



HEALTH SCRUTINY PANEL

FINAL REPORT FOLLOWING THE REVIEW OF OUT OF HOURS

EXECUTIVE SUMMARY

1. As a result of significant NHS changes since 1997, General Practitioners (GPs) now work under a new contract of employment, negotiated between the British Medical Association (BMA) and Department of Health.
2. A significant element of the new GP contract relates to the provision of Out of Hours services and the responsibility for such service provision. Out of Hours is essentially everything outside 8am to 6pm Monday to Friday, including bank holidays.
3. Traditionally, local GP practices were responsible for the provision of Out of Hours services. As a result of the responsibility sitting at such a level, services across any given area were fragmented, with some GPs providing the service and other GP practices choosing to commission other parties to provide the service in their given area.
4. Under the new GP contract, Primary Care Trusts (PCTs) now have the responsibility to provide Out of Hours services to their population they serve.
5. Middlesbrough PCT, together with the other Tees Valley PCTs, jointly commissioned an out of hours service from an independent sector organisation called Primecare. The contract to provide the Out of Hours service began on 1 April 2004 and runs until summer 2007.
6. With this backdrop in mind, the Health Scrutiny Panel thought it would be a good juncture to conduct a review into the effectiveness of the service.

Introduction

7. In its investigation of the topic at hand, the Health Scrutiny Panel's work was directed by the following terms of reference.

7.1 To investigate the effectiveness of the current out of hours service.

Specifically

7.2 To investigate how the service is provided and managed.

7.3 To investigate how the service is performance managed and lessons learnt implemented.

7.4 To establish how the service is performing against local or national targets and/or standards.

7.5 To investigate the views of stakeholders in relation to the service

7.6 To investigate whether there are any improvements that can be made to the service.

Conclusions

8. The Panel concludes that the recent changes to the Out of Hours service have been beneficial to the local health economy. On the balance of the evidence received, the Panel concludes that it is also safer than previous practice and provides a better service.

9. Firstly, it is a positive development that the PCT now has the statutory responsibility for the service. The Panel believes that the PCT is much better placed to ensure that the service is provided consistently across Middlesbrough and much better resourced than General Practice to ensure that the service provider meets their contractual requirements.

10. Secondly, the Panel concludes that the recent changes to Out of Hours services are of benefit to General Practitioners. The fact that General Practice can now 'switch off' at a certain point every day is a positive development. The Panel holds the view that exhausted General Practitioners seeing 'day time patients', having being awake and seeing patients throughout the night would not be of benefit to anyone, nor would it be particularly safe.

11. The Panel concludes that the during the triage process, there is a potential danger of there being too many 'hand-offs' until the caller can speak to the professional most appropriate for their complaint. The Panel is concerned that this may lead to people short-circuiting the system and engaging directly with Accident & Emergency, which would cause undue stress on Accident & Emergency services, as well as extra expense for the PCTs, especially given the advent of Payment by Results.

12. The Panel is concerned that at this stage, there does not appear to be any specific provisions in place for the Out of Hours service when

dealing with patients with a long term chronic condition. The Panel understands that safeguards have to be in place to protect the integrity of the system, nonetheless the Panel feels that some regard should be paid to this cohort's expertise in relation to their own illness. The Panel does not feel that treating this cohort in an identical fashion to all other Out of Hours callers is productive or desirable.

13. The Panel is aware that the Out of Hours contract is due for renewal in 2007. The Panel concludes that it would be a welcome development for the Patients Forum attached to the PCT to be involved in the discussions about the criteria to be set for any bidding organisations in relation to the new contract and its eventual awarding.

Recommendations

14. That the PCT, together with partner organisations, considers whether it can make any changes to the triage process to eliminate any 'hand-offs', (unless strictly necessary) a caller may receive before accessing the necessary service. It is recommended that this be considered as vital when considering the desired criteria for a successful bid for the new Out of Hours contract in 2007.
15. That the PCT, together with partner organisations, reconsiders how the Out of Hours service manages its contact with patients suffering from long term chronic conditions. The Panel holds the view that this cohort represents a different group of patients, which has specific needs and expertise in relation to their condition. Accordingly, those needs and that expertise should be taken into account by the service. It is recommended that a plan for dealing with those with long term chronic conditions be required to be included in any bids for the new Out of Hours contract in 2007, that incorporates appropriate patient pathways, together with appropriate safeguards.
16. That the PCT, together with partner organisations, proactively engages with the Patients Forum and other appropriate groups to get their input in relation to the criteria needed for a successful bid for the Out of Hours contract when it is renewed in 2007.
17. It is recommended that in moving towards the establishment of a process for the awarding of the contract in 2007, the PCT conducts its own survey of Out of Hours users to establish the levels of satisfaction. This will ensure that the PCT is more aware of service performance ahead of the contract being due for renewal.