Meeting urgent needs: improving out of hours services in Wales

The Royal College of General Practitioners Wales (RCGP Wales) believes urgent action is needed to improve primary care out of hours services. Weaknesses in services exist right across Wales, which are already affecting patient care.

A report by The Board of Community Health Councils in Wales – an independent NHS watchdog – revealed that every health board in Wales identified their out of hours services as fragile. A report by the Wales Audit Office found that out of hours services are under strain and not meeting national standards on timeliness, along with weaknesses in local health board and Welsh Government leadership arrangements.

Gaps in rotas and services being unavailable are increasingly common.

What are out of hours services?
This describes the period when general practice services are normally closed - between 18.30 and 08.00 every day and from 18.30 Friday until 08.00 Monday including Bank and Public Holidays.

Outside of these times, patients needing urgent but not emergency care should use out of hours services.

Urgent care covers illnesses which require prompt attention but are typically not of such seriousness to require the services of an emergency department. However a significant percentage of patients contacting out of hours services require a swift response due to serious symptoms.

Emergency care requires an immediate response to a time-critical healthcare need for those with serious or life-threatening symptoms.

Out of hours services need to provide a safe working environment for staff and a timely response to patients. At present, GPs and other out of hours staff go above and beyond to try to make things work in extremely difficult circumstances. This is not sustainable. Things need to change; services need to be safe and pleasant places in which to work. Services trying to function without staff, compromise patient care and increase pressure on emergency departments.

RCGP Wales has consistently highlighted the problems with out of hours services, offering constructive solutions that would lead to improvements. These need to be acted on, with local health boards and Welsh Government prioritising these vital services.
Here are 5 simple steps that would help deliver a service that is safe for patients and attractive to staff:

1. **Answering the phone**
   All too often people picking up the phone to call out of hours services are faced with lengthy waits to speak to anyone. This often leads to people hanging up and accessing other services, including calling 999 or going to A&E. There needs to be an urgent increase in the number of call handlers. A clear target for call abandonment rates already exists; it needs to be strictly enforced with steps in place to ensure it is met.

2. **Seeing the right person at the right time**
   A primary care out of hours service must make use of a variety of healthcare professionals, with GP leadership at its core. Staff such as advanced nurse and paramedic practitioners, pharmacists, community psychiatric nurses and palliative care nurses can bring valuable expertise. National training days for multidisciplinary staff would help consolidate skills and provide peer support. Wales needs to move away from out of hours GPs dealing with things like dentistry (which GPs are not qualified to provide) and urgent repeat medications (provision already exists for this to be obtained from pharmacy, but GPs often still deal with it). Patients need to see the right person at the right time, with GP supervision for multidisciplinary staff.

3. **Making use of technology**
   Wales must make better use of technology. Some services are already allowing clinicians to work from home, providing remote advice and treatment to patients. This needs to be expanded to all out of hours services in all operational periods. It must be easier for patients to share photos with clinicians remotely – a photograph of a rash or other area of concern can be of great clinical value. Good practice already exists in parts of Wales and should be rolled out more widely.

4. **Clear national guidance**
   A national governance framework needs to be established. Clinicians need clear guidance to work to, protecting and supporting clinicians in this high-risk environment. Working conditions and remuneration policies need to reflect the antisocial nature of the hours and the high-risk high-stress nature of the work.

5. **Addressing the wider issues**
   Every unwell patient that GPs support in the community rather than admitting to hospital, has medical and care needs impacting further on GP and community services. Additional resource must be provided to surgeries – and to services such as district nursing and social care – in order to provide this. The roll out of the 111 service and the continued integration of health and social care gives an opportunity to make this happen, but it is essential that resource is provided to alleviate the pressures on in-hours general practice and ensure problems do not spill over into the out of hours period. Wales has fewer GPs dealing with an ever more medically complex and ageing population. Patient need will only be met if general practice is strong.