

**Equitable Access to Primary Medical Care Services**  
**Herefordshire PCT Proposed Model**

by HPCT EAPMCS Programme Board 04.06.08

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## 1. Introduction

As part of the NHS Next Stage Review being led by Lord Darzi, each Primary Care Trust in England is tasked with developing a GP led Health Centre, which will be open from 8am until 8pm seven, days a week, which can provide booked appointments and walk-in services to registered and non-registered patients.

There has been mounting concern locally, regionally and nationally about the affordability of these centres and their suitability for rural areas.

Herefordshire has seen a number of innovative developments in unscheduled care, most notably the co-location of the GP Out Of Hours (OOH) Service next to the Accident and Emergency (A&E) Department at the County Hospital. This development has seen an increasing number of patients referred from the A&E Department to the OOH Service. It could be argued that these patients are essentially accessing a current 'walk-in' GP led service. However it should be noted that this arrangement currently only operates from 6pm until 8am.

The recent pilot of having a GP on site in A&E showed that approximately 60% of patients attending A&E during the day could be treated appropriately within a Primary Care service. In addition we know that the peak flow of patients attending A&E is between 8am and 7pm. This would suggest that any further development of a GP led walk in service should be closely aligned with A&E and could serve to alleviate the pressure on A&E, reduce patient waiting times and provide a more appropriate level of service for a significant number of patients.

This Local Needs Assessment has been undertaken as a result of those concerns. Existing information about the Herefordshire population, commuting and transport flows, patient survey results, GP list sizes and attendance at A&E has been scrutinised.

## 2. Local Context

To ensure value for money (VFM) and that any development of services undertaken as part of the EAPC Programme meets local need it is important to review a broad range of information about the Herefordshire population and existing Primary Care Services.

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Plans are underway to develop a joint A&E and OOH triage system within the A&E Department.

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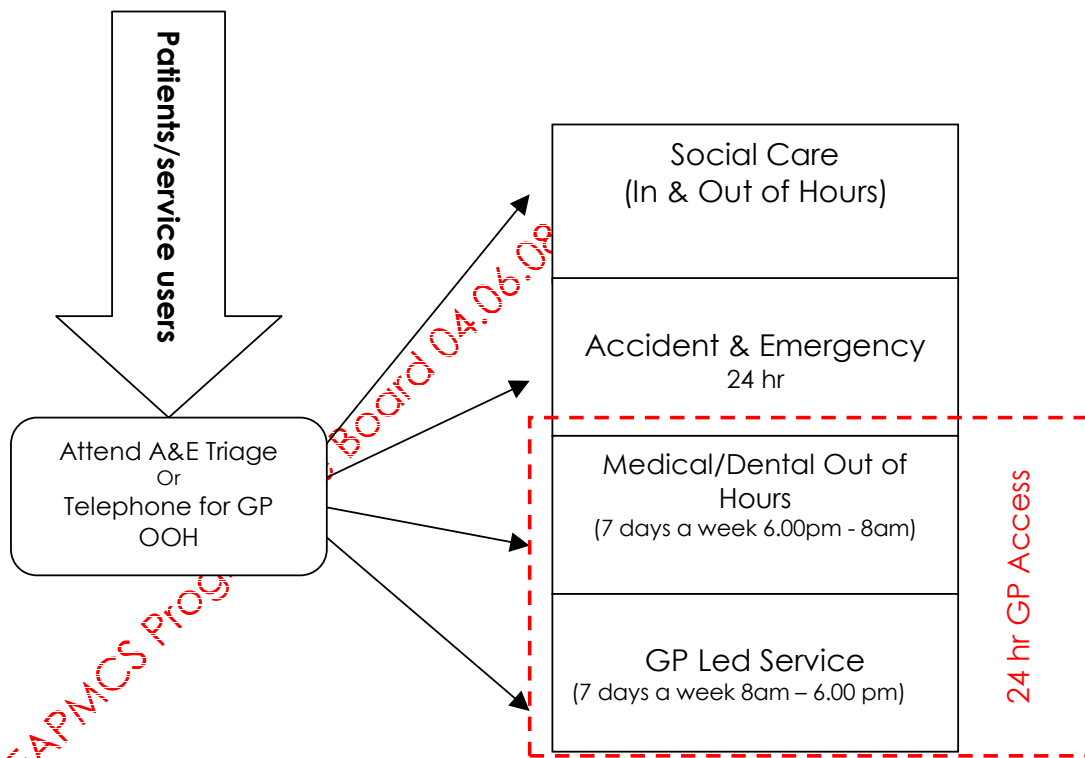
### 3. Key Findings

The key findings are as follows:

- Herefordshire County is currently well provided with GP's and GP services
- 87% of local people are happy with existing GP opening times, of those who aren't the main issues are access to evening and Saturday appointments which could be addressed by the requirement for 50% of current GP surgeries to offer additional opening times by the end of 2008.
- Access to GP's is very good in Herefordshire. The 2007 patient survey about GP access showed that 92% of patients could make an appointment with a GP within 48 hours (86% nationally) and 80% of patients could book an appointment with a GP two or more days in advance (75% nationally)
- Population growth forecasts for Herefordshire show an increase of 980 people across Herefordshire between 2008 and 2011. Current lists sizes (between 1,600 and 1,700) show that the existing GP base should be able to accommodate this increase.
- Any new development should be based in Hereford City as a result of the demographics of the county, commuter travel flows and existing service delivery models.
- There is a substantial number of people who commute into Hereford City each day (22,400 including Hollington). These are potential customers of a 'walk in' Primary Care facility. Therefore, there is a potential for an innovative service, that would increase access to this sector of the population.
- A Hereford City based service would have the potential to alleviate some of the inappropriate attendances at A&E and provide more appropriate services to some patients.

The re-tendering of the Out Of Hours service which will take place during the same time as the proposed new service development offers an opportunity for an innovative local solution.

#### 4. Conclusion - Proposed Model



The model would rely on a single procurement for Out of Hours services and a GP led seven days a week service provision. The provider would need to work closely with the A&E Department at Hereford Hospitals NHS Trust to ensure inappropriate attendances were diverted quickly and easily to the GP led service.

The GP led service would need to be integrated into the current OOH provision to ensure no duplication of cover at evenings and weekends, whilst still providing face to face contact at Leominster and Ross on Wye Community Hospitals and Kington Court at designated times during the weekends.

A single triage system is already being developed at the A&E department 'out of hours' and could be extended to cover 'in hours'. There will need to be a physical presence at A&E to ensure that patients in need of A&E service are seen quickly. We would also like to build upon the current telephone contact arrangements for GP OOH and develop the service to include Social Care. This would give members of the public a single point of contact for Health and Social Care and ensure best use of services, whilst improving the experience of those accessing services. The provider would be expected to ensure

that the appropriate links are made between the triage system at A&E and the telephone service.

Dental arrangements will need to be reviewed and the telephone contact service will need to cover the appropriate periods for OOH dentistry.

Patients will be able to register with the new service, however would only anticipate a small number doing so, as those within the new service boundary are already able to register easily at a range of high quality practices and will be able to use the new service outside of the times when their registered practice is open.

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