

Capacity and demand on general practice in Waitaha: survey results

More than 200 Waitaha | Canterbury general practice staff took the opportunity to provide feedback about the current capacity of general practice and what is impacting this, through recent surveys carried out by CCN. The responses are guiding the work of the Primary Care Taskforce (PCTF) to enhance models and make changes locally that will reduce the demand on general practice and improve community access to care. It will also be used to advocate to local and national bodies.

This document provides a snapshot of themes collated from the three different surveys (tailored for general practitioners (GPs) (105 responses), practice nurses (PNs) (81 responses) and practice managers (48 responses)).

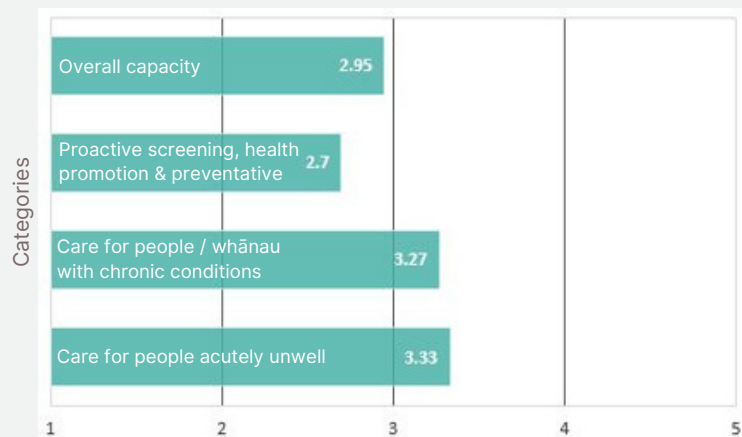


1 GENERAL PRACTICE CAPACITY

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The first section of the surveys asked about the overall capacity of practices to meet demand. It asked what was impacting capacity and how much scope was available for different streams of work.

The graph below illustrates how respondents rated the capacity for the four listed categories.



1-very poor, 2-poor, 3-reasonable, 4-good, 5-very good.

The following areas were commonly identified as impacting capacity:

- Expectation that general practice provide care previously provided in secondary care.
- Increased compliance or administration requirements.
- Referral pathways or healthcare processes that are inefficient.
- Inability to access services for people with complex social and wellbeing needs.
- Ongoing monitoring of people waiting for first specialist appointments and/or planned care procedures.
- Inability to recruit into current vacancies and/or staff retention issues.

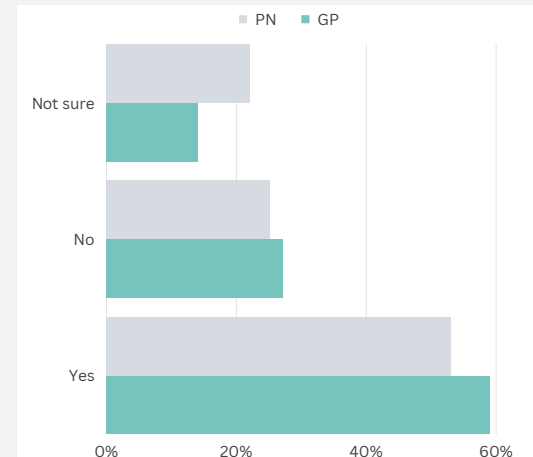


2 WORKFORCE

2

GPs and PNs were asked if they were thinking of leaving or retiring in the next three-five years. Current workforce vacancies and use of non-traditional roles in practice were also surveyed.

The graph to the right illustrates the percentage of GP and PN respondents who are thinking of leaving or retiring from general practice in the near future.



PN respondents identified better pay/pay parity and increased staffing as the two most important factors that would encourage them to stay working in general practice or delay their retirement.

GP respondents identified increased funding for general practice, the ability to shift to part-time hours and reduce administration as important factors that would encourage them to stay working in general practice or delay their retirement.

Incentives to stay in practice

“Financial acknowledgement and respect of the knowledge and skill [needed] to do telephone triage, assessments and management of health crisis, chronic health conditions that take a load of the minimally staffed GP service.”

“...The amount of time spent on paperwork now - managing patients via communication portals and those who can't readily access specialist services is taking about as much time from my week as seeing patients.”



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INITIATIVES THAT INFLUENCE CAPACITY

The surveys asked what has been put in place to manage capacity in general practice. There were questions on inbox management and recommended initiatives.

Inbox management

Twenty one percent of GPs who responded use an alternative approach to managing their clinical inbox.

Respondents listed various roles who manage inboxes, which included PNs, part-time GPs, clinical assistants and pharmacists.

"A semi-retired GP is reviewing outstanding inbox items and taking over letter reconciliation, setting recalls, follow ups etc."

Some respondents working part time described the assurance that someone was managing their inbox on their days off.

"As I [work] part time it gives me peace of mind that any significant unexpected results are often dealt with before I get to them. Ditto simple problems like patients needing candida treatment etc"

More than a third of respondents selected knowledge of clinical or legal (medico-legal) risks and examples of how it has been implemented in other practices would assist them adopting an alternative approach to inbox management.

Changes recommended by respondents

Selection of themes recommended to help with capacity:

- Increasing the number of acute "on the day" appointments.
- Implementing phone triage.
- Employing additional healthcare professionals, such as clinical assistants, pharmacists, nurse practitioners, occupational therapists, and paramedics.
- Training / upskilling staff, such as nurse prescribers, healthcare assistants and administrators to better utilise staff skills and free up GPs/NPs time.
- Specialised portfolios for nurses, such as diabetes with time to run clinics.
- Streamline administration and appointment processes.
- Implementing patient portals.



4

FOCUS FOR TASKFORCE

The final section of the surveys asked where efforts would have the most positive impact on Waitaha | Canterbury general practice capacity in the short term.

Themes most frequently identified by respondents

Workforce recruitment and retention of general practice staff was most frequently stated as an area for the taskforce to focus their efforts by both GPs and PNs.

"Obviously at the moment - staffing. This involves recruitment, retention and focusing on the health and well-being of staff!"

Increasing general practice funding to help with specific needs, (e.g. providing extended appointments for patients with complex needs, providing care previously provided in secondary care and retaining workforce) was the second most frequently stated area the taskforce should focus on. Advocacy for improved funding was also recommended as a focus.

"Advocate for improved funding environment and overall working conditions for general practice."

Other themes included streamlining the interface between primary and secondary care, reducing administration and improving access to mental health services.

CURRENT FOCUS FOR TASKFORCE

- Reducing administration burden - Increasing the uptake of alternative approaches to inbox management by creating a kete | toolbox of resources (e.g. local case studies, information about clinical and legal risks, policies and frameworks) to share with general practice.
- Identify ways to retain general practice staff. A series of focus groups are supplementing the survey information to identify ways to reduce the early departure or retirement of GPs and PNs. Survey and focus group findings will guide our next steps, including how we support other organisations advocating for primary care.
- Exploring ways to increase the involvement of clinical pharmacists in general practice. We anticipate this will involve a webinar and case studies from local clinicians.
- Sharing the survey findings with the Integration Team at Te Whatu Ora about the communication between primary and secondary care and working collectively on streamlining current processes and referral pathways.

Questions? Contact linda.wensley@ccn.health.nz or go to:

ccn.health.nz/Our-Work/Service-Level-Collaboratives/Urgent-Care/Primary-Care-Taskforce