

Friday 3rd May
2024

Dear Patients

Thank you to those of you who have provided feedback regarding the surgery. We want to reassure you all that we are listening to your concerns and are doing all that we can to improve access and availability of appointments for our community. We understand how frustrating it is to hear that there are no appointments left and that in some cases you are redirected to other services such as NHS111, the Urgent Treatment Centre or the pharmacy.

General Practice has seen significant changes over the past few years and we felt it might be helpful to provide you with some insight as to why it appears the surgery has changed or does not seem as 'good as it used to be'.

The NHS is under extraordinary pressure. We are sure you are all aware of the significant waiting times for hospital appointments, A&E visits, and surgical procedures. Each patient waiting for surgery, or to see a specialist at the hospital requires additional support from General Practice. This has a knock-on effect in Primary Care, increasing the difficulty of being able to get an appointment at a time that is convenient to you or with the clinician you choose and regrettably sometimes, any appointment at all.

Medicine itself has become increasingly complex over the past decade, with a huge amount of workload being transferred from hospitals to GPs to monitor drugs and long term conditions. Every interaction a patient has in secondary care is reviewed by a member of the surgery, yet General Practice holds only 5% of all NHS staff.

The structure of funding in General Practice has significantly changed. In fact, the contract, which has been imposed without negotiation upon General Practice for three years running, is now worth £620million less in England compared to 2015. 1300 practices have closed, nationally we are 2000 GPs short despite increased training numbers. The equivalent of 1 in 2 of the entire population are seen in Primary Care every month.

The below inflation increases in funding each year do not cover the recommended wage increases or necessary medical supplies, nor the other usual running of a commercial building such as heating, electricity, cleaning, waste disposal etc.

We had previously spent a lot of time considering accessing available funding via the Community Infrastructure Levy to develop the surgery. Unfortunately, this funding only covers up to 66% costs of any proposed development and so we have

unfortunately not been in a position to able to apply for such funding. Any concern that such funding has been previously granted and consequently squandered is false.

You may have heard that the government have invested and plan to invest further funding into additional roles (Clinicians that are not nurses or doctors). Control of this funding has been taken away from practices and given to Primary Care Networks. If the funding is not utilised it is removed. Previously, this funding would have been given to practices to look at their own individual populations and to decide which clinicians are best suited to our individual community needs.

At Southbourne we are very fortunate to have very experienced GPs, a senior Paramedic Practitioner, a Pharmacist, Nurse Practitioners and Health Care Assistants. We also have a growing team of additional role team members, including Paramedics, Pharmacy Technicians, Physicians' Associates, Care Coordinators and GP assistants. Each additional role is supervised by a Named Clinician and have protocols for all their clinical roles. For example, those who do not have prescribing authority have each consultation reviewed and feedback given by a GP. These additional roles increase capacity at the surgery and are a valuable resource to us. However, ensuring that safe working practice is met takes significant GP time to support.

All our staff at Southbourne Surgery are working incredibly hard and often under very stressful conditions. They are motivated to provide the highest standard of care with the finite resource we have. We are very sorry that in some instances we have not met your expectations. The staff are all aware of the social media discussions regarding the surgery and we would like to ask you be kind and considered in your comments, as they do affect staff morale. It would not be appropriate for the surgery to respond individually to comments due to our duty to confidentiality. We would welcome any concerns to be addressed directly to the surgery. But we cannot and will not tolerate abuse of our staff, either through aggression in person or through social media channels. Perpetrators of abuse will be contacted and appropriate action taken.

Our Patient Services Team are working with a triage toolkit which helps them to direct patients to the right service for them. We want to ensure that we are working a 'needs met' not 'first-come, first-served' service. This means that when you have a first urine infection for example, being directed to the pharmacy is appropriate. Utilising all resources will mean that GP appointments are reserved for those who need to see a GP, often with more complex needs. Where your concern does not fit the triage toolkit the patient service advisor can talk directly with the duty team and come back to you. We would greatly appreciate your support with this system.

Because of ongoing feedback regarding capacity, we are trying to adapt our resources to open as many appointments as we safely can. We are also continually looking at how we can reduce waiting times on the phones. Our phone data shows us that wait times have reduced overall since January, however they are still not at a level that we, or you, find satisfactory. We have visited other local surgeries in the past week to see what we can learn and implement. We kindly ask for your patience whilst we work on this area.

We have had a significant increase in patients not attending appointments, from January to March there were 391 wasted appointments. Given the difficulties with available appointments, we hope that you can cancel your appointment ahead of time

should it no longer be needed. This can be done by responding to the text message reminder sent before the appointment.

Thank you for your time reading this. We hope that this post provides some reassurance that we are aware of the issues and are working to resolve them in a safe and manageable way. Allowing us the time to make any changes would be greatly appreciated by all of our hardworking and dedicated staff. We will post any further updates on our website.

Yours sincerely

Darren Nickerson

Darren Nickerson
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On behalf of the Partners, Southbourne Surgery