on 'digital-first primary care and its implications for general practice payments'. Healthwatch Birmingham's key role is to make sure that patients, the public, service users, and carers (PPSuC) are at the heart of service improvement in health and social care. In line with our role, we have focused our comments on:

- whether the proposals will improve the quality of care and lead to services that are responsive to the needs of patients and service users; and
- Whether proposed changes may address or lead to health inequality

We welcome that NHS England is reviewing how it commissions, contracts and pay for care in light of digital innovations in primary care. We believe that this is important, especially for Birmingham whose population is so diverse and any changes would have considerable impact. Forty-percent of Birmingham's population is under 30 years of age representing more than 500,000 people. Almost 250,000 of Birmingham's residents are under the age of 15 and 145, 721 of its resident are aged 65 and over. Birmingham city is also one of the most ethnically and culturally diverse city in the United Kingdom. Forty-two percent of its residents come from ethnic groups other than white; the 2011 census recorded that Birmingham residents had over 91 different languages as their first or preferred language. According to the 2010 indices of multiple deprivation 56% of Birmingham's population fall into the most deprived quintile.

Developing services that meet the diversity and local needs of people is going to be a challenge. The impact of proposed changes on different groups will be varied and has the potential to lead to health inequality. Considering the deprivation of Birmingham, some people might not have access to a smart phone and even if they did, might not have the financial resources to make a video call. At Healthwatch Birmingham, we have had cases where people ask us to call them back, in order for us to get their feedback, because they have no credit or they are not using their own phone. We have heard from service users from different ethnicities and those with a disability about the difficulties of getting a translator when they want to access health and social care services.

Over 2017 and 2018 period, Healthwatch Birmingham has heard from the public and service users about their experiences of accessing GP services. The main issues across the experiences received relate to difficulties with getting appointments. In 2017, Healthwatch Birmingham gathered the experiences¹ of 66 patients on the problems in getting emergency appointments. We found that some of the barriers to offering emergency appointments in

¹ For the report see: **Can patients with a clinical need access emergency General Practice appointments in Birmingham?** <u>https://djmoc0hjs7vsb.cloudfront.net/2016/01/13094639/HWB-GP-Report-2017-F-Online.pdf</u>





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General Practice in Birmingham was high demand and low capacity; inappropriate requests for appointments; and the way in which practices organise requests for appointments (for instance, times that emergency appointments are released). In addition, our findings indicate that there is unfairness in the system for getting an emergency GP appointment across Birmingham, with a wide variation in the management of requests for such appointments.

Below are some of the experiences:

- A caller's mother had unsuccessfully tried for three days to make a GP appointment. She had a stroke one week later, and passed away within a month. The family felt if earlier access to an appointment had been available, she might have avoided the stroke.
- "Cannot get an appointment to see a doctor in the morning. Told to go to Erdington walk-in clinic."
- Another person, with stomach pain, telephoned to book an emergency GP appointment. After two days of trying, unsuccessfully, he went to the surgery and obtained an appointment.
- "It's hard to get a same day appointment when you need it ..."
- It's no better if you go and queue in person before the surgery opens, often they run out of appointments to give people at the back of the queue, and just tell you to come back another day to try again.
- They constantly tell me to call back 3 /4 times and there is never an appointment slot available.
- Given how hard it is to make an appointment, you'd think the Drs would friendlier, but their approaches massively vary. Some seem to go out of their way to help, whilst others could not be less helpful. Having fought to even get an appointment, it's frustrating to not receive good treatment.
- Once you get an appointment and attend, the practice is very quiet, which clearly shows they are not able to offer enough appointments to meet demand.

Other service users expressed concern with alternative methods for accessing GP services, in particular online and telephone access. Below are some of the comments from service users:

- Never get an appointment. Receptionist are rude with attitude along with doctors who don't care. Everything online, I am finding it complicated, how you are supposed to get an OAP to logon.... With no computer or Internet?
- It's incredibly difficult to get through on the phone to request an appointment. The phone line goes from being closed to a statement about the queue being full, goodbye, and it automatically hangs up on you, in seconds at opening time. You end up dialing multiple times to even get in the queue to be on hold to speak to a receptionist, which is very frustrating. They clearly need a phone system that offers much more capacity for callers. I've also experienced the system automatically hanging up on me if I've been in the queue for more than 15 minutes without speaking to someone!
- The online appointment system used to work well, but they are switching systems so it's been down for weeks, making the only option to get an appointment fighting to get in the queue on the phone!







- They used to offer telephone consultations with a Dr, so if you couldn't get an appointment you'd been assessed on the phone, but the receptionists don't offer you this option anymore. I rang recently to ask for a telephone appointment and was told to ring 111 or go to a walk in centre. Very unhelpful and offered no continuity of care.
- Helpful They offer the option to speak to GP on the phone, which is great if no appointments available.
- Hard to book phone appointments on-line.
- This practice used to operate a drop in system for appointments, which I miss greatly.

Based on the feedback we have received as outlined above, there are benefits to digital services in primary care. However, these might be more appropriate for some individuals more than others. This is not to say that all people within a certain age group or having a disability would be averse to accessing GP services digitally. If the NHS is to ensure that it meets one of its core founding principles '*that NHS services meet the needs of everyone*', then these needs have to be understood. These needs should underpin decisions around how GP payments are amended. Thus the introduction of digital-first should really be aimed at offering service users varied modes of accessing GP consultation rather than to replace some other modes (i.e. face to face) that other individuals might prefer.

Yours Sincerely,

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