The fragility of GP Out of Hours services in Wales
Accessible formats

If you would like this publication in an alternative format and/or language, please contact us. You can download it from our website or ask for a copy by contacting our office.
# Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page number</th>
</tr>
</thead>
<tbody>
<tr>
<td>About Community Health Councils</td>
<td>4</td>
</tr>
<tr>
<td>Introduction</td>
<td>5</td>
</tr>
<tr>
<td>What we did</td>
<td>5</td>
</tr>
<tr>
<td>What we found</td>
<td>5</td>
</tr>
<tr>
<td>Learning from what we found</td>
<td>7</td>
</tr>
<tr>
<td>Our recommendations</td>
<td>7</td>
</tr>
</tbody>
</table>
About Community Health Councils

This report has been produced by the Board of Community Health Councils on behalf of the 7 Community Health Councils (CHCs) in Wales.

CHCs are the independent watch-dog of NHS services within Wales and we seek to encourage and enable members of the public to be actively involved in decisions affecting the design, development and delivery of healthcare for their families and local communities.

CHCs seek to work with the NHS and inspection and regulatory bodies to provide the crucial link between those who plan and deliver the National Health Service in Wales, those who inspect and regulate it, and those who use it.

CHCs maintain a continuous dialogue with the public through a wide range of community networks, direct contact with patients, families and carers through enquiries, our Complaints Advocacy Service, visiting activities and through public and Patient surveys. Each of the 7 CHCs in Wales represents the “Patient voice” within their respective geographical areas.

CHCs routinely monitor the performance of NHS services in their area as well as respond to service developments and changes.

This report brings together our collective concerns about the reliability of out of hours GP services across Wales.
**Introduction**

During 2017/2018 CHC’s across Wales became concerned about the increasing fragility of GP services provided ‘out of hours’ through our continuous engagement with health boards.

As well as routine reports about out of hours performance to public board meetings and the range of committees that support it, health boards have specifically informed CHCs about their need to take urgent action when they are unable to provide a normal service.

**What we did**

CHCs worked together to consider the scale of the challenges across Wales and the actions being taken by health boards to address them.

We considered the documents published by health boards which set out what they were worried about in terms of the out of hours services they were responsible for, and what actions were being taken to make improvements.

**What we found**

We found that every health board in Wales had identified for themselves that out of hours services are fragile. Most health boards reported that there were not enough GPs to deliver the service consistently.

This is because of their difficulties in recruiting GPs to deliver out of hours services and the number of shifts GPs are prepared to cover.

Health boards identified a range of factors that they felt contributed to this situation. This included:

- Increasing demand, particularly when people struggle to get an appointment ‘in hours’
• Changes to the way in which the tax system works for GPs providing the service

• Differences in pay arrangements between health boards

• Increased choice for GPs in what services they cover because of GP shortages.

Health boards report that they are working to address the challenges in a number of ways. Examples include:

• Increased involvement of other healthcare professionals in providing the service

• Exploring regional working

• Providing contracts to GP so that they can carry out initial assessments by phone from their own homes

• Roll out of the new ‘111’\(^1\) service

• Reviewing the way in which they recruit GPs

• Reviewing how GPs are paid for providing out of hours services, including bonuses for covering particular shifts and one off payments to encourage GPs to their areas.

Health boards did not report to the public on GP Out of Hours performance in a consistent way. Health boards report in a consistent way to the Welsh Government on their performance against national standards for out of hours services.

\(^1\) The 111 service is currently available 24 hours a day, seven days a week in Swansea, Neath Port Talbot, Bridgend and Carmarthenshire, and you can use it both for health information and advice and to access urgent care [http://www.was-tr.wales.nhs.uk/Default.aspx?pageId=315&lan=en](http://www.was-tr.wales.nhs.uk/Default.aspx?pageId=315&lan=en)
Learning from what we found

Despite taking a range of actions to address the challenges, health boards have not made any significant and sustained progress and the situation across Wales remains fragile. The proportion of GPs in any area who undertake out of hours shifts remains small.

Further, in some cases, the actions identified risk shifting the problem to other NHS services or other geographical areas.

The solution lies in the NHS in Wales working together to improve GP out of hours services in a way that responds to what’s important to people.

Our recommendations

The Welsh Government and the NHS in Wales should work together to:

- Engage with people about the future of GP out of hours services to find out what’s important to them

- Design new ways of delivering out of hours care (people and places) in response to what’s important to people in a way that’s safe and accessible

- Agree how GPs are paid to provide out of hours services to avoid competition between geographical areas

- Look again at the way the Medical Performers list is managed to enable GPs from England to work in Wales with minimum delay where it is safe for them to do so.

- Consider the best way of contracting with GPs to ensure people have access to GP services whenever they need it

- Avoid perverse impact on other services.
In response to our findings, the Welsh Government has told us that:

“the challenges faced by LHBs in managing their OOH services has indeed increased in recent months and it is high on the agenda both for Chief Executives and their Directors of Primary, Community Care and Mental Health.

I am pleased to be able to tell you that many of the recommendations made in the report are already being taken forward and the roll out of the NHS 111 Service pan Wales has recently been announced by the Cabinet Secretary for Health and Social Services. Regional working and moving from a GP OOH service to a primary care service operating out of hours, supported by a wider range of multi-disciplinary staff is key to the transformational work which is underway.”

CHCs will monitor these developments.