

Questions from the public – ICB Board Meeting in Public, 16 May 2024

Question from Paula Riseborough, Protect Our NHS BaNES

How is BSW ICS responding to NHS England's proposals for 'Same Day Access Hubs' (SDAH) for primary care (based on the Fuller report)?

To date, there is little evidence for the efficacy of these hubs or for the impact on patient safety of having more (ARRS-funded) non-medical staff in such hubs (including Physician Associates), with relatively fewer GPs and practice nurses.

Will the ICB therefore seek further evaluation of this primary care model in terms of quality of care, equity of access to a GP, continuity of care and patient safety before adopting NHSE's proposals?

Response:

Thank you for your question.

The Fuller stocktake report was produced by Professor Claire Fuller in May 2022 and sets out a vision for the future of primary care. One of the key objectives highlighted in the report is to improve access to primary care services, setting out that primary care should be supported to:

- Offer streamlined access to urgent, same-day care and advice from an expanded multi-disciplinary team
- Have the flexibility to adapt services to local needs and build an access model for local communities to give patients with different requirements access to the services that are right for them
- Create resilience around GP practices by connecting patients to the practitioner who meets their needs, rather than increasing GP referrals to additional services. This will increase practices' capacity to deliver continuity of care.

BSW ICB has been working with our colleagues in primary care over the past two years to work towards this vision.

While there are a small number of Same Day Access Hubs in BSW, wider implementation of this model is limited due to several factors. Among these are geographical constraints, particularly in rural areas where the SDAH model is not feasible. Additional challenges arise from the availability of suitable premises to accommodate larger teams of staff, varying patient needs and demographics and

operational models that may result in Primary Care Networks (PCNs) functioning as distinct entities rather than integrated units.

As a result, our strategy for improving access to primary care has been based on a number of other initiatives such as extended hours, including evenings and Saturdays, which make it easier for patients to get the help they need.

PCNs in BSW have also been improving access by recruiting 540 direct patient care roles, including clinical pharmacists, paramedics and first-contact physiotherapists. These professionals perform a crucial role in our PCNs, providing a wide range of comprehensive care and allow GPs to focus on those patients who most urgently require their care.

We believe this strategy is delivering improvements, with GP Practices across BSW offering around 500,000 appointments per month. In February 2024, 43 per cent of these were with a GP, 57 per cent with another primary care practitioner and 66 per cent were face-to-face.

We will, of course, continue to work with our colleagues in primary care to evaluate, refine and develop operating models to ensure we continue to provide the excellent health and care services people living in BSW deserve.