

# Primary Care Performance Update - Quarter Q1 2021/22

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# HSCP Performance Indicators – Summary

KPI	Target	Actual	Period	RAG Status	Direction in Last Period
Prescribing Costs: Compliance with Formulary Preferred List	78%	75.96%	Q4	Amber	Down
Prescribing Costs: Annualised cost per weighted list size (reported in arrears)	At/Below NHSGGC average	GC at £154.2 versus Board at £172.98 in Mar 22		Green	Down
Under review to add in vaccination uptake					

# Key Performance Achievements

- *Transfer of all vaccinations from GPs to HSCP/NHS by March 2022* – Mixed delivery Public Health, HSCPs, Maternity Services, external providers – e.g. Covid-19 and flu – almost 10,000 adults in care homes and people who are housebound to be vaccinated .
- *Treatment and Care Services* GP practices now have access to all clinical rooms across Glasgow City. Phlebotomy continues to see approx. 4500 patients per week. Treatment rooms in the NW and South are progressing with Ear Care Clinics with micro suctioning being rolled out. NE will follow shortly
- *Pharmacotherapy* All 143 practices have partial access and all practices had an IDL service, over 50% supported through the HUB model Pharmacotherapy
- *Effective management of the primary care prescribing budget and expenditure*

# Patient Views ... & GP Practice Comments

Patient is happy with the convenience that they no longer need to order each time with the surgery and can go straight to the pharmacy to collect their prescription.

Patient very happy with recent asthma review with Pharmacist. Was delighted with the new inhalers prescribed and very much appreciated the follow up phone call one month later to see how she was getting on.



Excellent service, huge improvement for GP surgeries but would say they are massively understaffed for their workload

Our pharmacist and pharmacy hub are very obliging and help us massively on a day to day basis. As a GP surgery we would be lost without them.

Very satisfied because he (Pharmacy Technician) went out of his way to get the information I asked for. He actually went above and beyond my expectations.

- *Expansion of Community Links Workers programme to over 80 practices with 3241 referrals, 11995 appointments, with 3722 individuals supported*
- *83 Practices with an embedded Welfare Advice Health Partnership in operation 1256 referrals in Q1 from WAHP practices across 19 GP Clusters*
- *Continued development of the youth health services 428 referrals (including 347 counselling support, 57 for Multiple Risk) & 1388 appointments delivered.*
- *Continued support for helping people with mental health and wellbeing concerns*
  - *Lifelink: 2479 referrals, 4240 appointments, 1484 people booked, 27 wellbeing classes with 370 attendees*
  - *Compassionate Distress Response Service (CDRS)– in hours service 723 referrals. 652 individuals engaged with the service (90.2%) equating to 3456 contacts (calls and visits).*

“I was in a slump, but I’m now ready to go for a small goal and start the momentum. It sounded very simple, but has had an effect, thank you” -  
**Improving Motivation wellbeing class participant**

**Lifelink**

“I would just like to take this time to say thank you very much for the support you have given him! I don’t think you will ever realise just how much you saved him. He would be dead I think — that was the lowest he has ever been & I have seen some states. If it wasn’t for you (CDRS staff), my children wouldn’t have a father. For that I am eternally grateful!” **(Family member)**

[CLW] is a valued member of the Practice Team and the service and support he provides to our patients is important. The difference in not having the GPs become embroiled in some of the work picked up by [CLW] is invaluable.” **GP feedback**

“[The Nurse] is brilliant with [my daughter] and she made her feel at ease right away. [My daughter] really struggles socially but with the ongoing support from the Youth Health Service and mentoring, hopefully she will build her confidence.” – **parent feedback**

**Community Link Workers (CLW)**

**Youth Health Service**

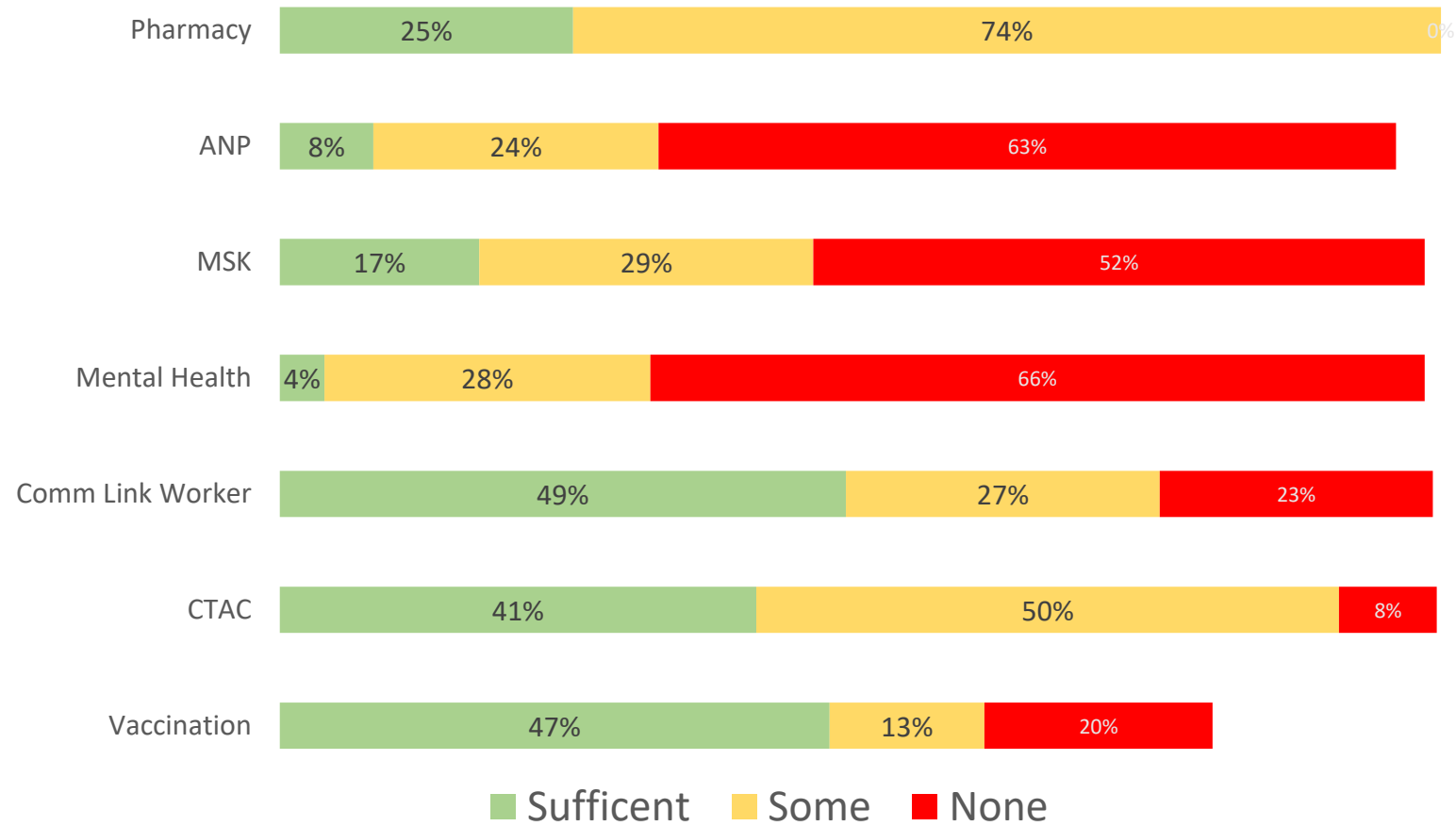
# Key Performance Achievements Q1 2022/23

- **Advance Practice Physiotherapist in primary care** 36 GP Practices with APP input, 4621 APP appointments available in Q1, 92% APP appointments filled, 38% of patients are directed to APPs by receptionists or other healthcare professionals within the practice (this is lower than GGC average)
- **Project underway in Health Centre to expand treatment room, consultation rooms and agile working space with completion expected winter 2022** 14 additional consulting rooms, 30 additional treatment rooms, Improve functionality of waiting and reception space, Address circa £900k of back log maintenance issues identified across the site, Minor works improvements to areas across all 6 health centres

# Evaluation of Primary Care Improvement Plan – 286 GPs and 527 MDT staff responded

**GP**

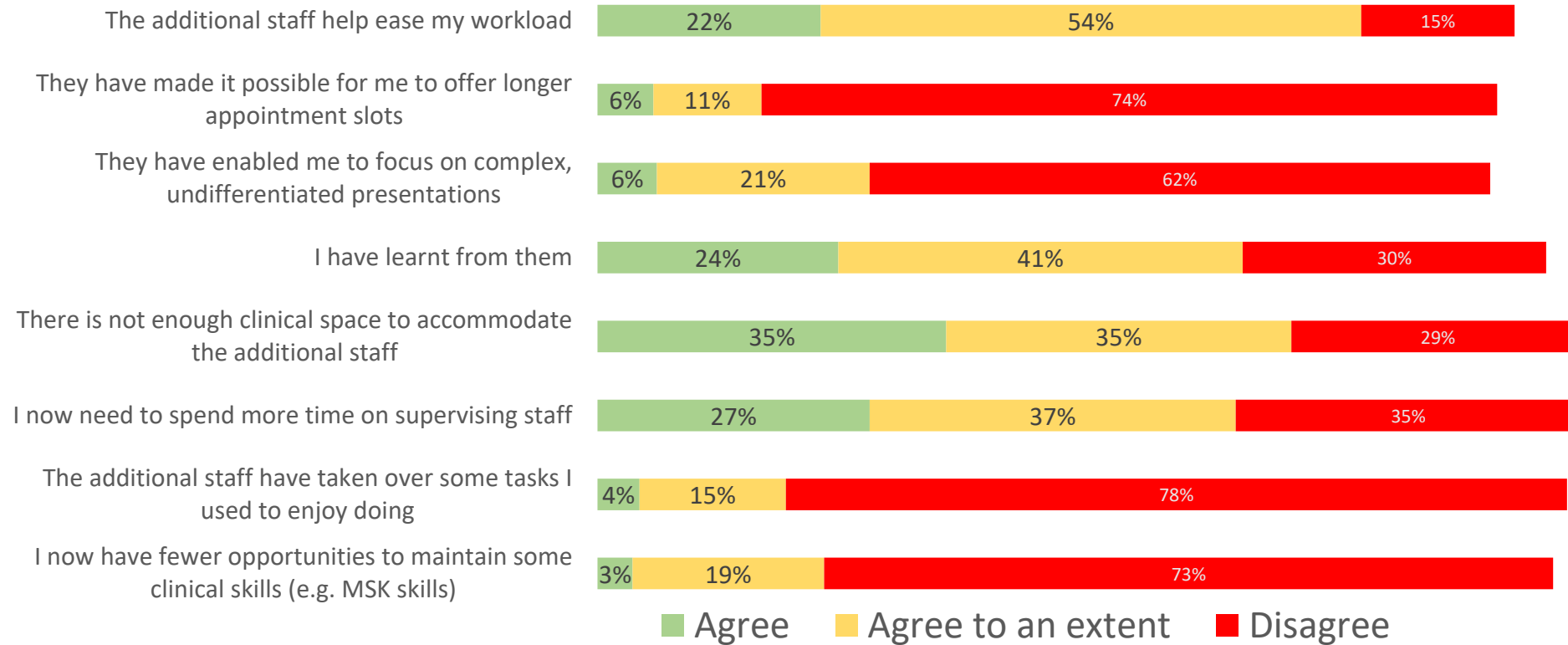
## GP Access to Workstreams





**GP**

## Advantages of Additional Staff



# Key Performance Challenges

- *Availability of workforce and retaining experienced practitioners (eg. ANPs in care homes)*
- *Potential increases in prescribing costs*
- *Uncertainty about funding this year and into 2023/24*
- *Insufficient resources to meet all commitments in GP contract for all practices in Glasgow City*
- *lack of suitable accommodation, especially in GP premises*
- *Development of IT systems to support service delivery and lack of integrated IT system between primary care and NMSGGC*
- *Services are still “bedding in” and need to further develop*
- *Increasing waiting lists and times for services, especially mental health*
- *Overall sustainability of primary care contractors and capacity to engage with us and to develop services*

# Taking Forward the HSCP Strategic Priorities

## GCHSCP Primary Care Improvement Plan Consultation, 2022 – 2026

### Engagement-

- **Methods-** Mix of face to face- Parkhead forge plus various health centres and MS Teams and online HSCP staff & contractors ‘listen and learn’ engagement sessions.
- **Stakeholders- contractors & staff** -predominantly GPs but also included pharmacy and ophthalmology. **Patient-** Sense Scotland, breastfeeding & toddler groups, Refugee groups & disabled patients.
- **Gaps-** dental staff engagement lower. Accessed most hard to reach groups but not all – LGBTI



### Planned Engagement

- **Staff:** face to face discussions with DN / DSN meeting mid October
- **Public:** online consultation using Social Media- Facebook & Twitter. To take part, complete the survey at [Glasgow City Primary Care Public Engagement \(office.com\)](https://glasgowcityprimarycarepublicengagement.office.com)  
 #NHSGGC #GetInvolved @GlasgowCityHSCP
- **Reporting Timescale-** Data analysis of findings end of October, aim to produce PCIP consultation report in November 2022

# Future Priorities – PCIP 2022 to 2026

1. Within our overall Scottish Government funding implement the requirements of the 2018 GP contract through our primary care investment fund
2. Promoting the sustainability of primary care services
3. Develop and implement the Primary Care Mental Health and Wellbeing teams for all GP clusters
4. Progress our support for quality improvement (QI) in primary care
5. Making sure we have a high quality of engagement with primary care contractors, third sector networks, our public engagement forums and equality groups
6. Improving our performance management framework for those primary care functions where we have a responsibility
7. Ensuring that our primary care plan is connected to the HSCP's other transformation programmes and to the policy developments by the health board and Scottish Government