

Glasgow City Health and Social Care Partnership Primary Care Engagement Report

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Health inequalities in Glasgow City HSCP

- Public Health Scotland defines health inequalities as the *“avoidable and unjust differences in people's health across the population”*
- Glasgow has the lowest healthy life expectancy in Scotland for both men and woman
- Glasgow City has the highest concentration of people in Scotland living in deprived circumstances and has high levels of child poverty, fuel poverty and food insecurity
- 17% of Glaswegians are classed as homeless or threatened with homelessness.
- This demonstrates the significant health inequalities in Glasgow City HCSP

Engagement plan

Aim:

The engagement exercise aimed to gather PC contractors, HSCP staff and patients' thoughts on the draft PCIP 2022/3-2025/6 and identify areas for improvement to PC services

Objectives:

**ESTABLISH KEY
STAKEHOLDER VIEWS
ON DRAFT PCIP
2022/3 - 2025/6**

**LISTEN TO THE STAFF,
PATIENTS & SERVICE
USER'S SUGGESTED
IMPROVEMENTS FOR
PRIMARY CARE**

**LISTEN TO ANY
SUGGESTED
ADDITIONS TO THE
PCIP**

**REPORT ON FINDINGS
TO SUPPORT THE
NEW 2022/3 - 2025/6
PCIP**

Engagement Process

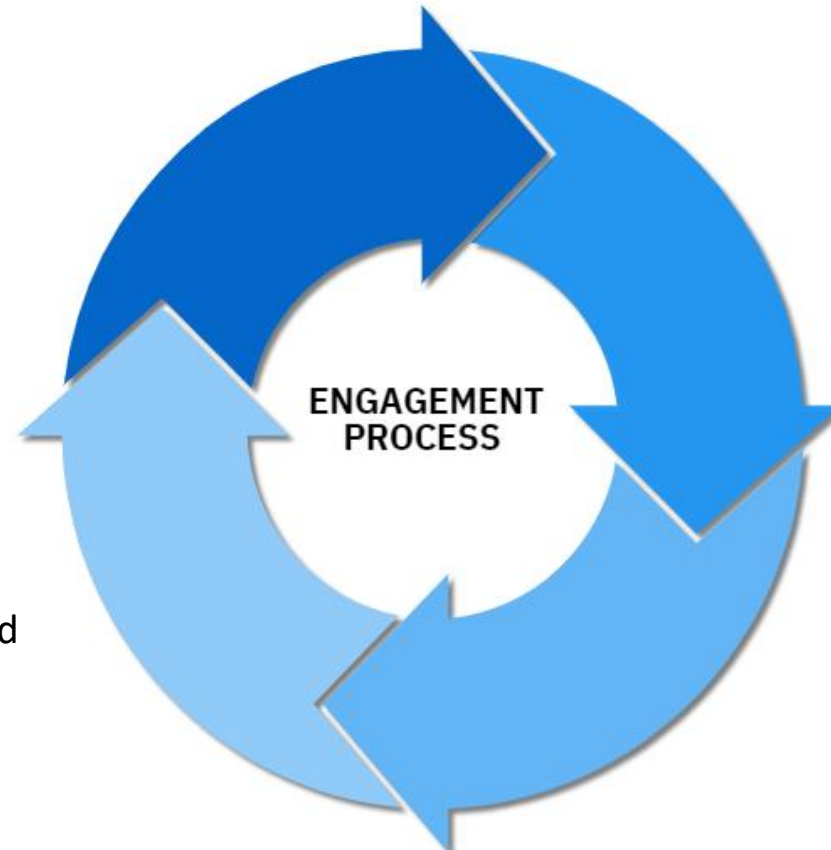
APPROACH

A structured approach was developed to guide our engagement and ensure it was easily accessible.

DATA COLLECTION

Throughout the engagement we asked, "What areas within PC require improvement?" The information received from the engagement was logged and analysed for key / recurrent themes. We used the 4 methods of data collection:

- Mentimeter
- Verbal Discussion
- Written Feedback
- Online Survey



KEY STAKEHOLDERS, STAFF & SERVICE USERS IDENTIFIED

- GPs and their staff
- PC service providers
- HSCP staff
- Third sector bodies carrying out activities related to the provision of PC
- Patients, their families, carers and local communities.

METHOD

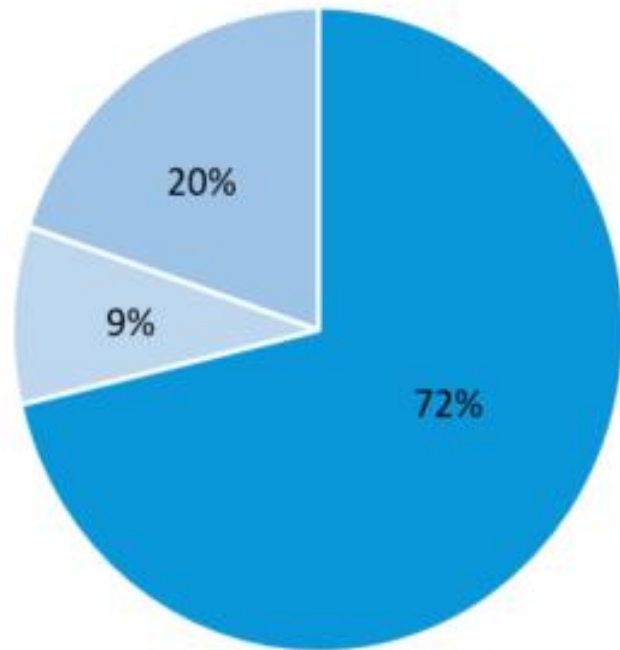
- Presentations and discussions via Microsoft Teams;
- Open discussions at HSCP meetings;
- Social media survey i.e., Facebook and Twitter;
- Face to face presentations followed by open discussions with groups of staff, patients, carers, service users and local community groups; and
- Pop up stands in health centres and in a large shopping centre.

PC contractor and staff feedback

No of responses	Key areas for improvement
47	Public messaging / improved communication
46	Increase staff support / education / training
35	Clear staff roles and responsibilities
35	Increase investment and funding
35	Improve collaborative and increase MDT working
32	Increase staffing and address recruitment and retention problems
32	Reduce waiting times, increase access and manage patient demand
27	Improve planning and processes
23	Focus on patient centred care and improve the quality of care
23	Improvements / changes to the phlebotomy and treatment room service
16	Improve premises / increase access to clinical rooms
14	Improve / increase mental health services
13	Review the referral process to DN and mental health services
13	Improve diabetes care
11	Improve IT

Patient feedback

Patient Engagement



- Access to Services
- Communication
- Other areas for Improvement

There was a great response from patients who provided lots of valuable views and feedback. The feedback has been categorised into 3 main categories.



Access to Services

302 patient responses referred to the need for improved access to Primary Care Services.



Communication

36 patient responses referred to the need for improved communication from and between Primary Care Services.



Other Areas for Improvement

78 responses referred to other Primary Care improvements required

Unprompted Positive patient feedback

Patient feedback

No of responses	Key areas for improvement
117	Improve access to GPs/waiting times/appointments
63	Improve access to dentist/waiting times/appointments/NHS treatment including children
61	Improve access to face-to-face appointments
24	Improve mental health services
14	Improve communication with patients
14	Improve access podiatry
13	Improve interpreting services/ language barriers

Broader context: *Additional Papers*

The Health and Care Experience Survey (2021-2022)

- More difficult to access a GP appointment in a way they want
- Less likely to be able to book an appointment in advance
- Less satisfied by the quality of information provided by reception staff than in 2020

Survey to identify engagement priorities across Older People, Adult, Children and Family Services (2022)

- Better access to GP appointments, lower waiting times, more F2F appointments and clear information about services
- Improved children and Mental Health services, with easier access
- Improved IT systems and easier access to PC services

Health Needs Assessment of Lesbian, Gay, Bisexual, Transgender and Non-binary (LGBT+) people in Scotland (2022)

- Recommended LGBT+ inclusivity training for organisations
- Development of protocols to ensure PC services are involved in transgender and non-binary care
- Investment to reduce waiting times in GICs
- Encourage more clinicians into the specialty

Findings



PC Contractors & Staff

The PC contractors and staff findings suggest the HSCP should address:

- Sustainability
- Quality Improvement
- Communication and engagement
- Collaborative working
- Property

Patients

The patient suggested improvements:

- Access to PC services, in particular GPs and Dentists
- Effective communication from and between PC services and via the interpreting services
- Improved mental health services

Findings: need to develop, improve or increase accessibility to 6 PC services

Children's Services

- Review of PC Children's services with increased awareness of the services available
- Clear pathways into Child and Adolescent Mental Health Services
- Joint initiatives, increased education and collaborative working
- An agreed strategy for integrated working

CTAC: Phlebotomy and treatment rooms

- Consider a review of the Phlebotomy role
- Review of treatment room services to allow non-housebound patients be seen in the health centres
- Moving and handling equipment in treatment rooms
- Reduced waiting times for ear syringing

Diabetes services

- Consistent approach to diabetes care across the HSCP
- More education on diabetes
- Continue to restart regular screening / reviews

Findings: need to develop, improve or increase accessibility to 6 PC services

District Nurses

- Review staffing levels
- Improvements to the single point of access referral system
- A set criterion for patient referrals
- Creation of realistic patient expectations of the DN service

Mental health

- Increased access to mental health services
- Clear and simple pathways

SPHERE Bladder and Bowel Service

- Address inequality in service provision

Recommendations

1	Promote the sustainability of PC services
2	Support the ongoing implementation of the GP Contract 2018 ²
3	Review PC services and increase access to services
4	Support the establishment of mental health and chronic disease management hubs
5	Progress support for quality improvement (QI) in PC
6	Improve communication and engagement with PC contractors, staff and patients
7	Improve / increase collaborative working, including multi-disciplinary working
8	Address issues with property and clinical space

Next Steps

Subject to approval of this engagement paper, the recommendations will be incorporated into the final PCIP 2023-2026 which will then be presented to the IJB for approval

Equalities Impact Assessment has been completed as part of this process

