

REPORT TO ABERDEENSHIRE INTEGRATION JOINT BOARD 01 MARCH 2023

NHS GRAMPIAN OUT OF HOURS PRIMARY CARE SERVICE (GMED)

1 Recommendation

It is recommended that the Integration Joint Board (IJB):

- 1.1 **Notes the current position in relation to Grampian Out of Hours (OOH) Primary Care Services with Moray as the Hosting Integration Joint Board (IJB).**

2 Directions

- 2.1 No direction requires to be issued to Aberdeenshire Council or NHS Grampian as a result of this report.

3 Risk

- 3.1 Risks are recorded on Health and Social Care Moray (HSCM) Risk Register.

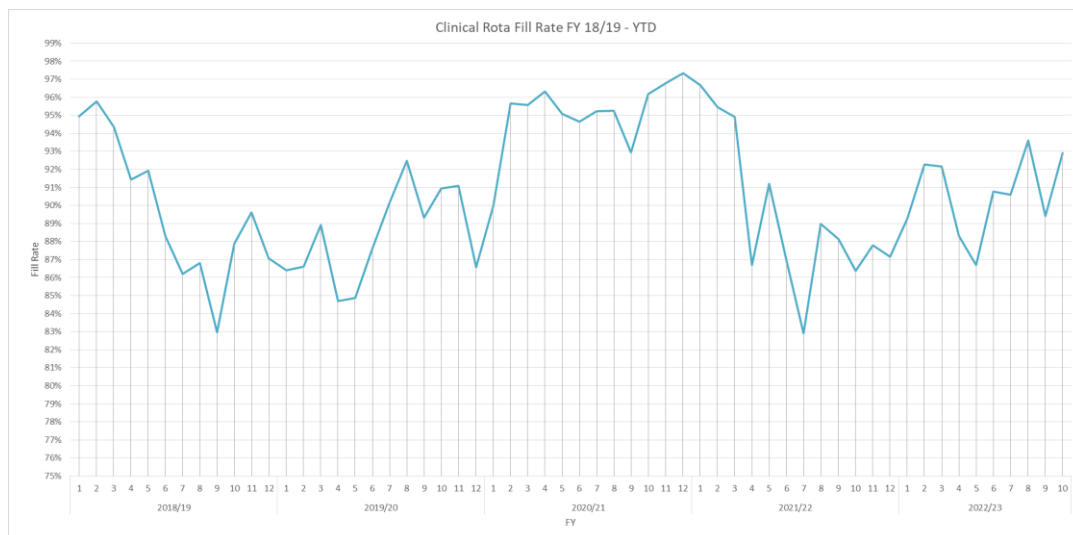
4 Background

- 4.1 GMED provides urgent primary care services for the Grampian population in the out of hour's period (including Public Holidays).

4.2 **Workforce:**

- 4.2.1 GMED service continues to maintain similar rota fill rate levels comparing to previous years (with the exception of 2020). The average rota fill rate is 90% for the whole year, which is assessed to be at the G-OPES¹ Level 2.
- 4.2.2 Clinical rota is affected by unpredicted absence, Covid related absence and holiday periods. Furthermore, the majority of the GP workforce within the service is employed as bank staff, which contributes to challenges around sustainability and resilience of workforce. Ability to staff the rota is recorded on the HSC Moray Risk Register. Appropriate controls are in place.

¹ G-OPES: The Grampian Operational Pressure Escalation System; an enhanced approach to managing the operational pressures as a unified health and care system

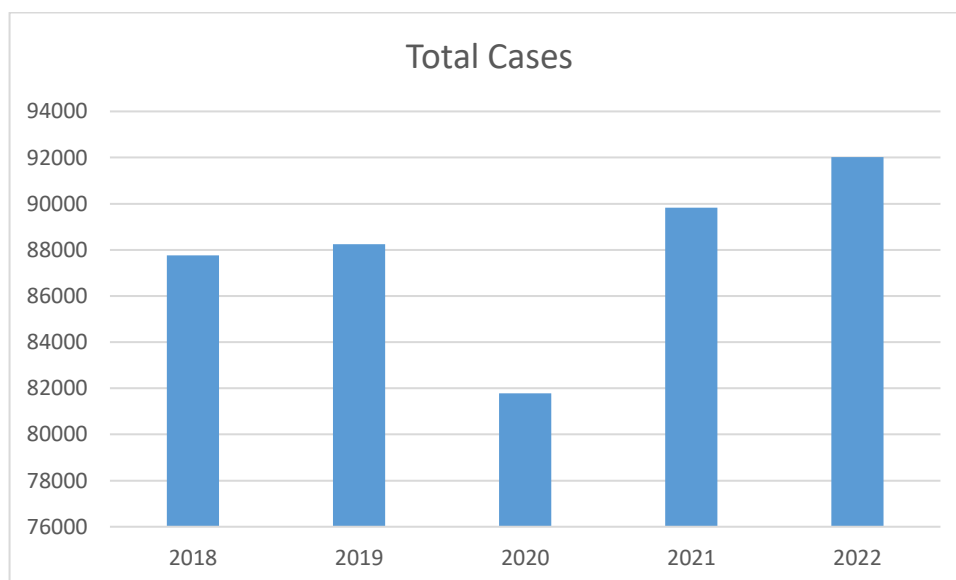


4.3 Staff Governance and Engagement:

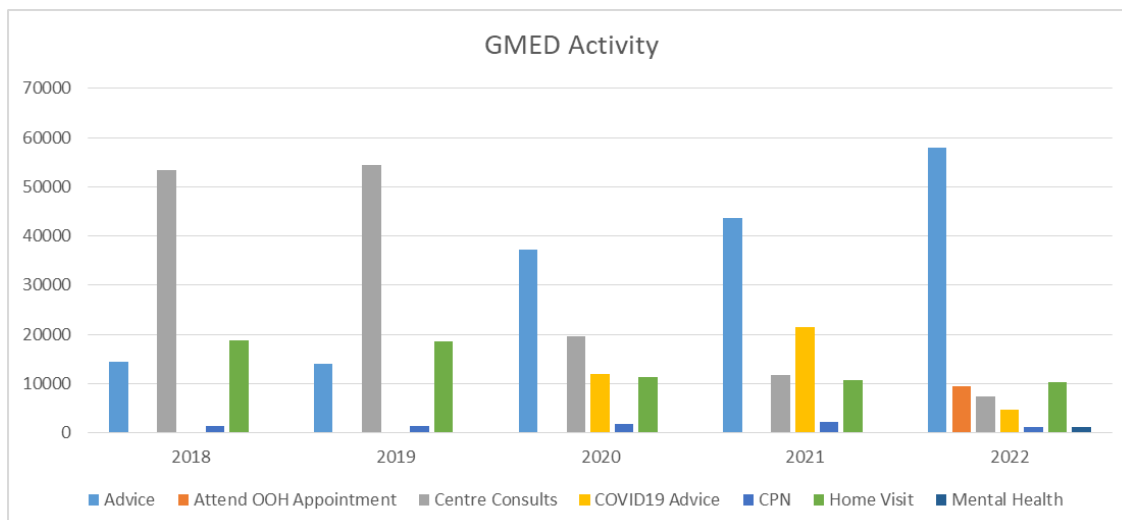
4.3.1 GMED Management Team continues to work with staff to improve employee experience; from the start of the recruitment process to day to day operations. Appropriate NHSG tools are used to measure satisfaction (i.e. iMatter) and internal surveys. Identified actions are taken forward together with staff to promote NHSG Shared Governance standards.

4.4 Performance:

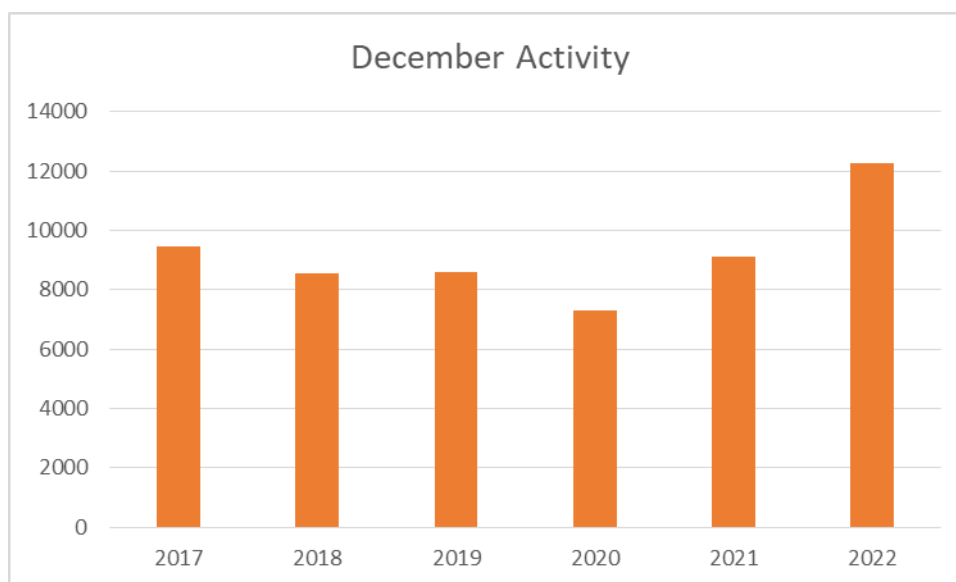
4.4.1 GMED activity continues to be predictable, however, activity is increasing with 2022 being the busiest year with 92,020 cases received.



4.4.2 The service continues to employ an advice first approach, where the patient is triaged over the telephone to establish whether face to face assessment is required. Therefore, a shift from face to face (centre consult and home visit) to advice is visible.



4.4.3 December 2022 was the busiest December that the service observed in the last six years, and Festive Period 2022/2023 observed the highest demand since the start of measuring the demand (graph represents only last 6 years).



4.5 Finance:

4.5.1 GMED continues to observe an overspend on the budget.

4.5.2 Year To Date, (YTD) to M9 variance is (460,630) which is 6% over the YTD budget. In comparison, in the same month last year GMED observed spend 5% over budget. Overspends are reflective of increases in clinical demand.

MORAY HOSTED SVS

9 months to December 2022

	Annual Budget	YTD Budget	YTD Actuals	YTD Variance	Period Budget	Period Actuals	Period Variance	Period Estab	Avg Wte	Period Wte
GMED	(270,820)	(203,115)	(154,572)	(48,543)	(22,568)	(18,166)	(4,403)	0.00	0.00	0.00
MISCELLANEOUS INCOME	(270,820)	(203,115)	(154,572)	(48,543)	(22,568)	(18,166)	(4,403)	0.00	0.00	0.00
GMED	10,577,305	7,932,979	8,197,281	(264,302)	948,109	923,049	25,059	95.78	89.91	93.91
PAY	10,577,305	7,932,979	8,197,281	(264,302)	948,109	923,049	25,059	95.78	89.91	93.91
GMED	294,527	213,649	361,434	(147,785)	26,818	52,288	(25,470)	0.00	0.00	0.00
NON-PAY	294,527	213,649	361,434	(147,785)	26,818	52,288	(25,470)	0.00	0.00	0.00
TOTAL	10,601,012	7,943,513	8,404,143	(460,630)	952,359	957,172	(4,813)	95.78	89.91	93.91

4.5.3 Further work is being undertaken with Finance to realign cost centres within the service.

4.6 **Unscheduled Care Review:**

4.6.1 The GMED service has been reviewing redirection and referral pathways out with NHS 24 pathways since August 2022. This is part of unscheduled care improvement work in response to the increased demands being experienced in Grampian and indeed, across all unscheduled care services in NHS Scotland. Up until the start of the review, multiple services in the Out of Hours (OOH) period were able to refer to GMED, which was not in line with national protocols.

Such redirection pathways created an unprecedented pressure on the GMED service by allowing all professional to professional referrals to be accepted with a one hour priority, very often with no clinical indication for this. This led to a lack of equity and fairness in how various patients access the service. These reviews form a significant part of identified improvement works by GMED to address these challenges. GMED have engaged with various stakeholders across Grampian to build up an awareness of the redirection pathways, as well as to review and update existing protocols to ensure clinical effectiveness and safe, person centred care.

4.6.2 To date, the GMED service have addressed pathways for care homes referrals, pharmacy referrals, and Scottish Ambulance Service Referrals.

4.6.3 GMED is currently engaging with Mental Health, Adult and Children Emergency Departments and the Flow Navigation Centre to review referral pathways in line with the 'right care, right place' guidance.

4.7 **Clinical Governance:**

4.7.1 GMED continues to strengthen clinical governance within the service:

- Reporting into HSCM Clinical and Care Governance
- Reporting into HSCM Clinical Risk Management Committee
- GMED Clinical Governance Meeting

- Staff Educational Sessions.
- Identifying and taking learning from adverse event and complaint reviews.

4.8 Adverse Events:

4.8.1 The service recorded 78 adverse events in 2022. (130 in 2021).

Category	Count
Medication	19
Access, Appointment, Admission, Transfer, Discharge (Including Absconders)	15
Consent, Confidentiality or Communication	9
Diagnosis, failed or delayed	9
Other - please specify in description	7
Accident (Including Falls, Exposure to Blood/Body Fluids, Asbestos, Heat, Radiation, Needle-sticks or other hazards)	5
Treatment, Procedure (Incl. Operations or Blood Transfusions etc.)	4
Clinical Assessment (Investigations, Images and Lab Tests)	3
Infrastructure or resources (Staffing, Facilities, Environment, Lifts)	3
Abusive, violent, disruptive or self-harming behaviour	2
Security (no longer contains fire)	2
Grand Total	78

4.9 Patient Feedback:

4.9.1 GMED received or was involved in 56 complaints, of which 16 were fully upheld and 9 partially upheld. 11 continue to be investigated.

5 Summary

5.1 GMED remains in a strong and steady position. Although there are issues GMED are facing as a service, these issues are being dealt with at both operational and strategic level.

5.2 The Head of Service has been consulted in the preparation of this report and their comments have been incorporated within the report.

6 Equalities, Staffing and Financial Implications

6.1 An equality impact assessment is not required because this report reflects delivery of a hosted service.

Magda Polcik-Miniach GMED Service Manager
NHS Grampian for Aberdeenshire Health and Social Care Partnership