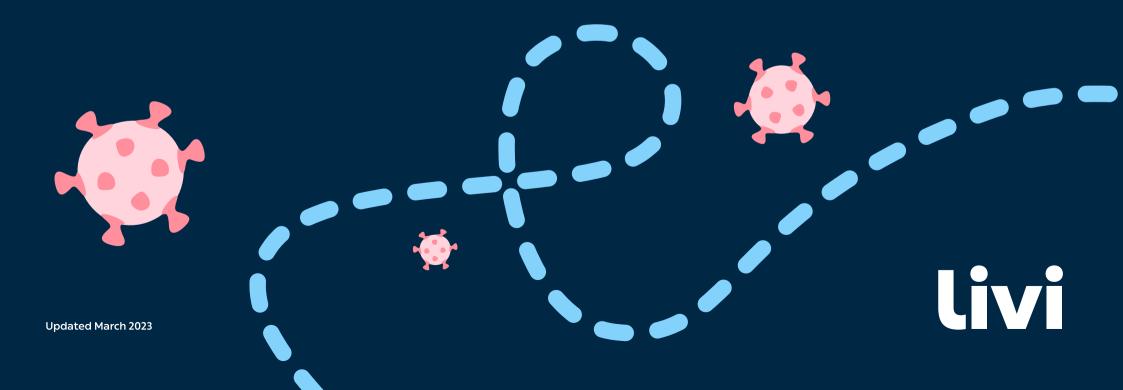
How has Covid-19 shaped General Practice?

Surveying the experiences of those working on the frontline



Introduction

The past few years have seen general practice go through a period of tumultuous change. Already under tremendous pressure prior to the pandemic, GP surgeries had to adapt to new ways of working at speed during Covid-19 at a time of national crisis.

As the bedrock of the NHS, general practice showed unwavering resilience, not only supporting rollout of Europe's fastest vaccination programme, but also providing more appointments than ever before.

The impact of Covid is still being felt across general practice today. Teams continue to grapple with increasingly complex patient needs, pent-up demand and appointment backlogs. Combined with ongoing capacity and workforce shortages, general practice is fighting battles on many fronts. It is a time of unprecedented demand. In 2022 alone, GP practices provided 342 million appointments. While the cost of living crises poses a new challenge.

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Two years on from the last national UK lockdown, we wanted to find out more about how the pandemic has shaped general practice from those working on the frontline. We asked GP practices to reflect on the changes they have experienced over the last few years and how they have affected ways of working today.



Methodology

Livi commissioned a qualitative survey through Practice Index. We surveyed over 75 practice leaders, gathering a range of insights in three key areas:

- How has patient interaction changed?
- How has collaboration with colleagues changed?
- How do practice managers believe life can be made easier?

This report presents the contrasting views and opinions we received.





01 How has patient interaction changed?



32% of practice managers believe patients now have a greater service expectation, as a result of increased access 40% of practice managers feel patient interaction has increased via access to mediums such as website/online triage

"We are more accessible via online methods than ever before and yet are receiving more complaints about perceived lack of access than ever before."

The way patients access primary care transformed almost overnight as a result of the pandemic. Adoption of remote consultations and digital consulting on a national scale became widespread as the UK entered a period of successive lockdowns and restrictions. Today, patients can now interact and access care via digital channels more easily than ever before. Indeed, our research found 40% of practice managers feel patient interaction has increased via access to mediums such as website/online triage.

"We now interact with patients in many more ways," summarised one. And respondents all noted greater use of digital and telephone consultations, text messaging, surveys and online triage as well as increased use of emails. Some practices were found to be at different stages of adoption. One team noted how they had fast tracked use of IT, social media and telephone consulting at the start of the pandemic. While others had already introduced a telephone system a few years before.

Elsewhere, practices were just beginning to utilise their website in new ways. For example, allowing more patients to make contact via online forms.



Impact of digital platforms

In terms of impact, respondents noted more "efficient" patient interactions and triaging as a result of additional virtual choices, with some patients happier with the mix and increase in available appointments.

"More patients are used to consulting with us electronically and are capable of sending in high quality photos so that if appropriate, diagnoses can be made over the telephone," said one surgery. "We have changed our appointment systems to accommodate it, and this really suits our demographic of patients."

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Teams now using a blend of digital, telephone and face-to-face consultations shared some positive experiences, including how it had enabled information to be gathered for "a more rounded record of a patient's overall health."

Additionally, one team highlighted how digital had enabled them to keep in touch throughout the patient journey from the very first contact, up to the point of discharge.

Others pointed to the speed of the digital rollout and new ways of working as leaving "a positive legacy."

It was felt that the pandemic had made such changes a necessity, removing bureaucracy and speeding up a process "which would have taken years to implement and get everyone on board."



Rising patient expectations

Practices also spoke of a developing culture where a small minority of patients were less inclined to wait for services.

32% of practice managers believe patients now have a greater service expectation, as a result of increased access.

As to the cause, one respondent noted how the height of the pandemic may have accustomed patients to a quicker service, which, in effect, had led to growing impatience today. While others cited a release of pent-up demand as a contributing factor, post restrictions.

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One practice said, "Patient demand has gone through the roof. Patients want everything now." And another commented, "As restrictions lift, the demand is getting hard to deal with everything and we are slowly moving routine things to be dealt with on a rolling system."

Multiple practices noted instances of patients being rude or abusive. Patient anxiety and worry was also a recurring theme and had increased demand for appointments for issues that could be dealt with elsewhere.

This, in the words of one practice, "has put pressure on the surgery as a whole because patients are using us as an urgent care centre or expect us to be operating like a GP surgery would 20 years ago." It was also noted how waiting patients who were unable to access referrals or speak to hospitals had led to additional expectations on primary care, as well as complaints.

Conversely a few practices had experienced the opposite, noting how patients had "stayed away" in the belief that their surgery was no longer taking face-to-face consultations.

Here, there was a perception that "we are closed, despite seeing more than 70% faceto-face." As a result, this practice had implemented new ways to reach out and communicate to patients.

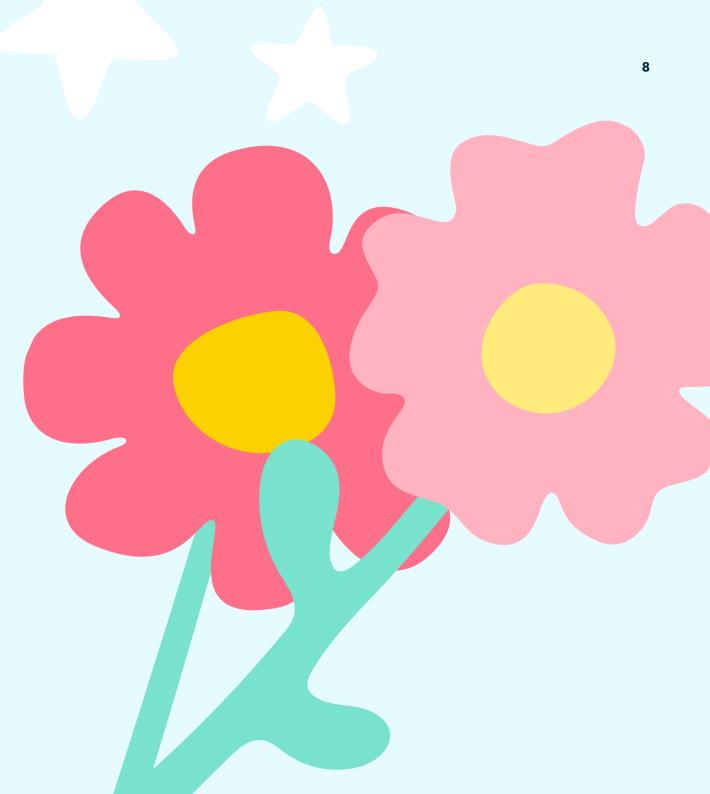
Appreciation

Teams also shared positive interactions with patients and heart-warming stories of appreciation.

Patients had given food, gifts, compliments and letters of thanks which kept many teams going. While a greater community spirit and "pulling together" to deliver medication to those in isolation was observed in some instances:

"We received lots of cards and notes thanking the practice for their work and handmade crafts such as a keyring saying NHS angels. There is one gentleman who still brings tea and coffee supplies for us every month. This has proved that we are doing a great job and that the practice is respected by our patients."





02 How has collaboration with colleagues changed?



60% of practice managers feel remote working has enabled greater transparency and better ways of working



"Collaboration has improved. Throughout the lockdowns our colleagues became our only social interaction outside of our homes." -Survey respondent

"We are closer as a team, having pulled together through a very difficult time."

Just as the pandemic necessitated a seismic shift in how patients interact with general practice, a similar shift occurred within primary care itself.

That shift transformed how GPs and their teams interact and collaborate with each other daily. And emerging primary care networks (PCNs) would see GP practices begin to work in unison with community, mental health, social care, pharmacy, hospital and voluntary services.

Respondents to our survey observed closer working within teams at an individual practice level. "Collaboration has improved. Throughout the lockdowns our colleagues became our only social interaction outside of our homes," remarked one surgery. Practices noted how staff had made a greater effort to support each other as demand continued to grow.

Teams also reported feeling overloaded at points, citing impacts on mental health and low morale which affected relationships. Unsurprisingly, excessive patient demand was said to be a barrier to collaboration here as "existing relationships have been tested and new ones difficult to develop."

Increased digital working

As with patients, responses highlighted increased digital interaction between primary care teams.

With practice meetings transitioning to online platforms, some found the transition to be challenging at first, before growing accustomed to it. One respondent explained, "Initially there was more separation, but gradually we got used to this way of working."

Noting a positive impact, digital working was described as being "different, but easier," with changes made during the pandemic continuing for some, such as daily meetings with clinicians taking place online. Other positives of digital working included improved resilience and working more efficiently. Digital platforms had ensured regular contact and enabled staff to attend events which would have previously required face-to-face attendance.

60% of practice managers feel remote working has enabled greater transparency and better ways of working.

One practice said, "There are less face-toface meetings but actually it has meant working smarter which has improved collaboration with colleagues especially those outside of the practice." However, a small number of practice managers mentioned missing face-to-face interaction, citing less opportunities for colleagues to network and social conversation. Building rapport with new colleagues was also said to be more difficult.



Primary care network collaboration

Practices observed increased collaborative working within PCNs as vaccine programmes brought them closer together. Team working was said to have improved greatly, with daily digital meetings with PCN colleagues taking place:

"It's massively improved collaborative working as we worked with four other PCNs across the city to deliver the vaccination programme. This level of collaborative working would not have happened if not for the pandemic. It has resulted in us continuing to work closely with two of the PCNs." Digital was also cited as a key factor for enabling joint working across teams spread out over localities.

This included an increasing number of people attending meetings without needing to physically travel to a location. Others highlighted working as a "whole team" with daily huddles, camaraderie and sharing of Netflix recommendations. "I could not be prouder of our team," said one respondent.

Some PCNs had also found new ways to collaborate through digital technology, implementing video group consultation services across their network.

Delays in referrals

Other practices observed reduced collaboration and communication within the wider health system.

"With community and secondary care colleagues, things have unfortunately deteriorated," said one. "There's much more prevalent rejection of referrals and GPs being left to manage patients for longer without input from their secondary care colleagues."

A notable experience shared included patients undergoing pre-op assessments and awaiting dates for operations six months later with no feedback on timescales or updates. Elsewhere, other respondents highlighted how increased expectations had been placed on primary care to see patients face-to-face because other services were unable to do so.

03 How do practice managers believe life can be made easier?



87% of practice managers feel prior/advanced communication from the government during the pandemic would have resulted in better practice management





"We took one day at a time and by pulling together we knew we would get through it. We are still taking one day at a time."

We asked practice managers what could have been done differently during the pandemic, and any changes that would make practice life easier in the future. Teams consistently noted improved communication and more timely information from central authorities.

87% of practice managers feel prior/ advanced communication from the government during the pandemic would have resulted in better practice management. Respondents cited information often being slow to come by, reaching the media and general public before GP surgeries could react. That information extended to both changes in guidance as well as the vaccination drive. As a result, teams shared experiences of working weekends and finding out changes on TV or via radio broadcasts en route to work.

One practice manager remarked, "Communications from NHS England or the government have primarily been broadcast via TV or social media, before we have been told at the practices of any changes." Others similarly noted feeling on the backfoot and not having enough time to plan or react to questions from patients.



Consistency and accuracy of message

Teams believed messaging and policy could have been made more consistent, clear and accurate. Comments pointed to a range of issues including mask wearing and what patients should contact primary care for.

Regarding the latter, respondents cited the role of the media in causing unrealistic patient expectations about access to GP appointments. While within the NHS, one practice wanted to see information relayed more efficiently to prevent overload:

"I think all information should have been sent to one team and then forwarded to the GP teams. As the overload of emails and information you had to read was unreal and repeated or not appropriate. But we had to read it just in case."

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Resources

Access to resources was also highlighted. PPE shortages were said to have caused anxiety and equipment should have been available at the outset of the pandemic at a lesser cost.

In addition, some GP surgeries explained how they were not equipped for home working with limited access to laptops. This had led to a scramble to get set up as the nation went into lockdown in March 2020.

"If we had the ability to facilitate home working far earlier than we did, that certainly would have helped in the beginning," noted one practice manager. "What actually happened was that all different practices were exploring different companies that enabled staff to work remotely."

Indeed, our survey found that 25% of practice managers feel greater training resource/budget is necessary so all staff can use/adopt technology.

Understanding

In response to unfortunate instances of abuse from patients, teams requested greater support.

One survey respondent explained how a national "Be Kind" campaign in the early stages of the pandemic would have helped. While other practices asked for ongoing education of patients and greater understanding of the demands on general practice and how it has had to adapt.

On improvements that could be made, a practice manager remarked, "Patients being educated to understand what actually happens in general practice. We're not on the golf course, we're working flat out. They need to understand this."

Mental health

With increased demand, multiple respondents noted instances of staff burnout and impacts on mental health. And increased staff sickness due to Covid-19 was said to have put an even greater strain on already stretched teams.

Practice life would be made easier, if, in the words of one respondent, "teams could reassure patients that even though most appointments are via telephone, they are still receiving the same standard of care." While others similarly noted worrying about staff wellbeing, calling for mental health services to be more involved and proactive.

Some teams spoke of a greater focus on recognising staff wellbeing as a result of the pandemic, and making adjustments to support work-life balance. This had led to greater flexibility in work patterns and location in some GP surgeries.

Feeling valued

Multiple practices asked for increased updates and support from both NHSE and government, including a better understanding of the reality for general practice employees and GPs from health sector leaders.

One practice leader called for "greater efforts from NHSE to explain why we are in our current situation, and why we are busier than ever."

Others similarly requested a public message from government to highlight difficulties faced by staff and rising expectations. More support at ICB level was also noted, alongside a recognition of achievements and "that primary care is valued."

Conclusion

Reflecting on responses we received in all three areas reveals some contrasting experiences as well as some consistent views.

Expectedly, practice managers reported a shift in patient interaction to digital platforms. The speed at which this occurred was said to have left a positive legacy and would have taken years to implement prior to Covid-19.

With that shift came positives including more ways to engage patients and a blended approach to appointments. Some teams noted increased efficiency and how virtual appointments had offered a better fit for their population. Increased patient interaction also came with increased expectations. This has seemingly created a paradox, as in the words of one respondent, "we are more accessible via online methods than ever before and yet are receiving more complaints about perceived lack of access than ever before." This also comes at a time when GP surgeries face renewed pressure to increase access even further.

Indeed, practices across the board noted the strain of working around the clock to keep up with patient demand. With that demand, has come some unfortunate instances of abuse directed at practice staff, as well as stories of greater appreciation from patients echoing the public "Clap for Carers" movement of 2020. Within practice teams, collaboration improved in many areas as teams worked "together alone". Digital platforms saw teams working remotely leading to greater transparency and better ways of working for some. While others missed the social interaction of traditional practice life.

At a wider system level, PCNs came together to roll out vaccination programmes. Consistently, responses highlighted increased collaboration that would not have taken place prior to Covid-19.

Looking forward, practices have highlighted communication as a key area of focus. Both in terms of demands for consistent, accurate and more timely flow of information from government, NHSE and the wider health system. Teams have requested greater efforts to recognise current pressures on general practice alongside a concerted campaign to improve patient understanding.





About Livi Practice and how we can help

To support GP practices working through unprecedented demand, Livi Practice provides a consistent, standardised solution for digital primary care capacity.

Our service delivers remote consultations direct to both practices and PCNs, easing pressures and helping patients access the right care at the right time.

We work as a digital extension of practice teams, mirroring pathways, formularies and existing ways of working. Bookable appointments are integrated within the practice clinical system, making it as easy as booking an appointment with an in-house clinician. Our GPs can refer, provide fit notes and prescriptions and are experienced NHS clinicians. Whether it's cover to meet surge demand or year-round resilience, we can help.

What our partners say:

"It's taken the burden off the rest of our GPs because of the additional capacity from Livi."

- Hazeldene Medical Practice

"A huge benefit of Livi is how it works within EMIS. It's just like booking with our own doctors. It really helps." - Woosehill Medical Centre

"Short notice additional capacity was often requested and Livi pulled out all of the stops with the scheduling team to deliver additional capacity." - North Yorkshire CCG

Need support?

Talk to our team today on partnerships-uk@livi.co.uk Visit: <u>www.livi.co.uk/livipractice/</u>