

The logo for 'ONE BROMLEY' features a circular icon on the left composed of three stylized human figures in shades of blue and green. To the right of the icon, the word 'ONE' is written in a bold, blue, sans-serif font, and 'BROMLEY' is written in a larger, bold, teal, sans-serif font.

WORKING TOGETHER TO IMPROVE HEALTH AND CARE IN BROMLEY

## GP Access in Bromley

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**July 2021**

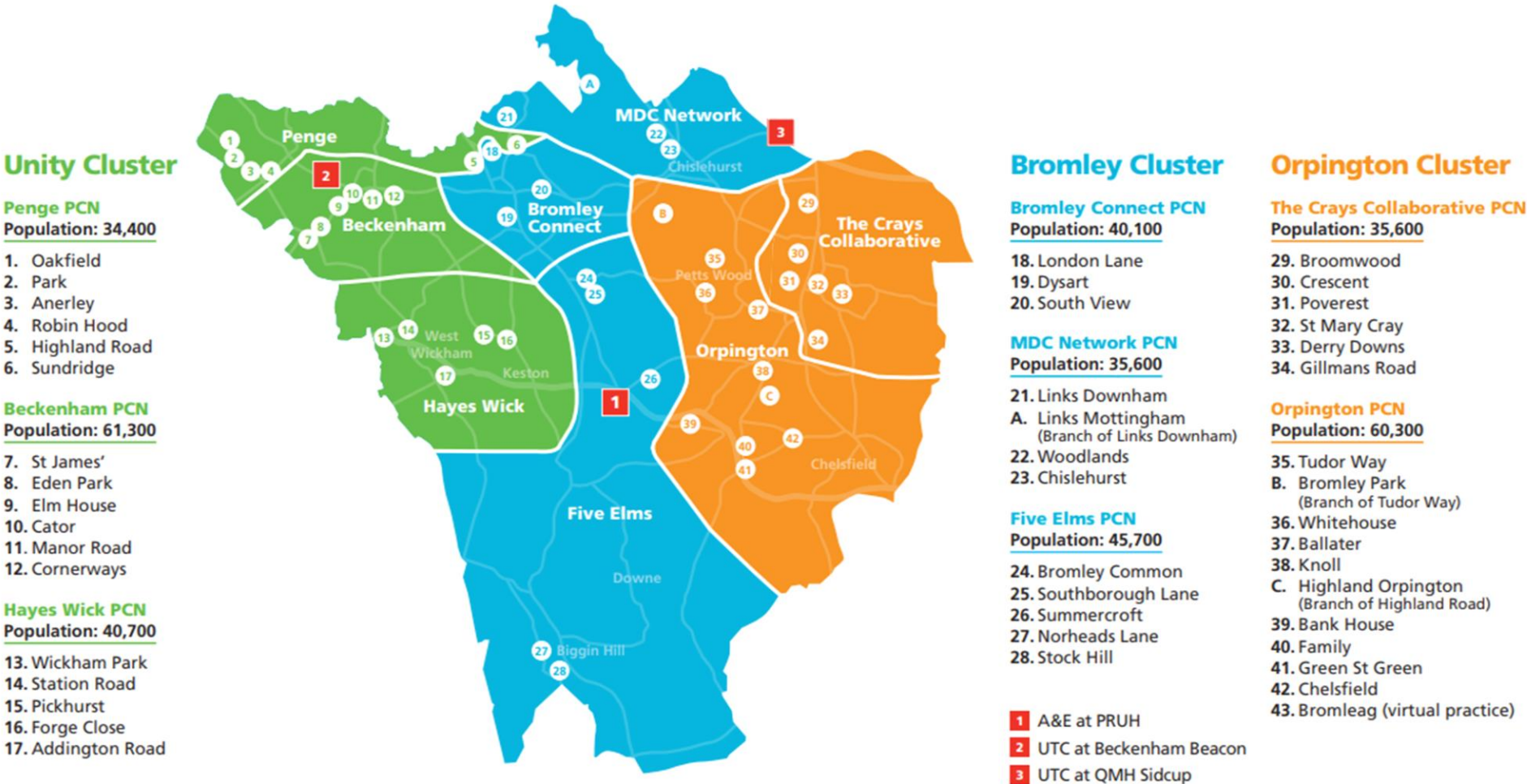
# Overview

- GP access before and since the pandemic
- GP access data
- Total triage and online consultations
- Patient engagement
- Learnings and improving access in General Practice

# Bromley primary care: 43 GP practices, 8 PCNs

## Bromley Primary Care Networks

Population: 353,700



### Unity Cluster

**Penge PCN**  
Population: 34,400

1. Oakfield
2. Park
3. Anerley
4. Robin Hood
5. Highland Road
6. Sundridge

**Beckenham PCN**  
Population: 61,300

7. St James'
8. Eden Park
9. Elm House
10. Cator
11. Manor Road
12. Cornerways

**Hayes Wick PCN**  
Population: 40,700

13. Wickham Park
14. Station Road
15. Pickhurst
16. Forge Close
17. Addington Road

### Bromley Cluster

**Bromley Connect PCN**  
Population: 40,100

18. London Lane
19. Dysart
20. South View

**MDC Network PCN**  
Population: 35,600

21. Links Downham
- A. Links Mottingham  
(Branch of Links Downham)
22. Woodlands
23. Chislehurst

**Five Elms PCN**  
Population: 45,700

24. Bromley Common
25. Southborough Lane
26. Summercroft
27. Norheads Lane
28. Stock Hill

- 1** A&E at PRUH
- 2** UTC at Beckenham Beacon
- 3** UTC at QMH Sidcup

### Orpington Cluster

**The Crays Collaborative PCN**  
Population: 35,600

29. Broomwood
30. Crescent
31. Poverest
32. St Mary Cray
33. Derry Downs
34. Gillmans Road

**Orpington PCN**  
Population: 60,300

35. Tudor Way
- B. Bromley Park  
(Branch of Tudor Way)
36. Whitehouse
37. Ballater
38. Knoll
- C. Highland Orpington  
(Branch of Highland Road)
39. Bank House
40. Family
41. Green St Green
42. Chelsfield
43. Bromleag (virtual practice)

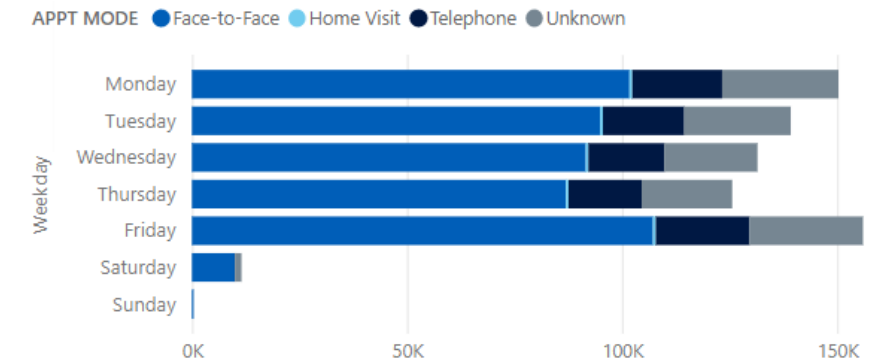
# GP access before the pandemic

- Consultations were predominantly face-to-face appointments: 69%
- Around half of patients were able to book a same day/next day appointment
- The main way of contacting the practice was by phone or in person
- Major technology advance locally: professional websites
- Only 6 out of 43 practices were offering online consultations
- Limited numbers of patients registered for access to electronic repeat prescriptions and online access to medical records and test results.

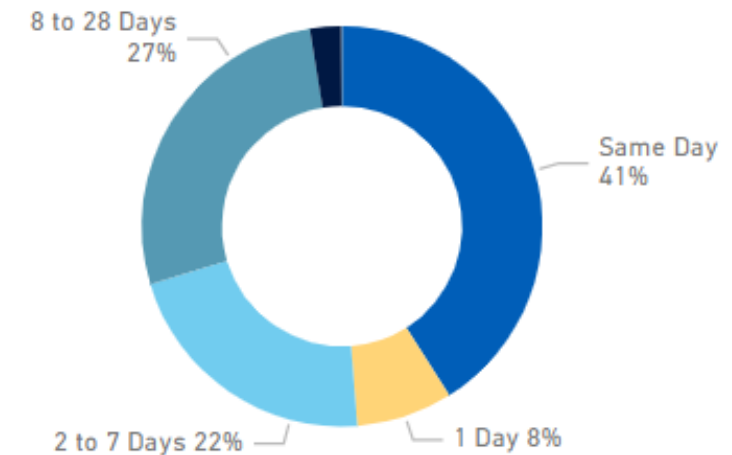
Remote consultations were already in use across the country before the pandemic. A number of remote-first GP 'apps' (Babylon Health, Virtually GP) were promoting themselves to patients as convenient and highly accessible. These were destabilising general practice by 'cherry-picking' the relatively healthy, working age population, leaving the most complex or time-intensive patients to traditional GP practices.

In addition to this impetus for change, the NHS Long Term Plan's aim was for every patient in England to have the option to access online and video consultations by 2021.

Total count of appointments in SEL GP by mode, Nov 2019



Percentage of appointments by time elapsed in SEL GP, Nov 2019



Source: NHS Digital

# Adapting GP access to Covid times

## GP practices rapidly switched to virtual consultations to protect patients and staff

- Facing workforce gaps due to self-isolation and limited access to PPE, practices rapidly implemented **virtual consultations** – online, telephone and video
- Non-essential, routine care was paused in line with the national strategy to **protect capacity for those most needing care**. National messages guided patients to call 111.
- GP practices were required to operate '**total triage**', assessing all patients remotely, restricting entry to surgeries for essential in-person care only

Spring 2020

Summer/Winter  
2020

## As part of the restoration of services, face-to-face care has increased

- A summer campaign sought to **encourage patients to seek help for ailments** in a timely manner and contact their GP practice for overdue care and screening services.
- GPs reported **difficulties assuring anxious patients** that it was safe to visit their surgery, with reports of reluctance particularly high amongst 'shielders' and other more vulnerable patients.

## General Practice is 'open for business', with adaptations

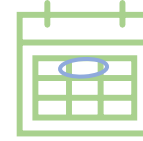
- GP surgeries form a core element of the delivery model for the **Covid vaccination programme**, balancing this priority with delivering core services to their patients
- GP surgeries are now expected to permit visits to surgery receptions, with a **lower threshold for in-person consultations**, where safe to do so.

Spring/Summer  
2021

# Most recent data on GP access



**Total appointments in General Practice have risen:** across SEL nearly 750,000 appointments were offered in March 2021 compared with 664,000 in March 2020



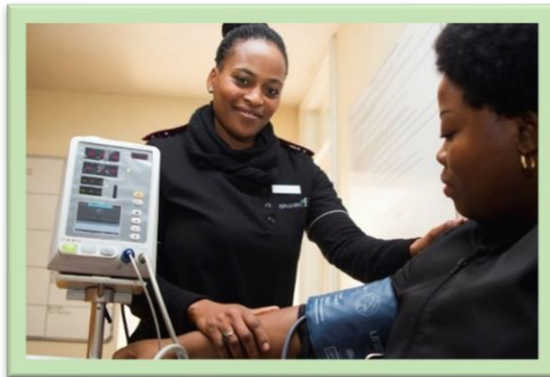
**Patients are receiving an appointment sooner:** there were 440,000 same day/next day appointments in March 2021 across SEL (60% of total), compared to 350,000 in November 2019.



**F2F appointments have risen** since the original lockdown: in March 2021 42% of appointments were F2F, compared to just 32% during April-May 2020.



**Home visiting** has returned to near pre-pandemic levels: home visits stand at around 3000 per month across SEL.



**4x** **Online consultations quadrupled** since pre-pandemic levels. Around 15,000 e-consults are now submitted to Bromley GP practices every month.



Pre-pandemic, in-person appointments represented 69% of all appointments. However only a limited number of practices offered remote consultations before the pandemic, and even fewer had access to video or telehealth solutions such as oximetry@home.

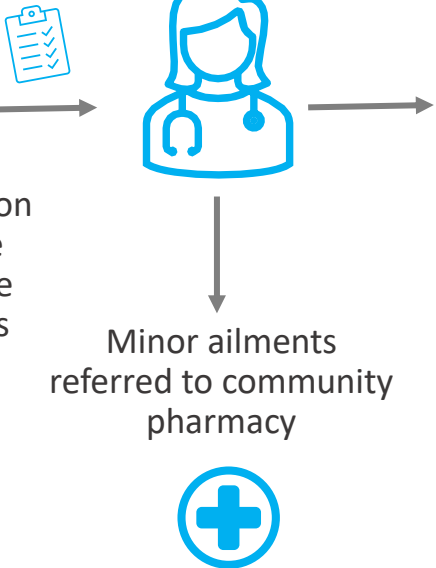
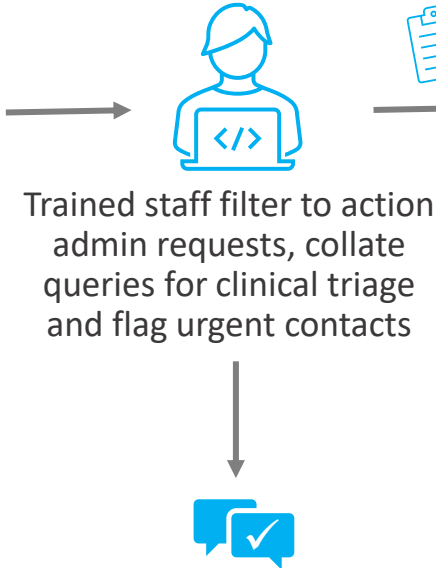


# Accessing general practice via total triage

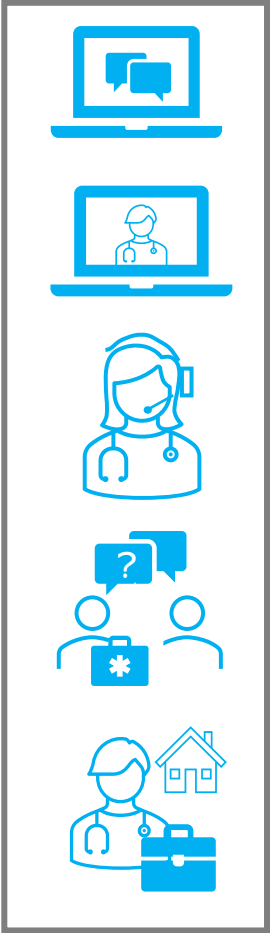
Total triage means that every patient contacting the practice first provides some information on the reasons for contact, and is triaged to decide on the most suitable mode of care delivery, by the appropriate healthcare professional, at the right level of urgency.



Patient contacts practice through preferred route



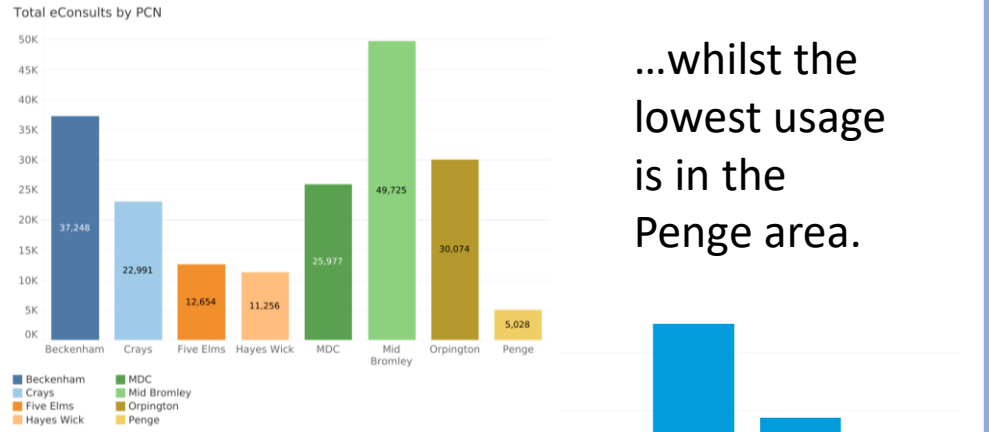
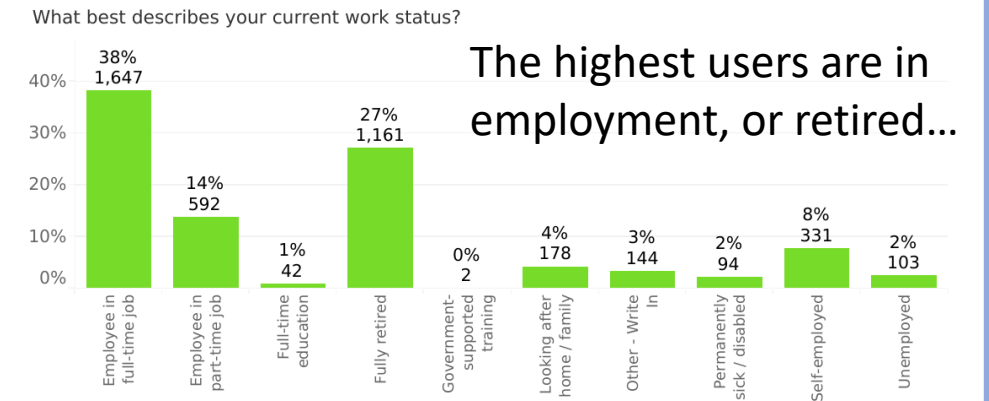
Clinical consultation remotely or in person by practice team



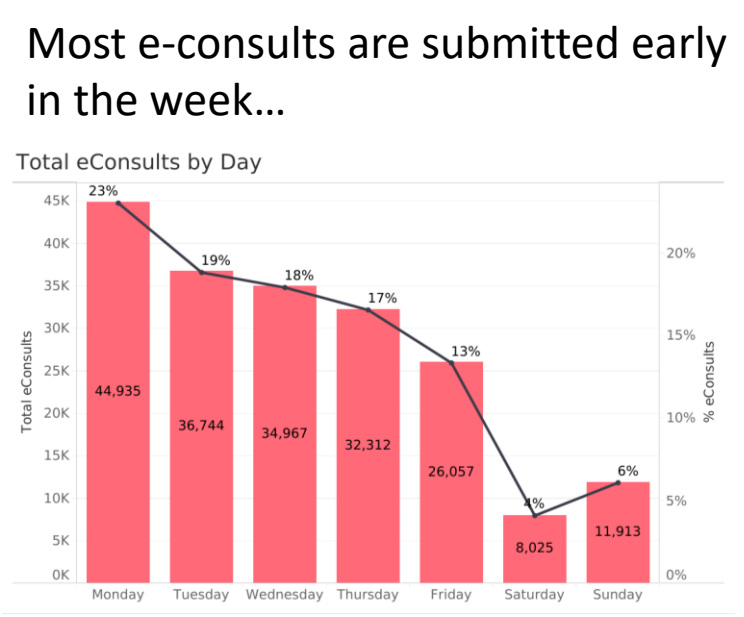
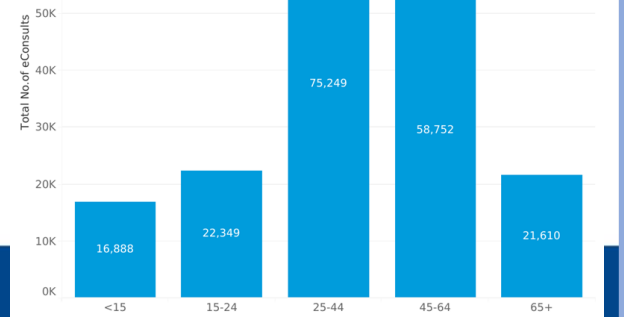
Patient receives treatment, onward referral or other care as needed



# Online consultations



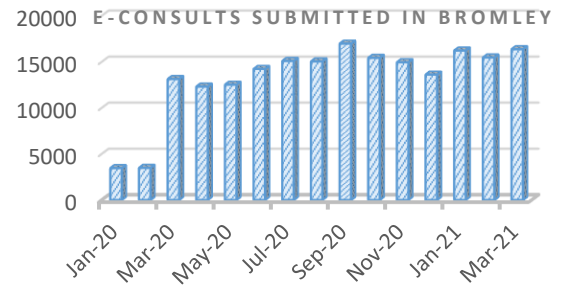
Overall, the most prolific users are 25-64 year olds.



Top Treatment Categories

General advice	62,478
Administrative help	51,061
Rash, spots and skin problems	7,606
My child is generally unwell	5,464
Earache	4,166
Depression	3,800
Contraception	3,551
Anxiety	3,215
Back pain	2,967
Cystitis in women	2,915

...for conditions suited to remote advice.



Online consultations *may* be reducing the demand on other modes of contacting the GP...

What would you have done if eConsult was not available?

	% Responses	Responses
Called a non-emergency helpline	0%	11
Looked for further information on the Inte..	1%	48
Nothing - I would not have sought any oth..	2%	84
Requested a face-to-face appointment wit..	26%	1,114
Requested a telephone discussion with m..	55%	2,363
Requested an appointment with the pract..	3%	114
Other - Write In	5%	216
Called NHS 111	3%	130
Gone to a pharmacy / chemist	2%	84
Gone to a walk-in centre	1%	60
Gone to a Walk-in Centre	0%	1
Gone to an A&E department	1%	29
Gone to an urgent care centre	1%	41
Phoned 999	0%	12

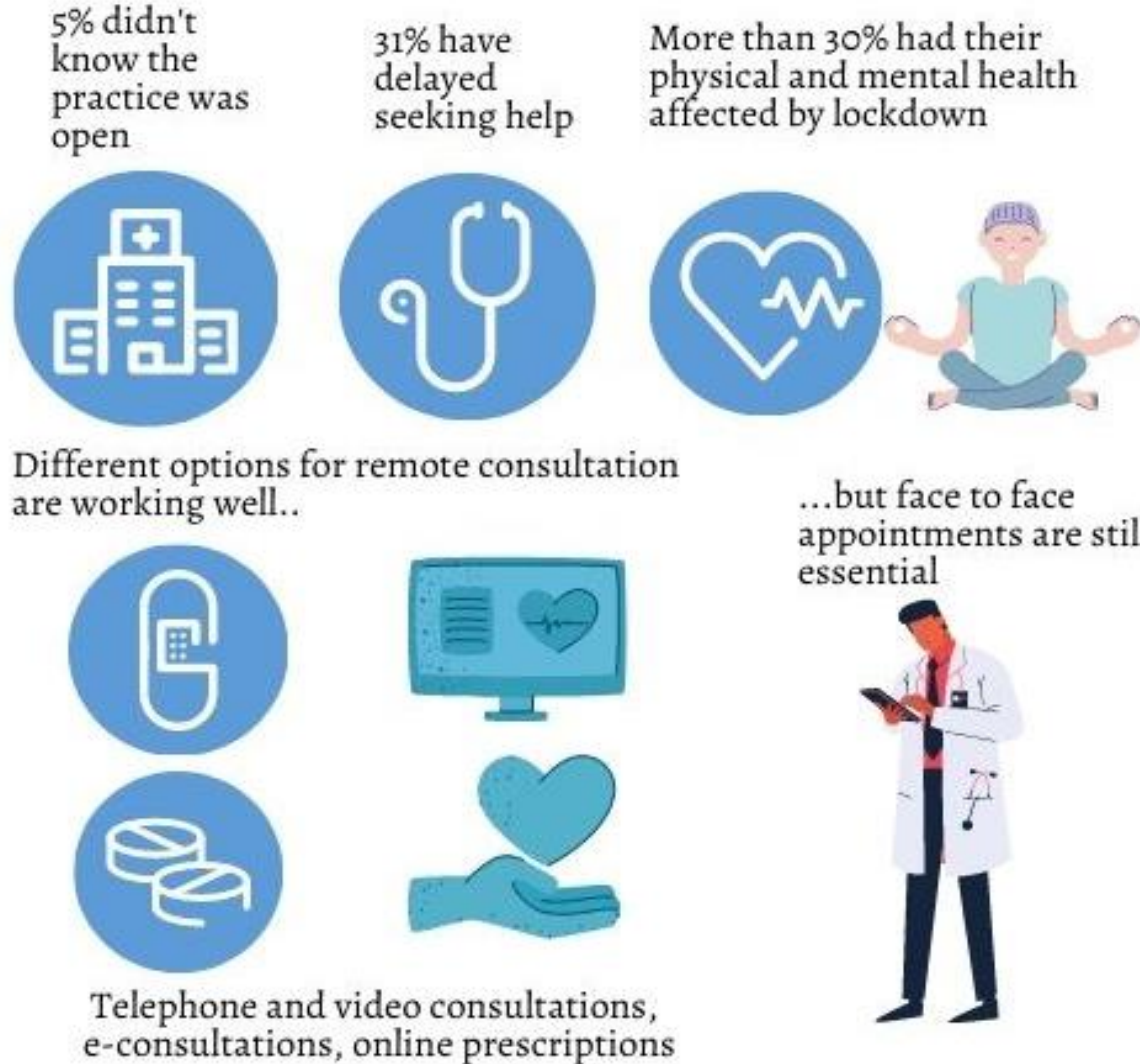
...whilst only to a minimal extent for the wider healthcare system.



# Access challenges for patients

## Patients' physical and mental health have been affected by:

- Lockdown
- Delays in seeking help
- Unaware that services are open
- Reluctance to burden the NHS further
- Unwilling to visit the surgery
- Preference to wait for F2F contact



## Primary care is now addressing a build up of work due to:

- Workforce challenges reducing practice capacity
- Increase in demand, both new and accumulated
- Increase in acuity
- Longer waiting lists for acute specialities
- Backlog in routine check-ups, screening and immunisations

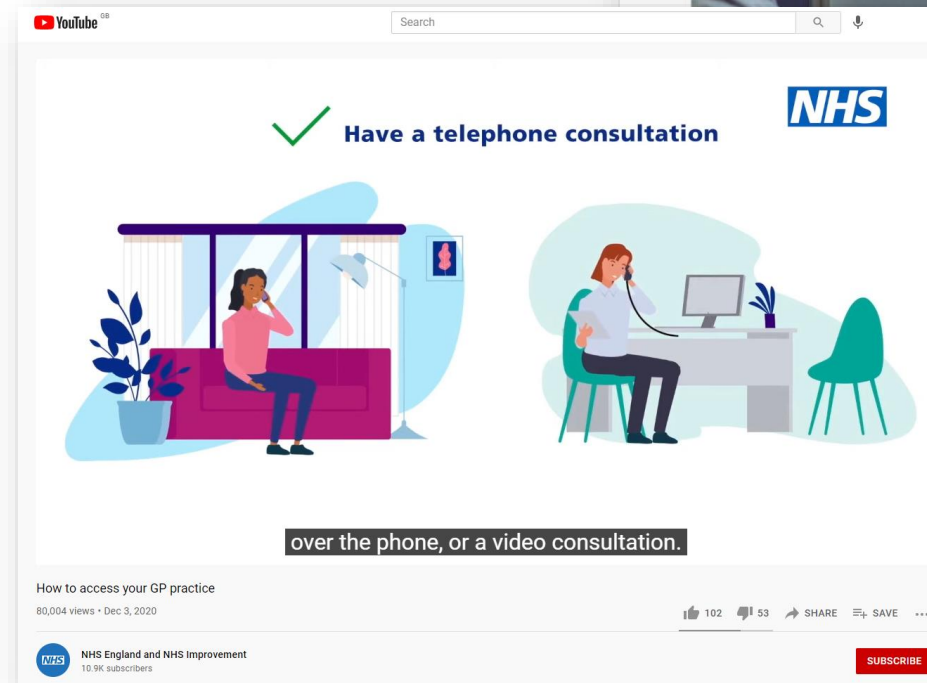
Source: July 2020 Bromley Patient Survey

# 'General Practice is here for you'

The coronavirus pandemic resulted in a decrease in people accessing NHS services for a range of conditions unrelated to coronavirus.

The NHS 'Open for business' campaign sought to give people permission to access NHS services and reassure them that they won't be a burden on the NHS.

The GP campaign was accompanied by explanations about remote triage and consultations, and that face-to-face appointments were being offered alongside other ways of accessing GP services.



# Listening to patients

In addition to the feedback direct to practices from patients via Friends & Family Test, Patient Participation Groups and ad hoc contacts, there have been efforts locally and nationally to understand people's experiences of accessing General Practice:

- Pre-pandemic national GP patient survey (issued July 2020)
- Local Healthwatch survey into primary care access (conducted summer 2020, published June 2021)
- National Healthwatch survey on GP access (conducted winter 2020, published March 2021)
- This year's national GP patient survey (due July 2021)
- SEL-wide analysis of patient access to primary care (planned for later this year)

'I'd like it to go back to how it was before Covid, with face to face contact, the telephone consults are not always the best way for some health care issues'

'I can't get anything done, and you blame everything on COVID 19'

'Dissatisfied my GP has not consulted with me to check on my wellbeing during the lockdown than depend on a telephone survey'

'I like it how it's been over the last 3 months'

'I used e-consult before this and will be happy to continue doing so, so long as face-to-face consultation will also be available if/when I need it'

'I have preferred the process used in lockdown to the normal process used before lockdown'

There is a group of patients considered 'under-served' or otherwise less heard, as well as patients who experience 'digital poverty' or have difficulty conveying their requirements. These patients may not be accessing all the care they need. We need to find ways to best identify and support digitally-excluded patients effectively.

# Practice experiences

In Bromley, GP practices:

- Have, on average, a high proportion of older patients on their list
- Are more likely to be small, and/or single-handed practices
- Some operate a more traditional model, with limited modernisation of systems.

Whilst noting these factors:

- Many GPs and their staff have adopted new ways of working very effectively
- Total triage has been beneficial as a way to keep patients and staff safe
- Most GPs still prefer in-person consultations as a safe, reliable way to provide care
- But are balancing this alongside rising rates of Covid and potential risks of visitors infecting other vulnerable patients and staff
- Practices are reporting an increase in the volume of contacts, and an increase in unhappiness amongst patients (who may be frustrated, worried, fatigued, etc)



# Improving access in General Practice

## Technology and estates

### *Modernising operations*

Digital technology investment, telephony systems, remote working solutions, staff training

### *Covid-safe premises*

Premises improvements, better waiting areas, more effective use of clinical space

## Workforce

### *Expand workforce*

Expansion of primary care roles eg clinical pharmacists, physios, paramedics, MH practitioners

### *Retain workforce*

Wellbeing support, flexible working patterns, reduce burden through collaboration

### *Proficient triage*

Redesign of 'reception' roles and internal pathways

### *Virtual consultation skills*

Clinician training to engage with and assess patients remotely

## Patient needs

### *Meeting diverse preferences*

Providing a range of appointment options to meet preferences, from more locations

### *Accessibility requirements*

Establish flexible, inclusive virtual access, eg for hearing and sight-impaired patients

## Strategic planning

### *Demand analysis and insight*

Improve quality of appointments data, analyse local data for trends in demand and utilisation

### *Effective communications*

Adopt modern communication tools, update patients regularly, increase two-way flow