

Silverdale Practice December Newsletter



We fully appreciate that some patients are finding it difficult to access the Practice and we are sorry that is the case.

Our Practice is and always has been committed to providing high quality, safe and timely care to its patient population.

There has been an unprecedented shift in the demand on health services overall and Primary Care services have not been excluded from this.

So what is going on in General Practice?

Whilst there is no clear answer to why General Practice has become such a challenged service, there are numerous contributing factors including underfunding, Covid, issues around recruitment and retention to name a few and our Practice, like so many other Practices, have felt the full force of the challenges. Below are some pointers to what's changed at our Practice:

Over the last 18 months we have seen a reduction in our GPs, due to retirement or career opportunities elsewhere. There is a known national shortage of GPs – and it is difficult to recruit, however we have tried to be innovative with our vacancies and are delighted that we have successfully recruited **3 New GPs, one working remotely and 2 of which will be in Practice**, starting in January, February and March. As previously communicated, Dr Esther Bird is retiring from the Practice at the end of January and we will shortly be letting patients know who their named GP will be going forward. We are also delighted to let patients know that **Dr Santosh Rajkumar will become a Partner** with the Practice early next year.

We have also recently recruited two **Paramedics**, one of whom started with us in November and the other starts in January. Their expertise will further complement our GP workforce and support patients who have acute issues.

In addition, the Practice has an excellent team of Practice Nurses, Health Care Assistants, and Phlebotomist, all offering high quality care in a range of clinics. Due to one of our Health Care Assistants leaving in January, we currently have a vacancy for 16 hours per week, and we will be interviewing for this post week commencing 9th January. Please see

<https://employers.indeed.com/candidates?id=fc197952028a&jpage=1>

Through our PCN, our Practice has a Social Prescriber, who can provide advice and guidance to patients on a range of non-clinical services and a First Contact Physio who is available for patients who have a musculo-skeletal problem.

Other recruitment news and to support our administrative teams, we are recruiting for a part-time **Medical Secretary**

<https://employers.indeed.com/candidates?id=83382e24d680&jpage=1> and 2

Receptionists

<https://employers.indeed.com/candidates?id=bd1a3582987f&jpage=1> to provide more support to our hardworking reception team.

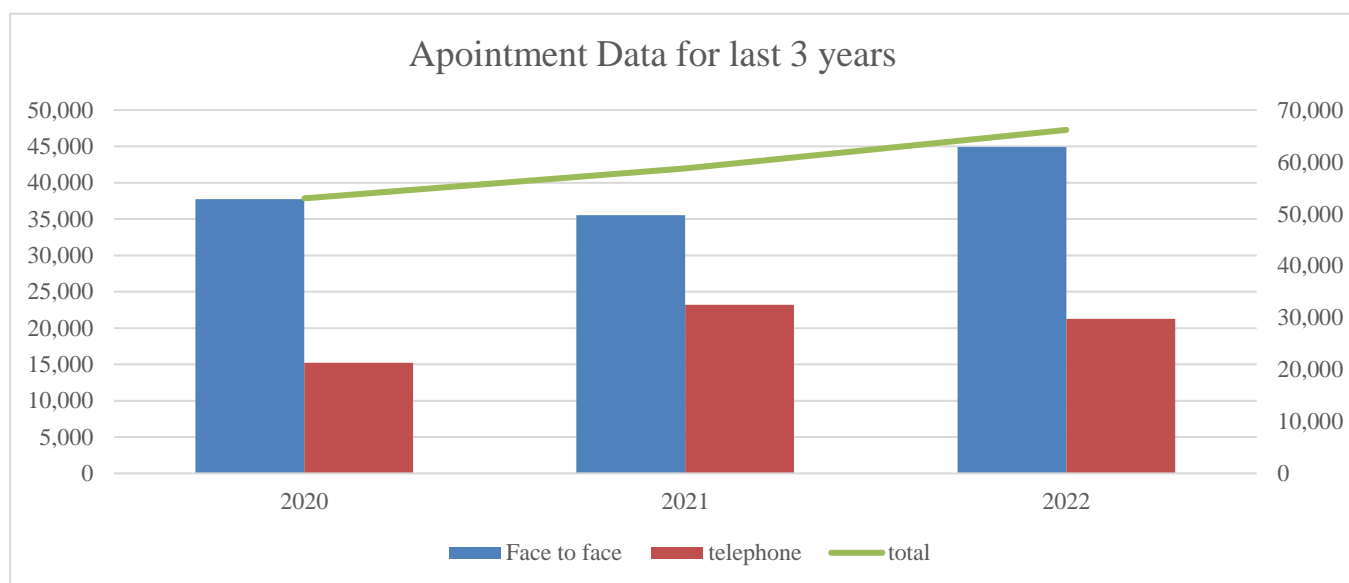
Why does it take so long to get through on the telephone?

We have a dedicated, caring and experienced reception team who do their best every day to answer calls quickly, but it is simply overwhelming. Our current

telephone system does not provide us with the monitoring and data that we require to help us plan our cover, although of course through years of experience we know when the busy periods are. In light of this the Practice has **invested in a new, updated telephony system** which allows for call recording, call monitoring, clinical system integration and automatic call back service for our patients. The system is due to be installed early in the new year and we believe this will greatly enhance our patient's experience of contacting the Practice.

Why don't you have more appointments?

Actually, we do, however the demand is outstripping the increase in appointment availability. The National appointment dashboard provides us with information about the appointments we are providing.



As the graph shows, we are providing more appointments to our patients than in either 2021, or 2020 and this continues to increase. Our face to face appointments make up around 2/3rds of the appointments available. In October and November this year, when the new access to appointment system was introduced, **87% of appointments were face to face.**

We have also introduced LIVI and eConsults which provide more access to appointments for our patients. Our PCN, Burgess Hill Villages Primary Care Network also provide access to additional appointments outside of our normal working times, which includes evenings and Saturdays.

AND PATIENTS CAN HELP US TO HELP THEMSELVES

Before calling for an appointment, check if there's another way of dealing with your issue. Can a Pharmacist help? Is it urgent – contact NHS111 or attend the Emergency Department at the local hospital. Have you checked out The NHS website - [The NHS website - NHS \(www.nhs.uk\)](http://www.nhs.uk) where there are lots of advice and guidance on a range of conditions?

Please remember we are not an EMERGENCY service. If your issue is urgent and/or life-threatening don't delay – call NHS111 or go straight to the Emergency Department at the local hospital.

When is this all going to improve and get back to normal?

We have all got to understand that going back to normal is not going to happen. What we can do, however, is to continue to plan for a new normal and continue to make improvements.

- We are continuing to advertise for clinical staff, including GPs.
- We are advertising for nursing staff.
- We are having on-going discussions with the Integrated Care Board, the Council and Land Developers about our accommodation and how we can improve on that with a new build.
- We are constantly looking at different ways of working to help with the huge demand.

We hope the above information goes some way to help our patients understand the current situation within the NHS, primary care and the Practice specifically.