

# GP Survey Scottish Findings



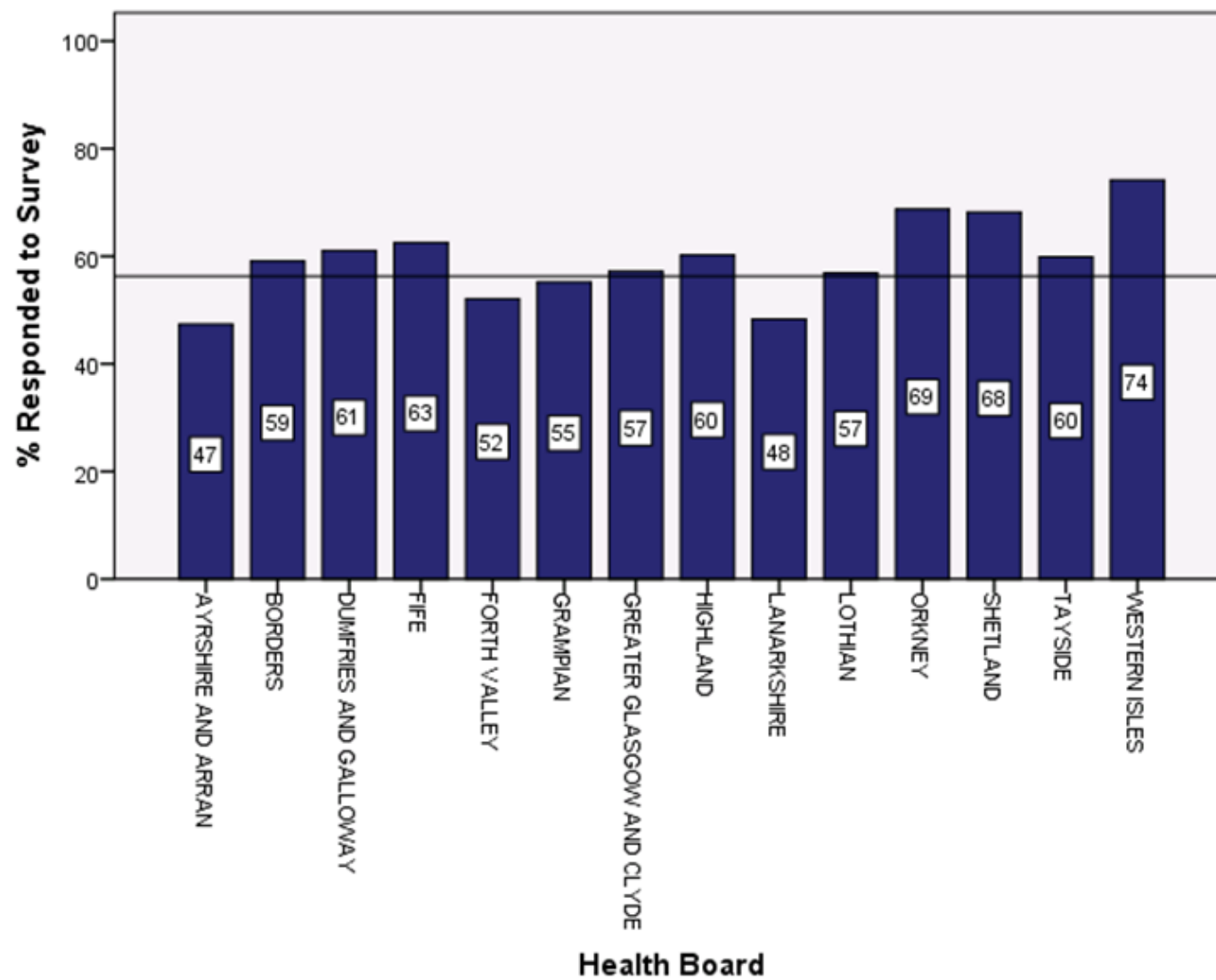
Stewart Mercer  
Director Scottish School of Primary Care



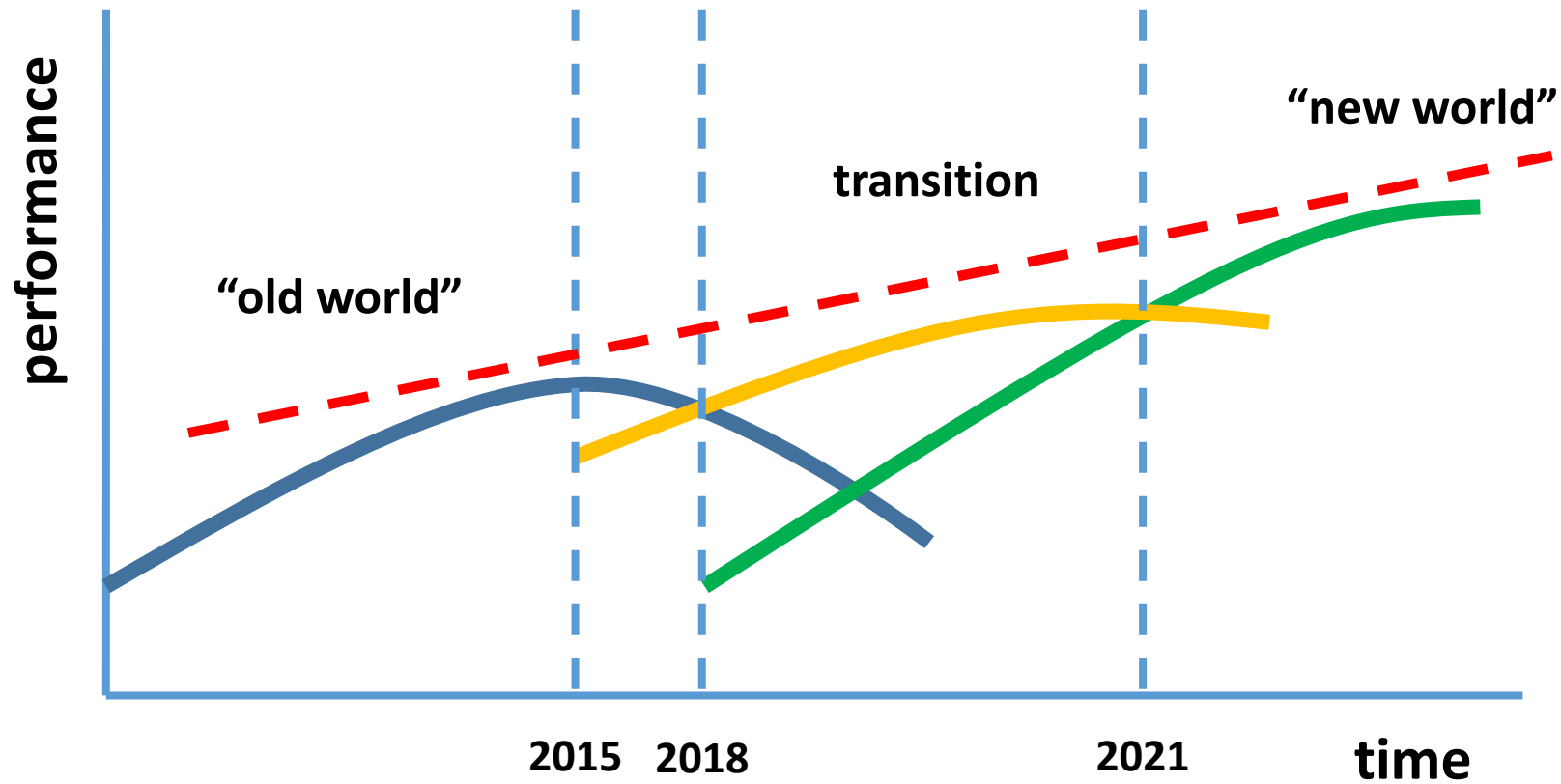
# Survey sent to all GPs in Scotland

- Core questions same as in recent English survey (2017) and previous GP job satisfaction surveys in England and Scotland
- Additional 'tartan' questions on GP Clusters and the Scottish new GP contract
- Response rate of 56% of GPs (88% of Practices in Scotland)

# GP response rate by Health Board



# Transforming primary care



From a prescriptive contract to an enabling contract

# Background to GP Cluster Development in Scotland

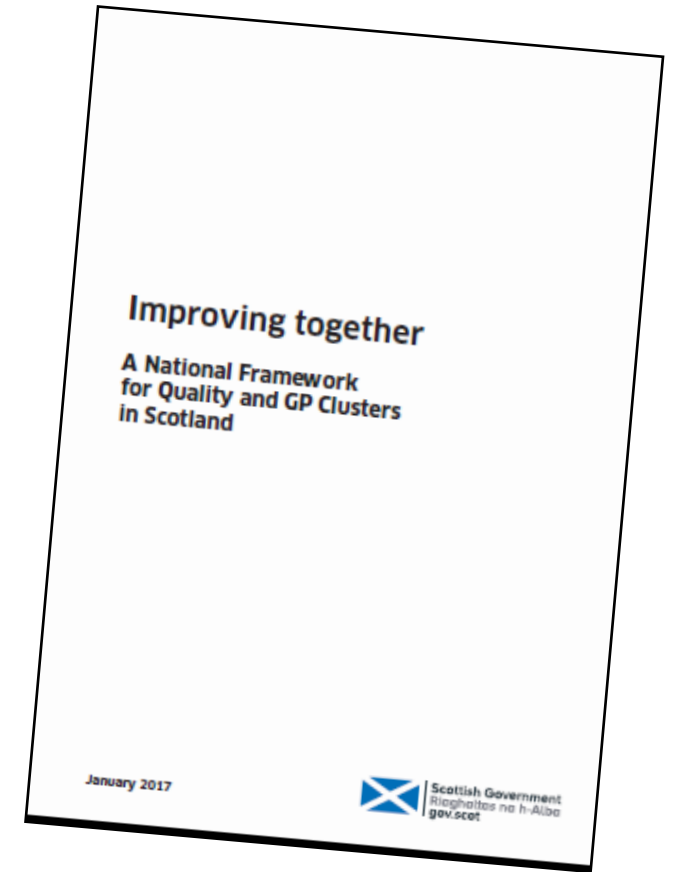


# Improving Together : A National Framework for Quality & GP Clusters in Scotland



Improving Together Launch event 23<sup>rd</sup> February 2017

‘..is a step change to the approach for continuously improving the quality of care offered to citizens and to improving the health & well being of the Scottish population’



# Improving Together : A National Framework for Quality & GP Clusters in Scotland

**The framework is based on the Juran Trilogy processes of;**

- quality planning
- quality improvement
- quality control

**The key components that GP clusters would need support with were identified:**

- data and health intelligence
- tailored facilitation
- improvement advice
- learning and improvement tools
- evaluation and research
- leadership and networking

# GPs views on Clusters

- Cluster Quality Leads (CQLs) and Practice Quality Leads (PQLs) views
- Views of all the GPs who responded



# Cluster Quality Leads (CQLs) and Practice Quality Leads (PQLs) views on cluster meetings

## Hours per month

- CQL median = 8 hours
- PQL Median = 4 hours

## Number of Cluster meetings per year

- Median = 8 meetings
  - 6 or less = 42%
  - 7- 12 = 58%

## For GPs only?

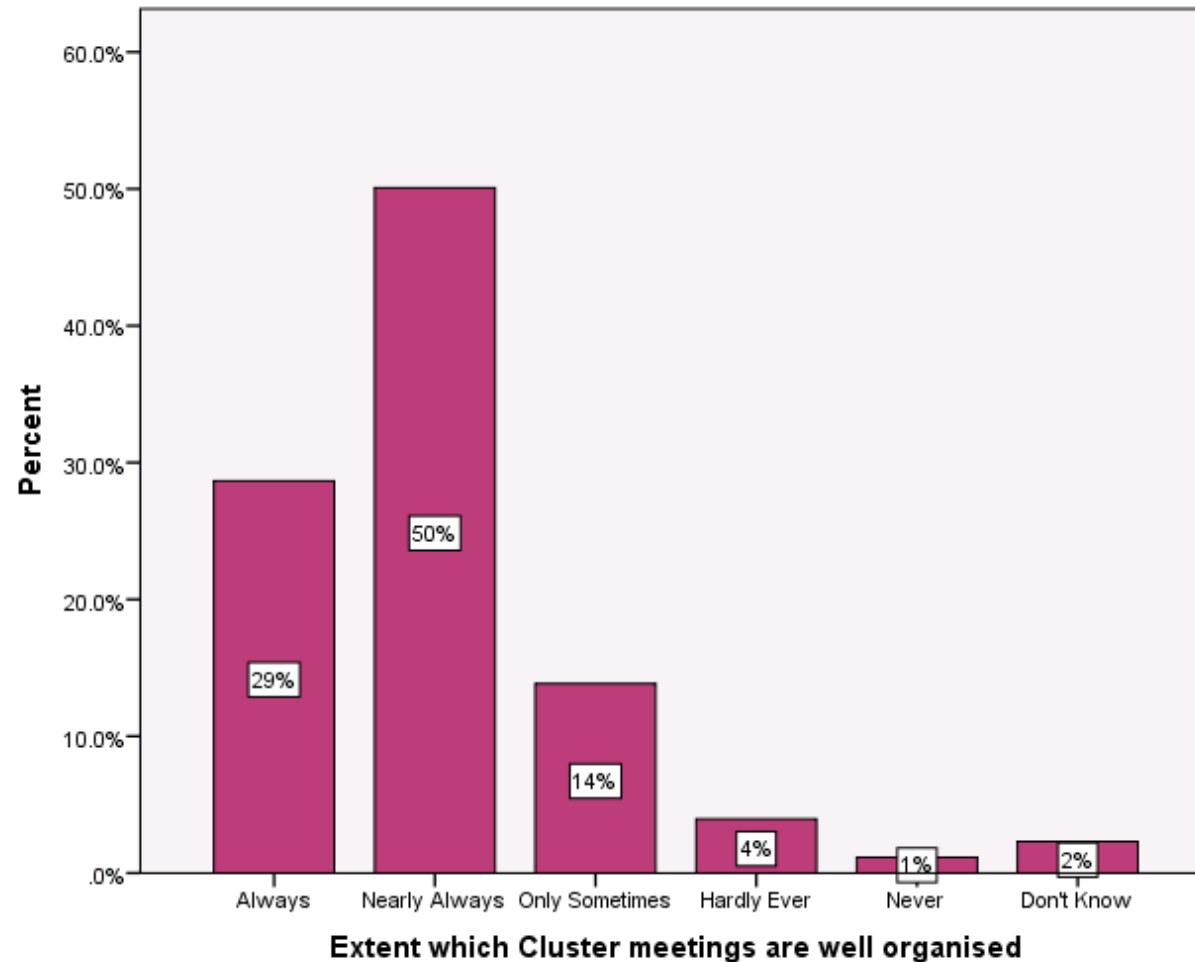
- Yes = 60%

# CQL/PQLs views on Cluster Meetings

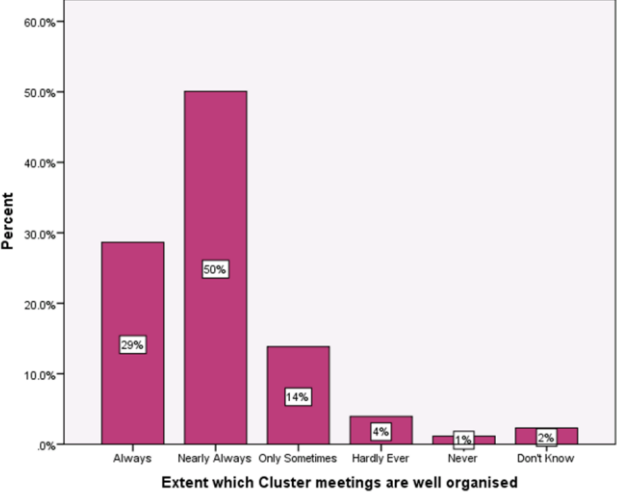
3. Please ✓ the box on the scale below to rate the extent to which you think your Cluster meetings are ..

	Always	Nearly Always	Only Sometimes	Hardly Ever	Never	Don't Know
a Well organised	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
b Friendly	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
c Productive	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
d Well facilitated	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

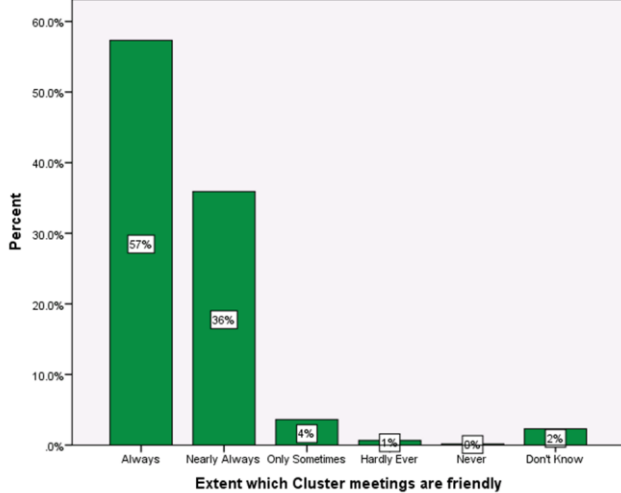
# CQL/PQL views on Cluster meetings – well organised?



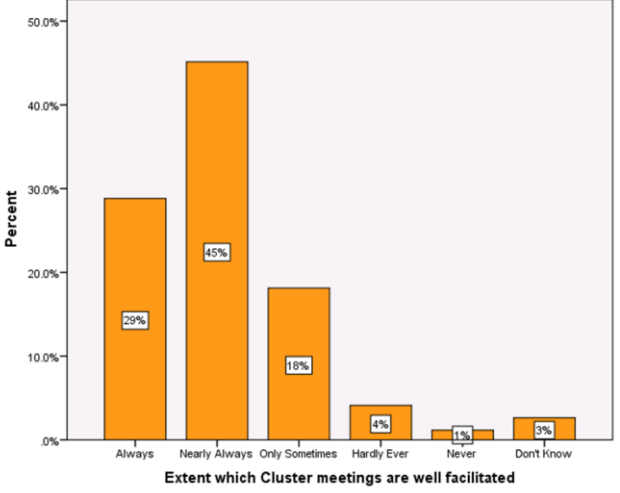
# WELL ORGANISED



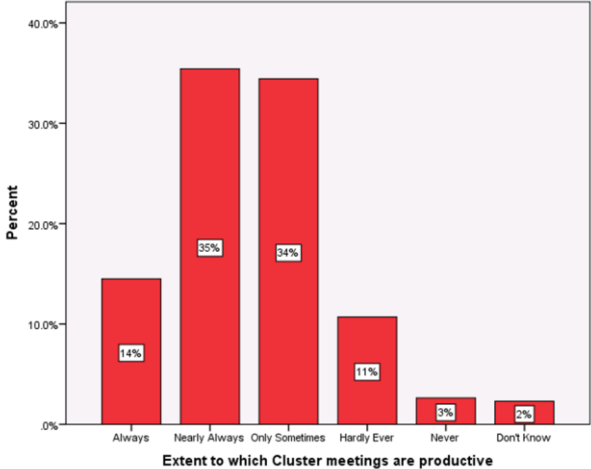
# FRIENDLY



# WELL FACILITATED

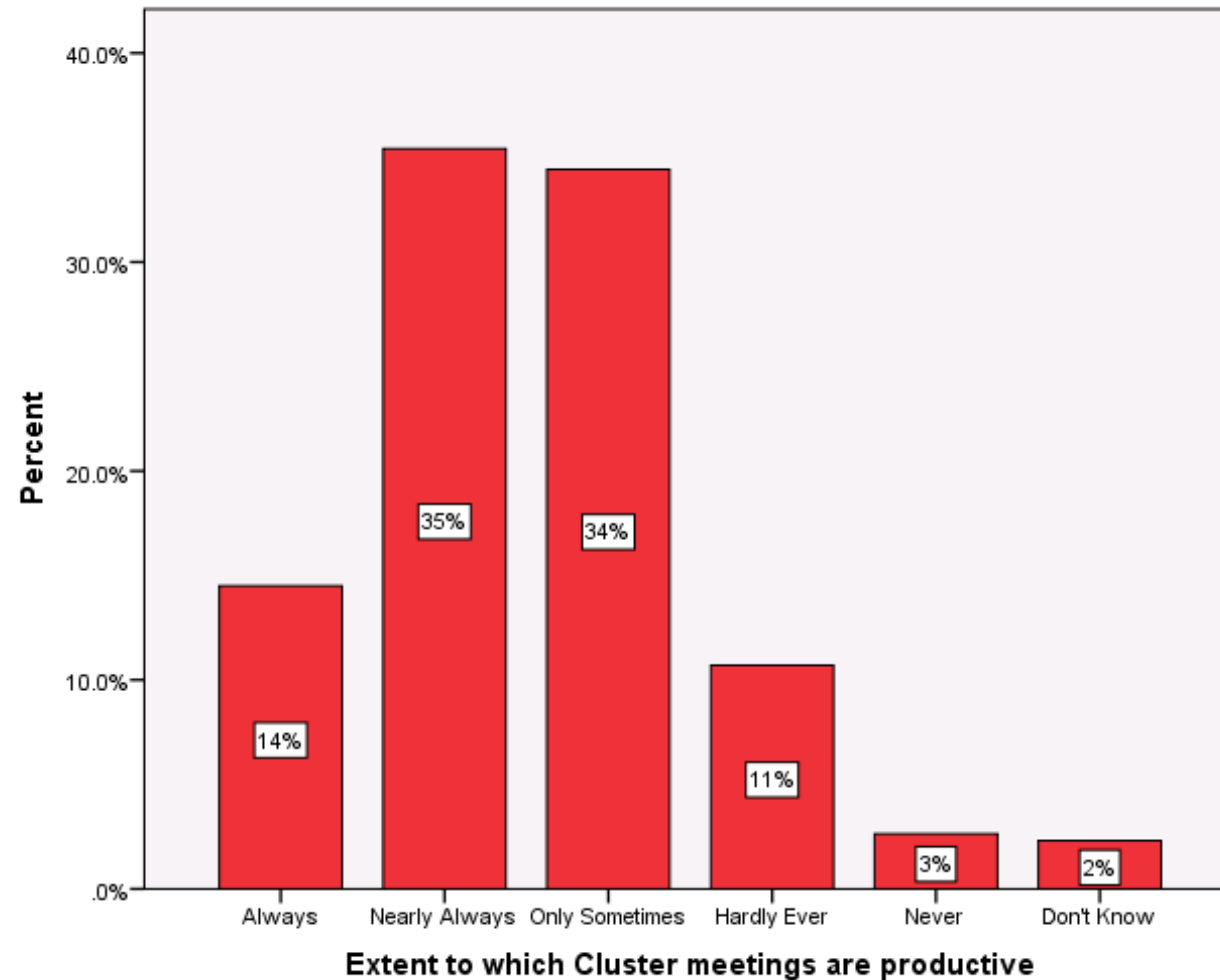


# PRODUCTIVE



# CQL/PQL views on Cluster meetings - productive

49% Always/nearly always



48% Only sometimes/never

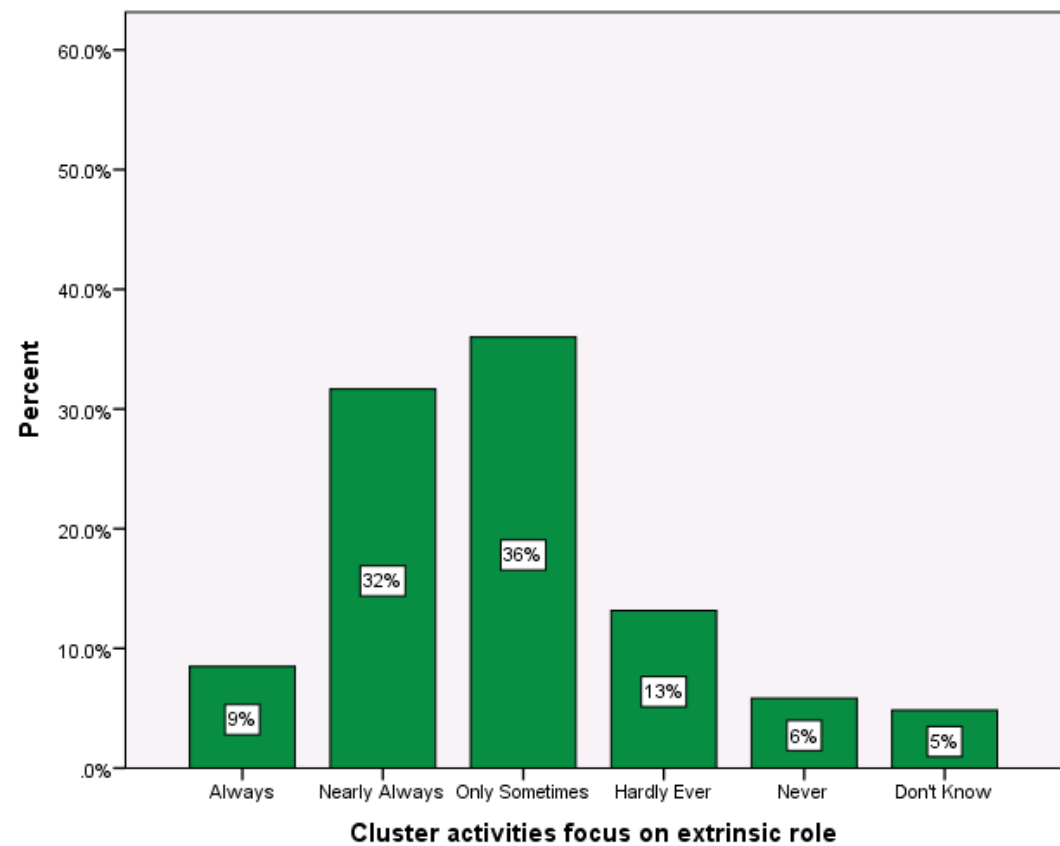
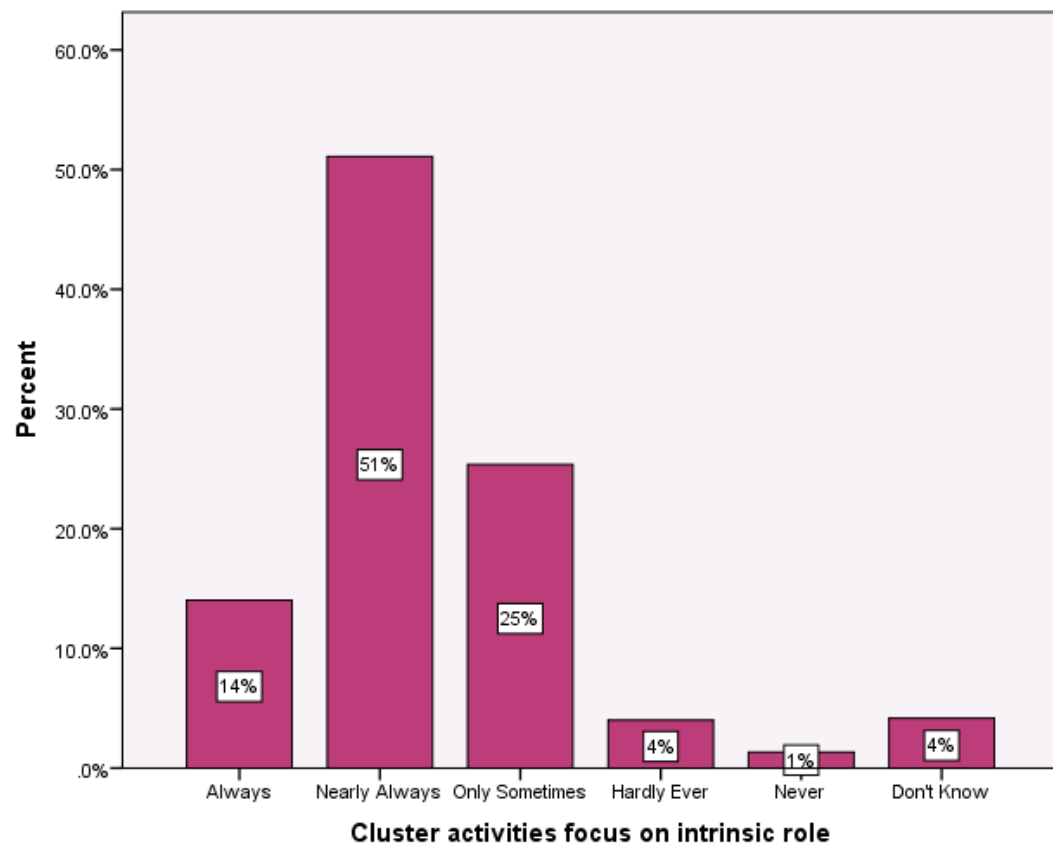
# Cluster meeting focus – intrinsic or extrinsic roles?

4. Please ✓ the box on the scale below to indicate your opinions on the focus of your Cluster activities at the present time...

	Always	Nearly Always	Only Sometimes	Hardly Ever	Never	Don't Know
a Its <u>intrinsic role</u> (quality improvement)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
b Its <u>extrinsic role</u> (participation in local planning of integrated care)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

# ***Improving Together: A National Framework for Quality and GP Clusters in Scotland*** set out the intrinsic and extrinsic functions of clusters

<b>Intrinsic</b>	<b>Extrinsic</b>
Learning network, local solutions, peer Support	Collaboration and practice systems working with Community MDT and third sector partners
Consider clinical priorities for collective Population	Participate in and influence priorities and strategic plans of Integrated Authorities
Transparent use of data, techniques and tools to drive quality improvement – will, ideas, execution	Provide critical opinion to aid transparency and oversight of managed services
Improve wellbeing, health and reduce health inequalities	Ensure relentless focus on improving clinical outcomes and addressing health inequalities



(Always/Nearly always) : 65% intrinsic; 41% extrinsic

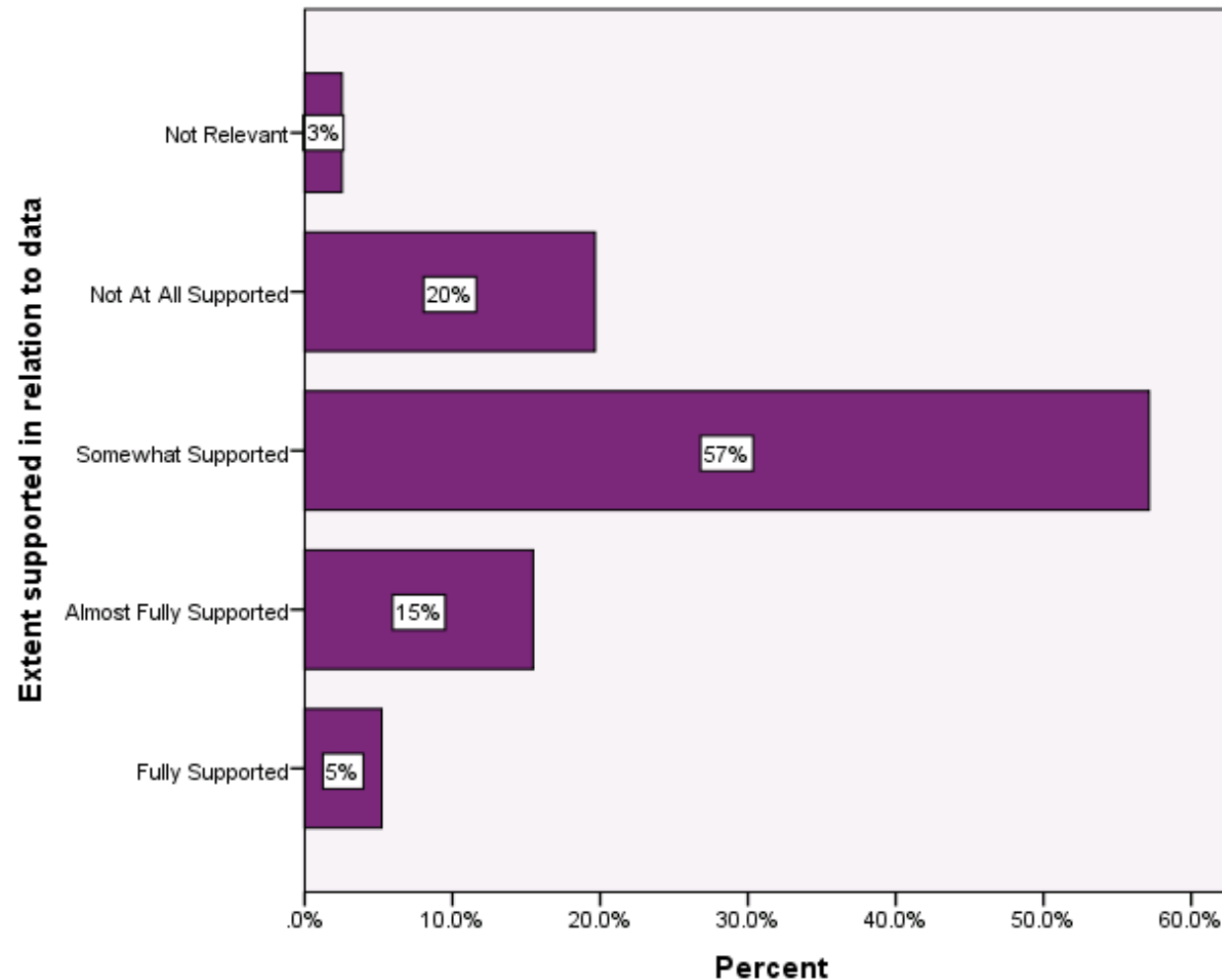


# CQL/PQLs views on level of support

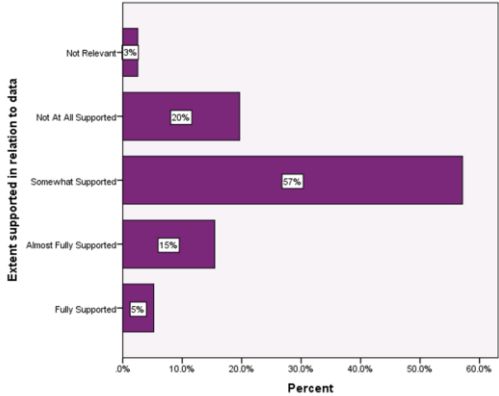
5. Please ✓ the relevant box on the scale below to rate the extent to which you feel supported in relation to...

	Fully Supported	Almost Fully Supported	Somewhat Supported	Not At All Supported	Not Relevant
a Data	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b Health intelligence	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c Analysis	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d Quality Improvement methods	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e Advice	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
f Leadership	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
g Evaluation and research	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

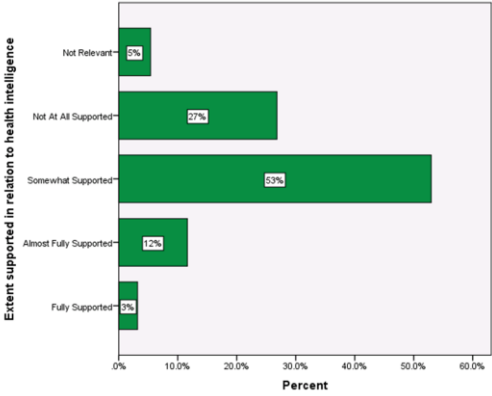
# Extent to which CQLs/PQLs feel supported - data



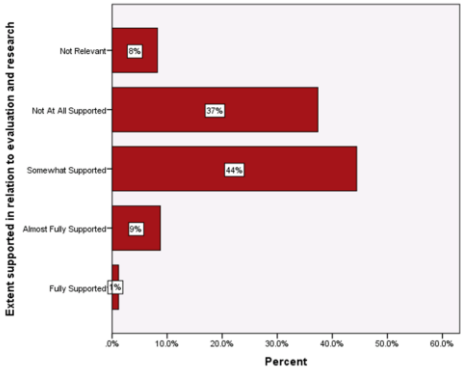
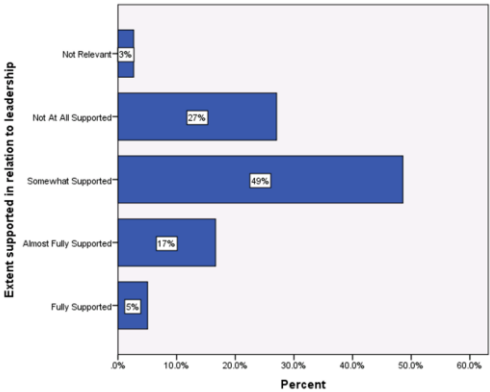
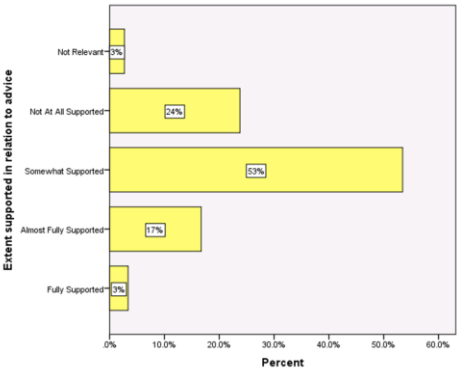
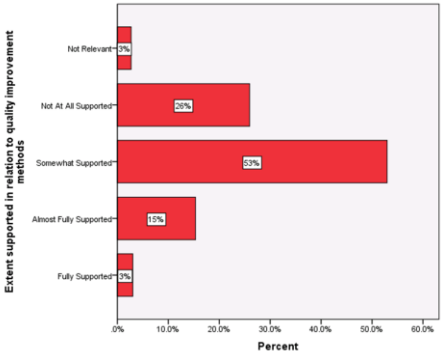
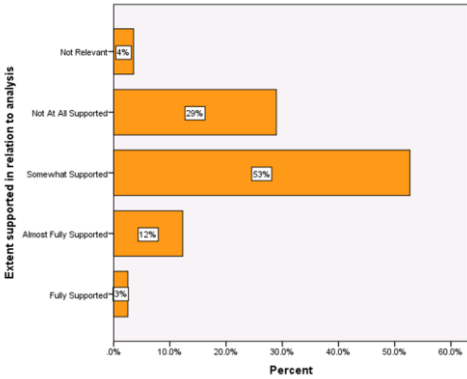
# DATA



# HEALTH INTELLIGENCE



# ANALYSIS



# QI METHODS

# ADVICE

# LEADERSHIP

# EVALUATION

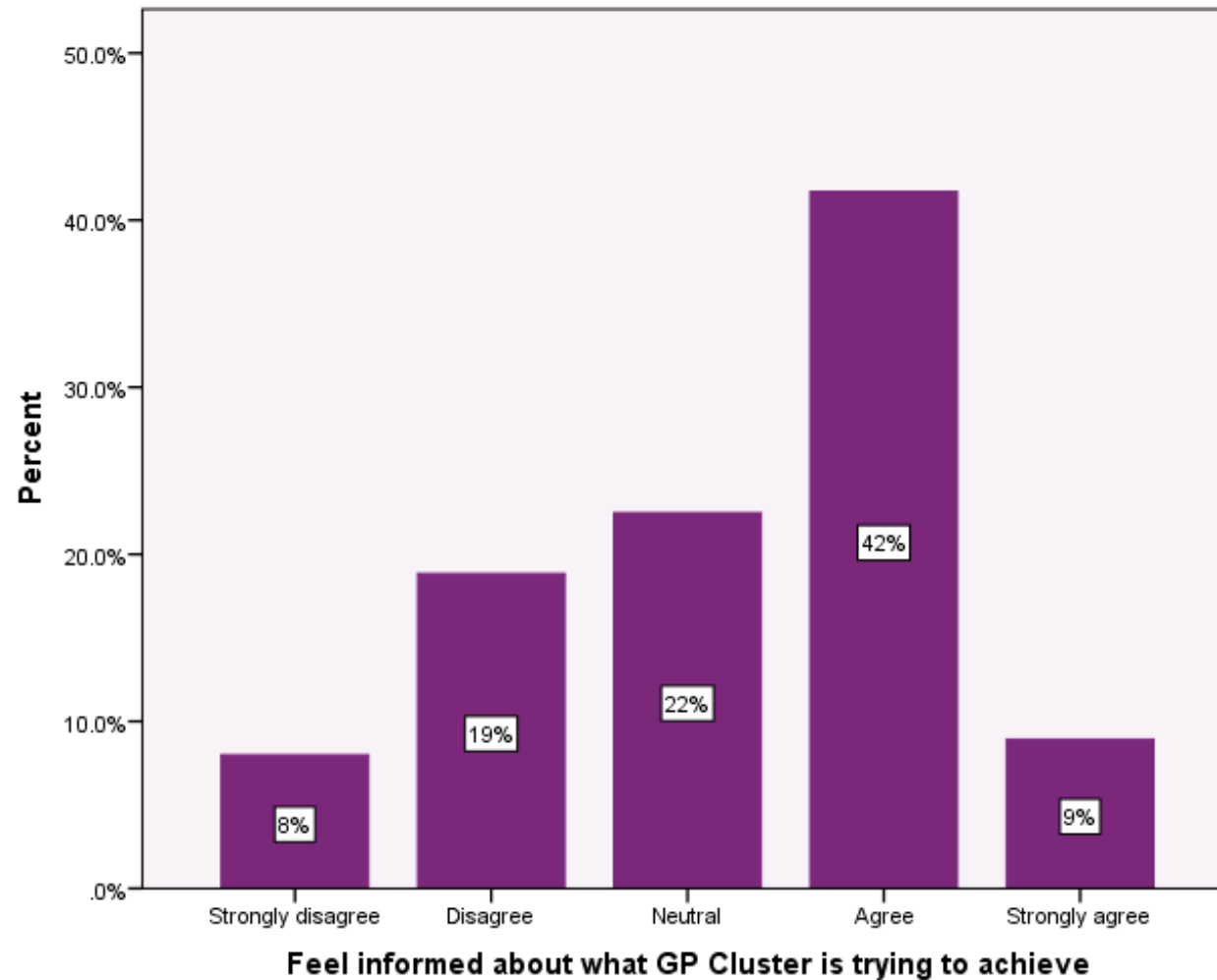
# GPs views on Clusters – All GPs

# GP Clusters – All GPs views knowledge and engagement

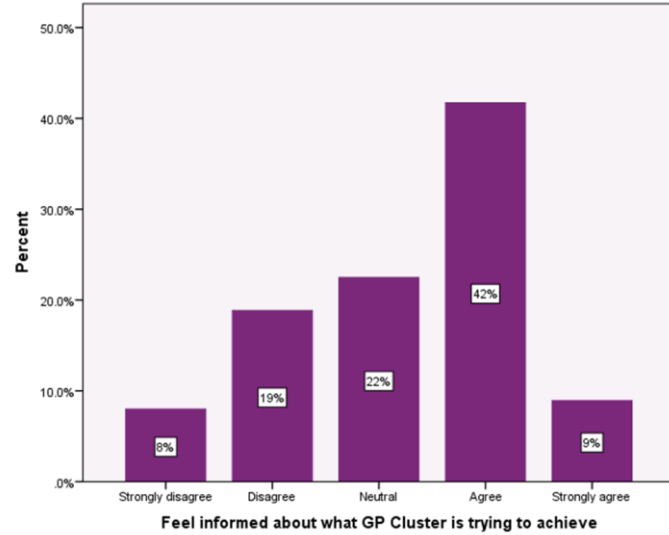
1. Please ✓ the relevant box on the scale below to rate the extent to which you agree or disagree with these statements about your knowledge and engagement with your GP Cluster

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
a I feel informed about what my GP Cluster is trying to achieve	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b Decisions made by my GP Cluster reflects my views	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c When I make contact, my Practice Quality Lead is responsive to my queries and concerns	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d My GP Cluster is 'owned' by its members and feels like 'our organisation'	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
f I can influence the work of my GP Cluster if I choose to	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

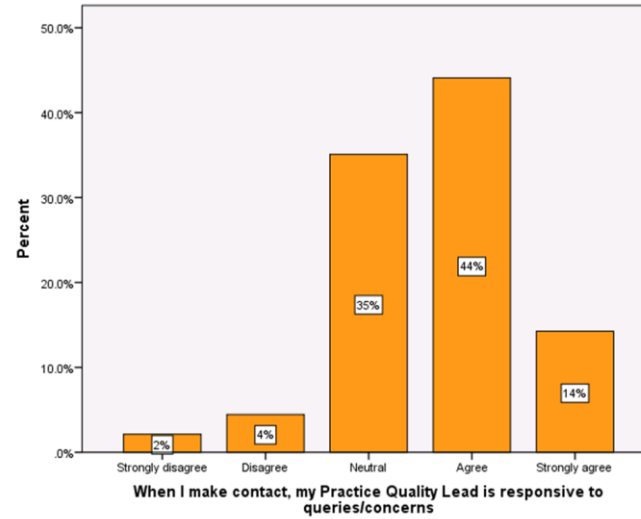
# Views on GP Clusters- informed



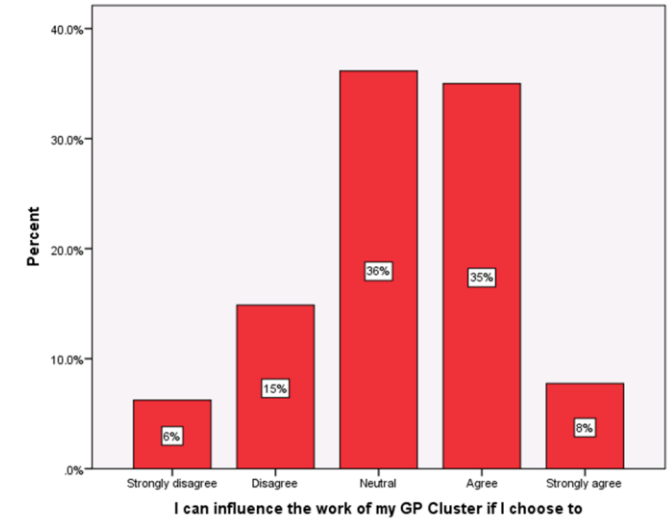
## INFORMED



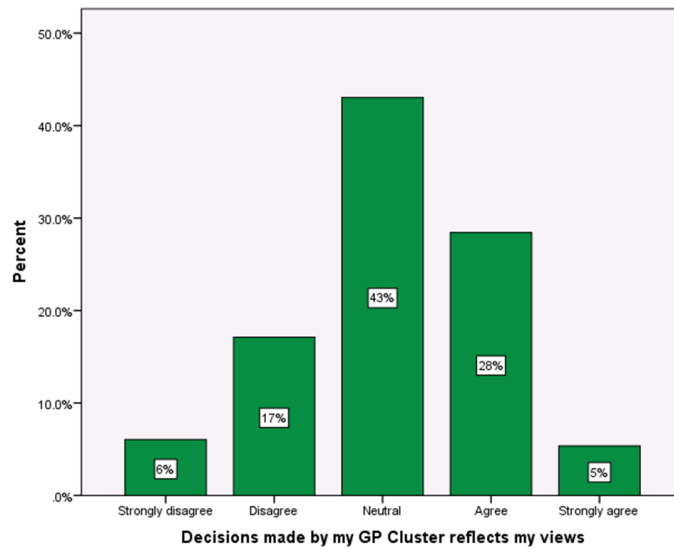
## RESPONSIVE



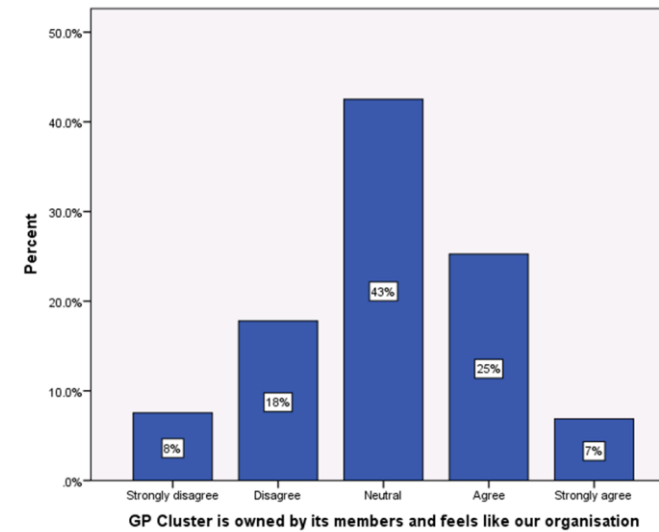
## INFLUENCE



## DECISIONS



## OWNERSHIP



# GP Clusters – All GPs views

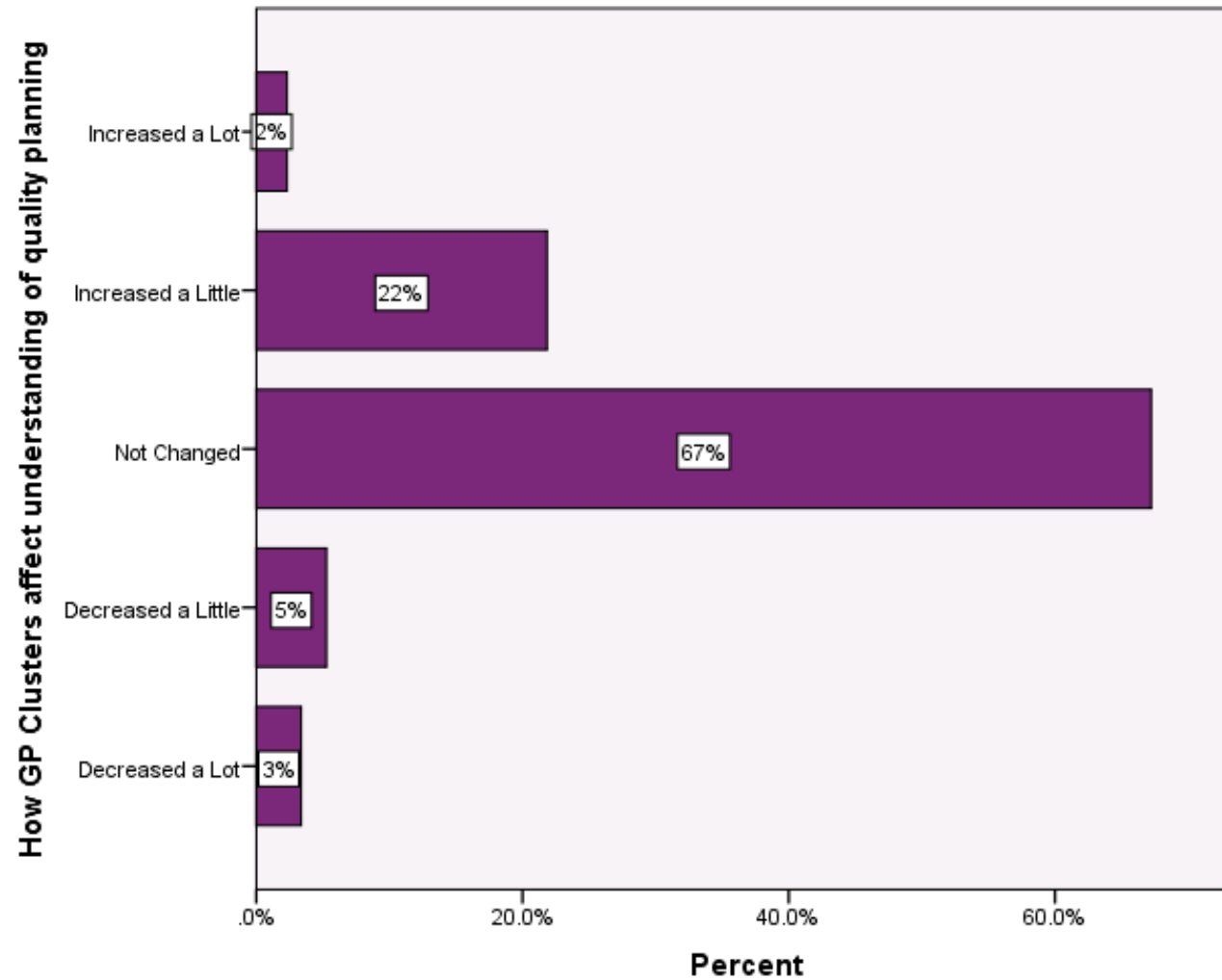
## Quality improvement

2. Please ✓ the relevant box on the scale below to indicate your opinions on how GP Clusters have affected ...

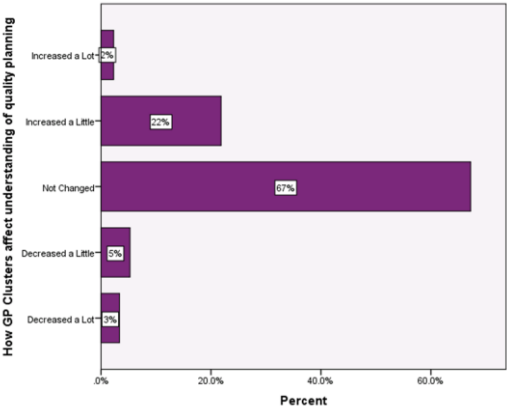
	Decreased a Lot	Decreased a Little	Not Changed	Increased a Little	Increased a Lot
Your understanding of quality planning (how to set quality improvement goals)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Your understanding of quality improvement (methods and approaches)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Your understanding of quality control (measuring improvement, ensuring safety)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Your understanding of the characteristics of the local population of patients (such as age, deprivation, multimorbidity levels)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
The quality of care that you provide	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
The extent to which you involve patients in decisions about their care, based on what is important to them	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5



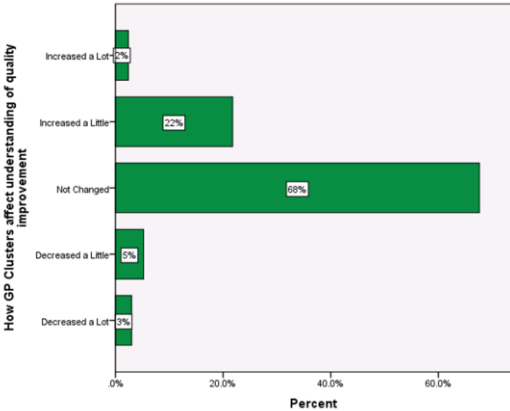
# GP Clusters and Quality Planning



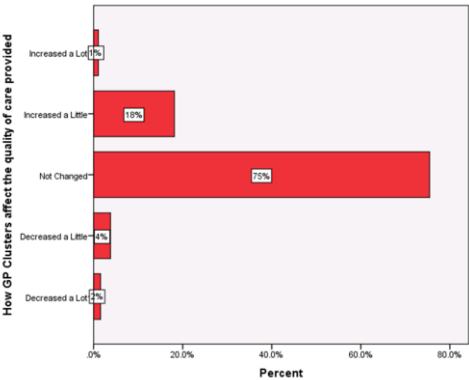
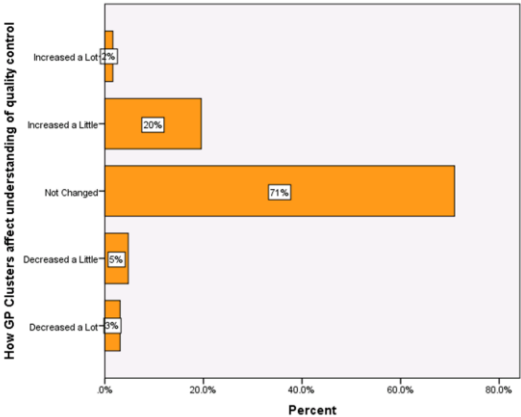
QUALITY PLANNING



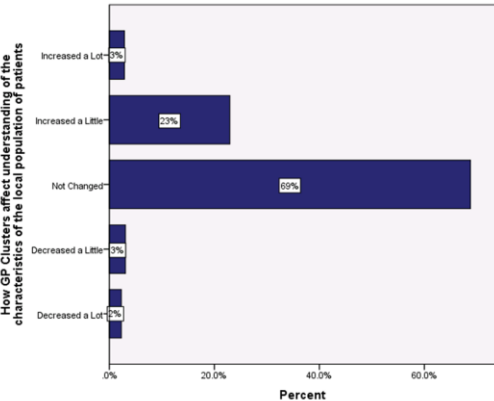
QUALITY IMPROVEMENT



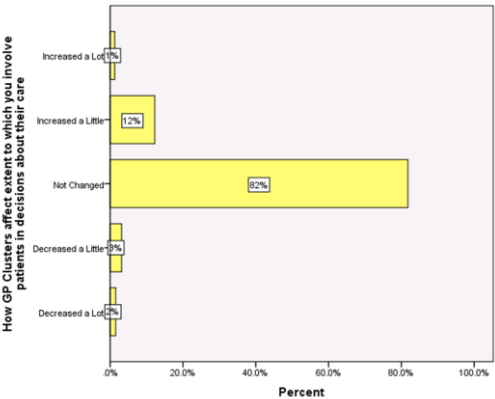
QUALITY CONTROL



QUALITY OF CARE



LOCAL POPULATION



SHARED DECISION MAKING

# Summary: CQLs/PQLs views

- Cluster meetings are happening regularly and are well organised, friendly, well-facilitated, but not always seen to be productive
- The balance of focus is intrinsic > extrinsic
- The perceived level of support of the key components identified in 'Improving Together' is limited.

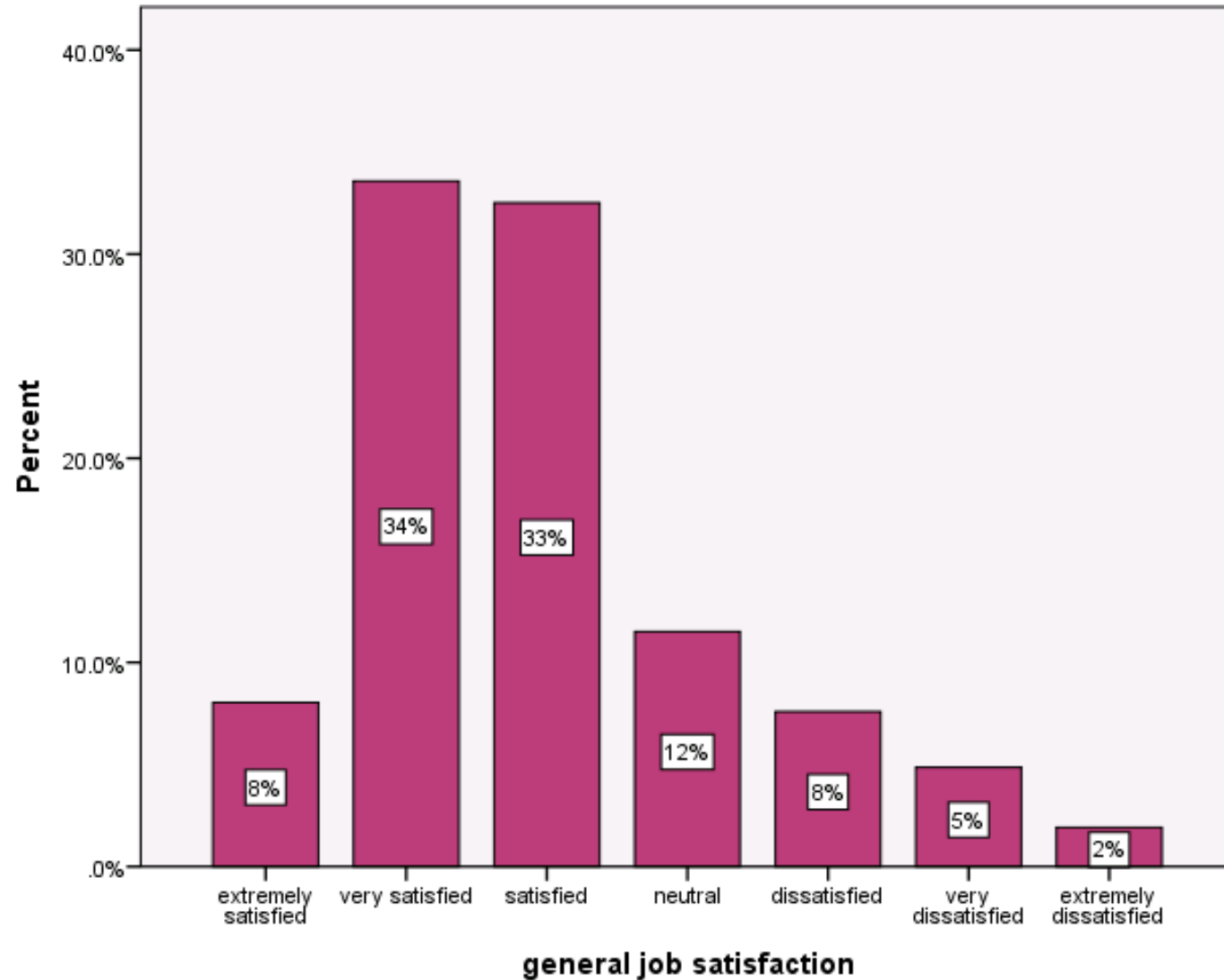
# Summary: All GPs views on Clusters

- GPs are happy with the level of knowledge and engagement they have with Clusters through their PQLs/CQLs and feel part of them
- However, they perceive that Clusters have had little or no effect to date on their understanding of quality improvement, nor on the quality of care they deliver, their knowledge of the local population, or shared-decision making with patients

# Other key findings from the Scottish 2018 GP survey

# Overall GP job satisfaction in Scotland 2018

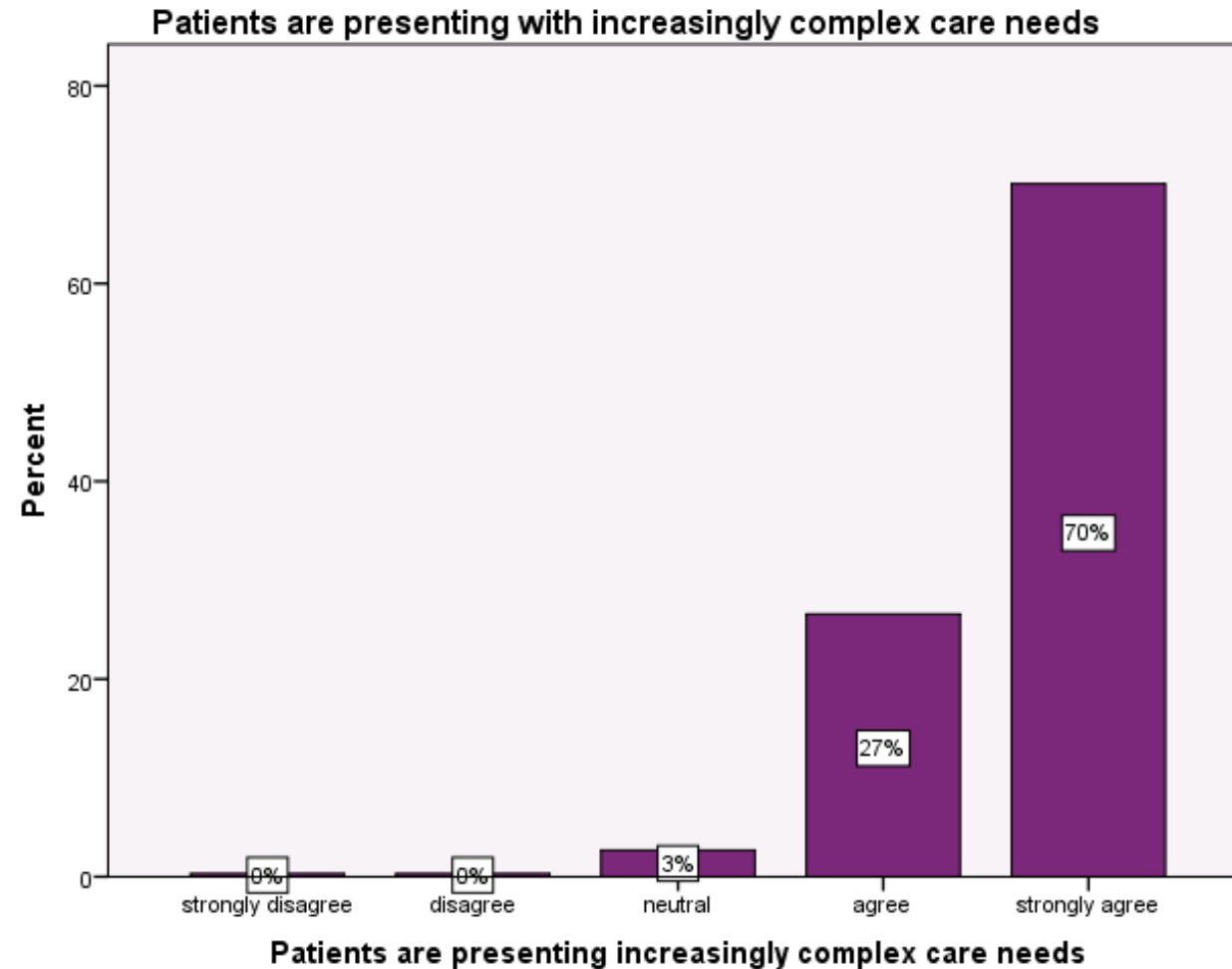
74%  
satisfied



15%  
dissatisfied

# Needs, demands and pressures

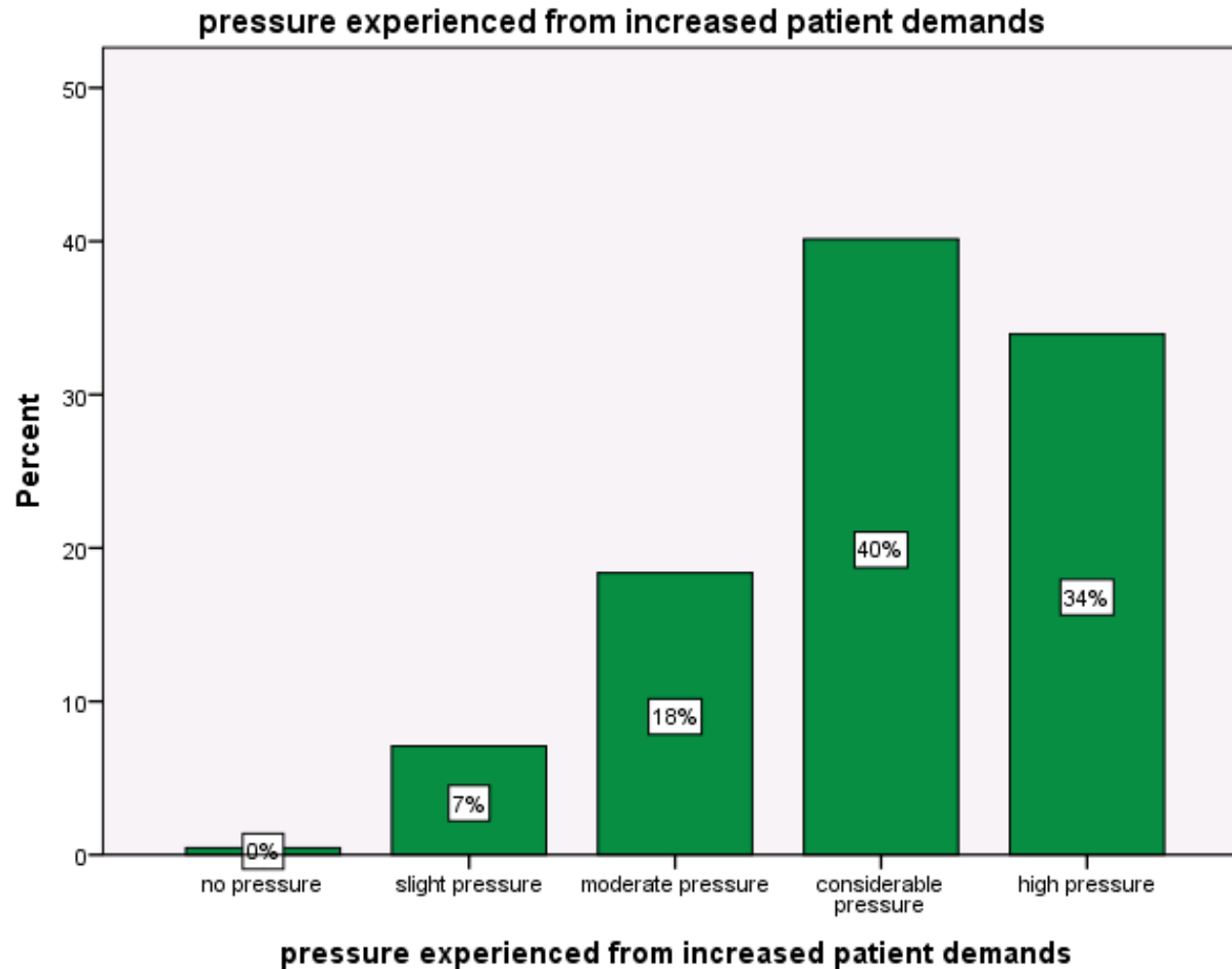
# Increasing complexity of patients' care needs



97% Agreed

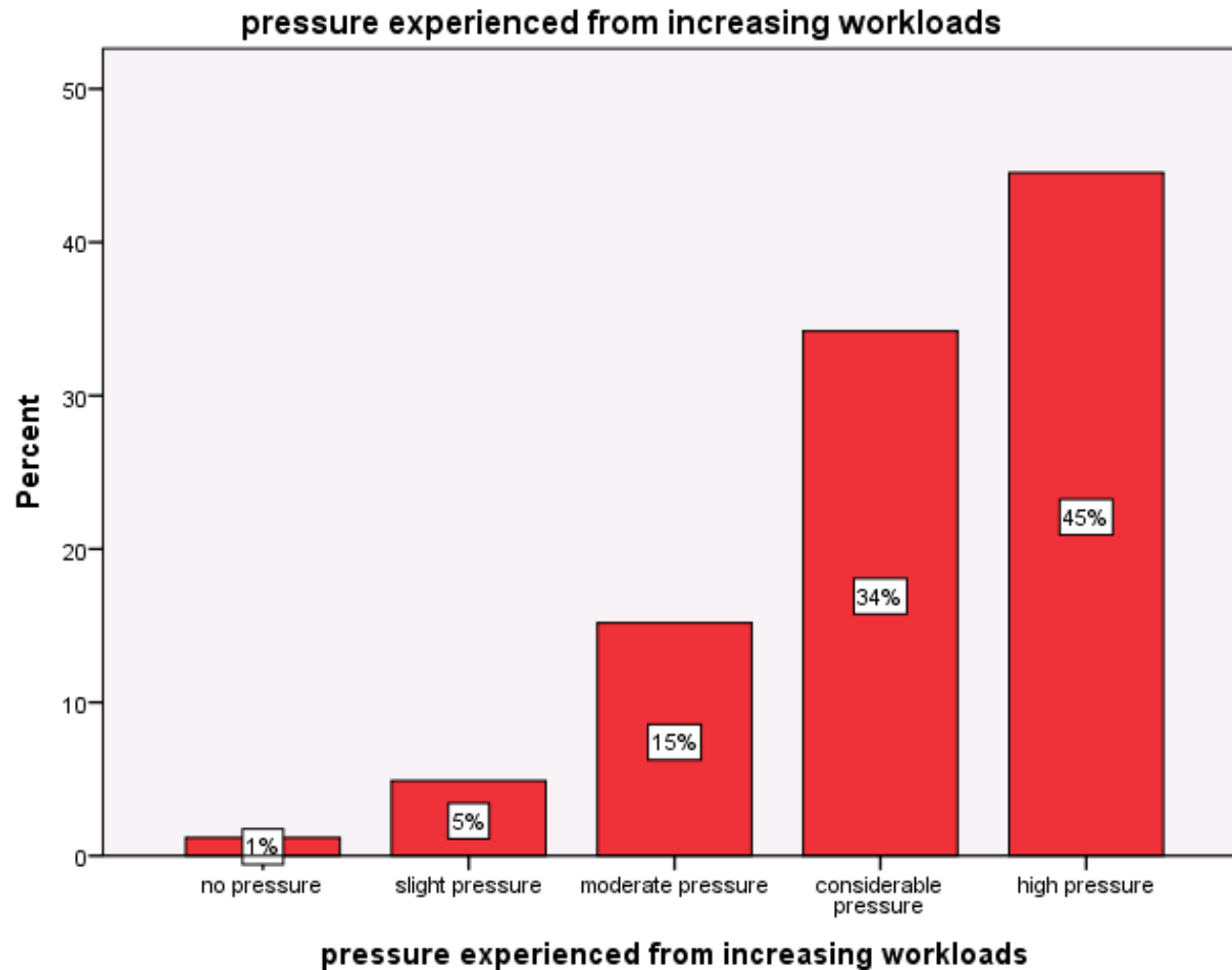


# Pressure from increased patient demand



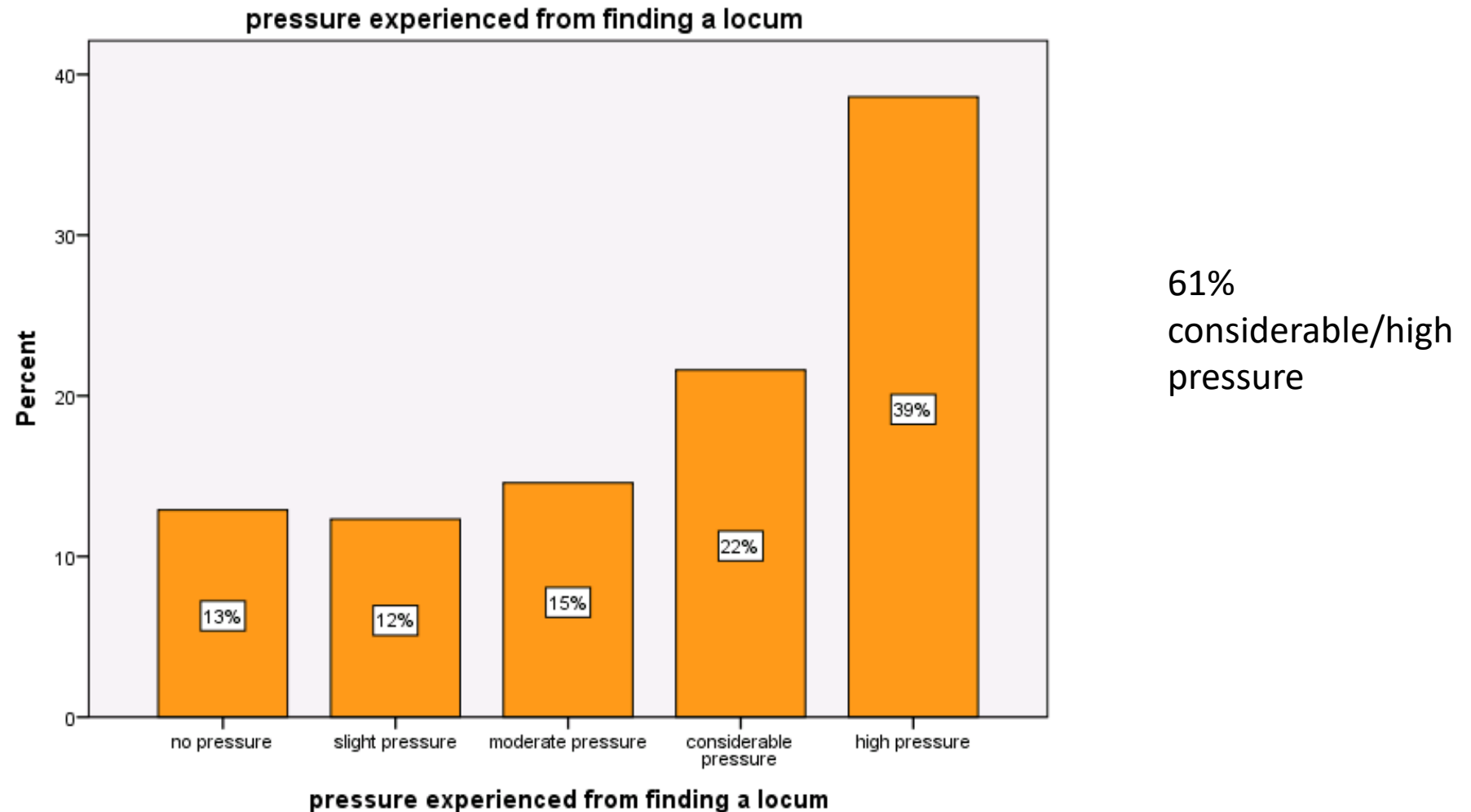
74% considerable/high pressure

# Pressure from increasing workload

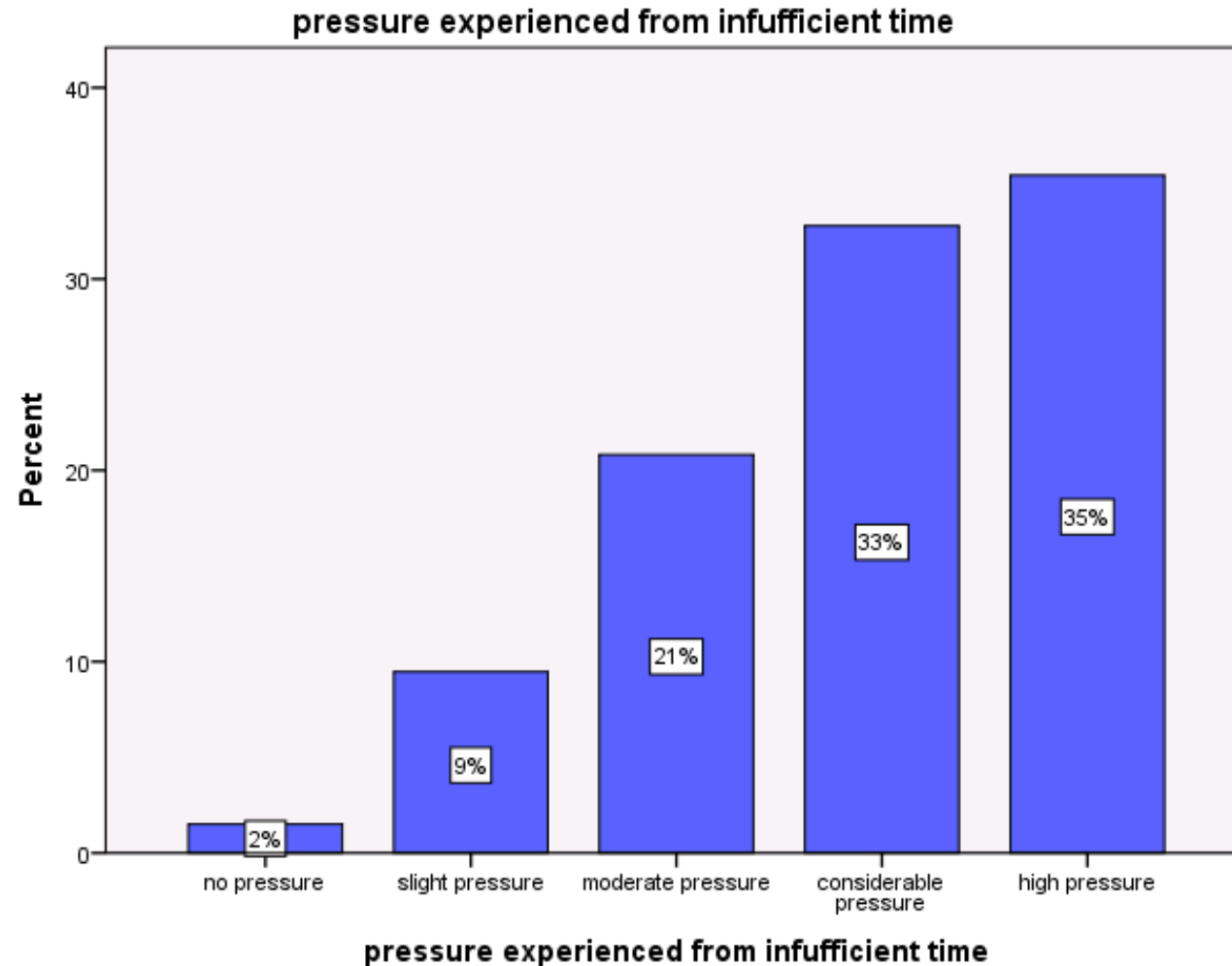


79% considerable/high pressure

# Pressure from lack of locum GPs

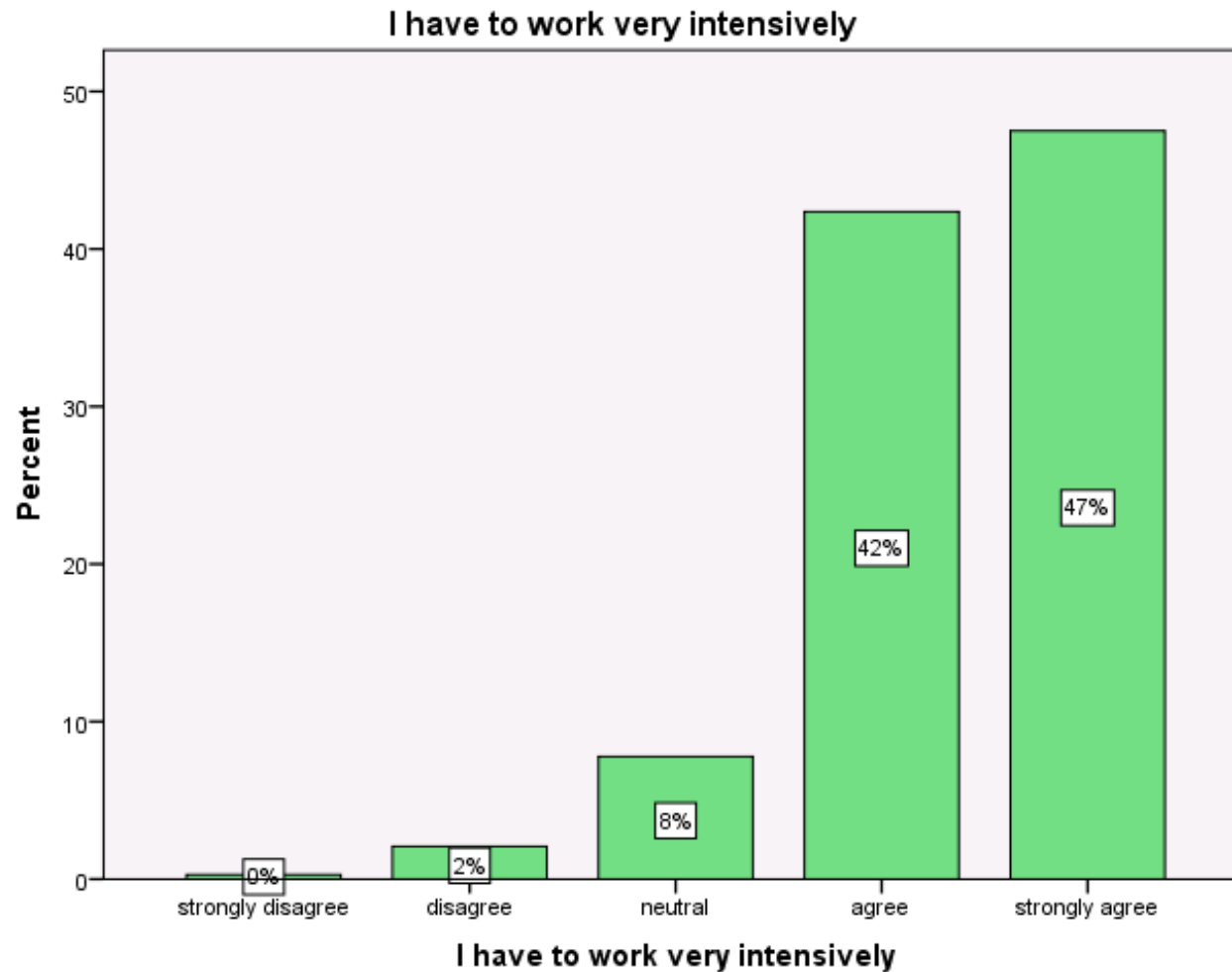


# Pressure from insufficient time to 'do justice to the job'



68%  
considerable/high  
pressure

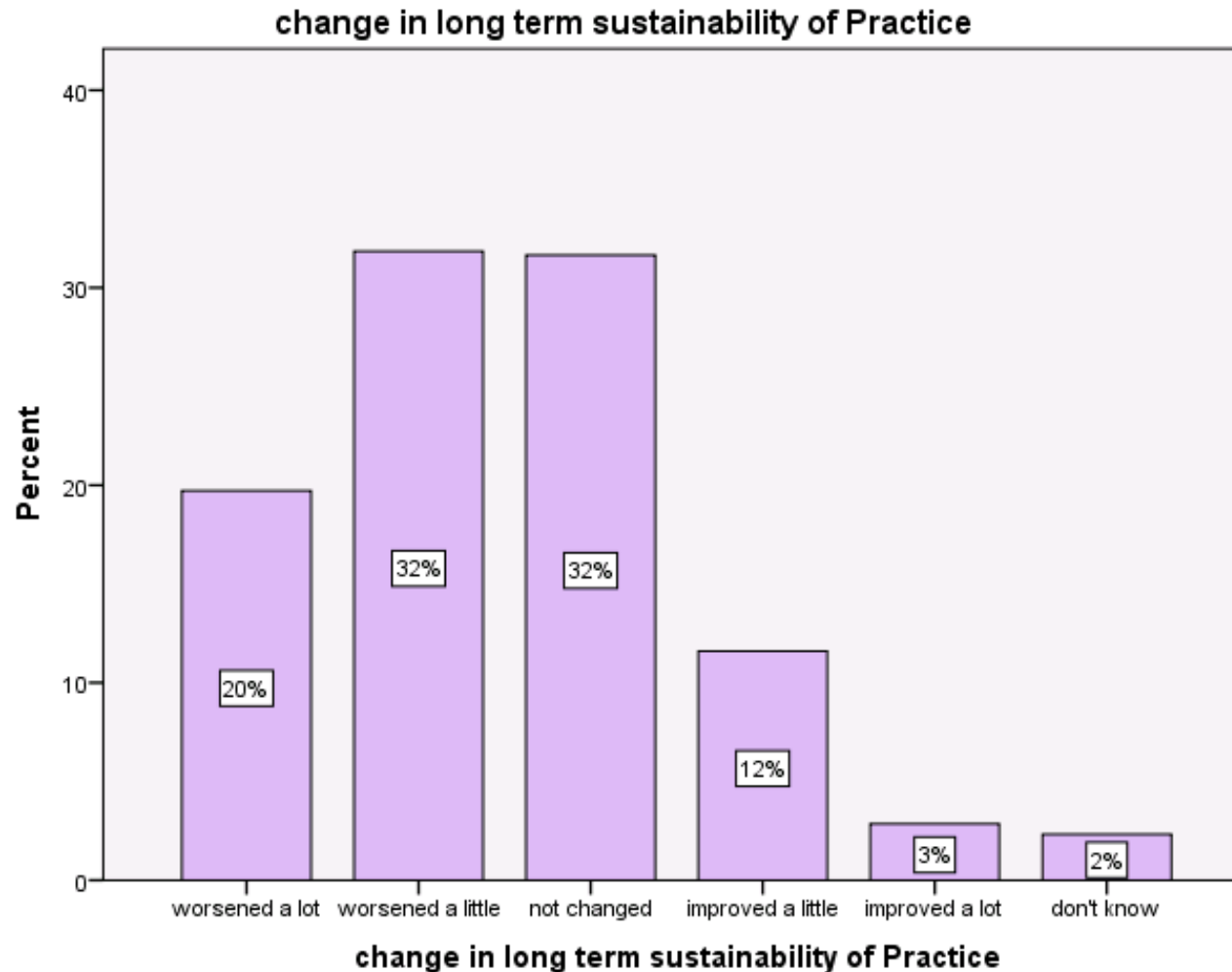
# Work is very intensive



89% agree

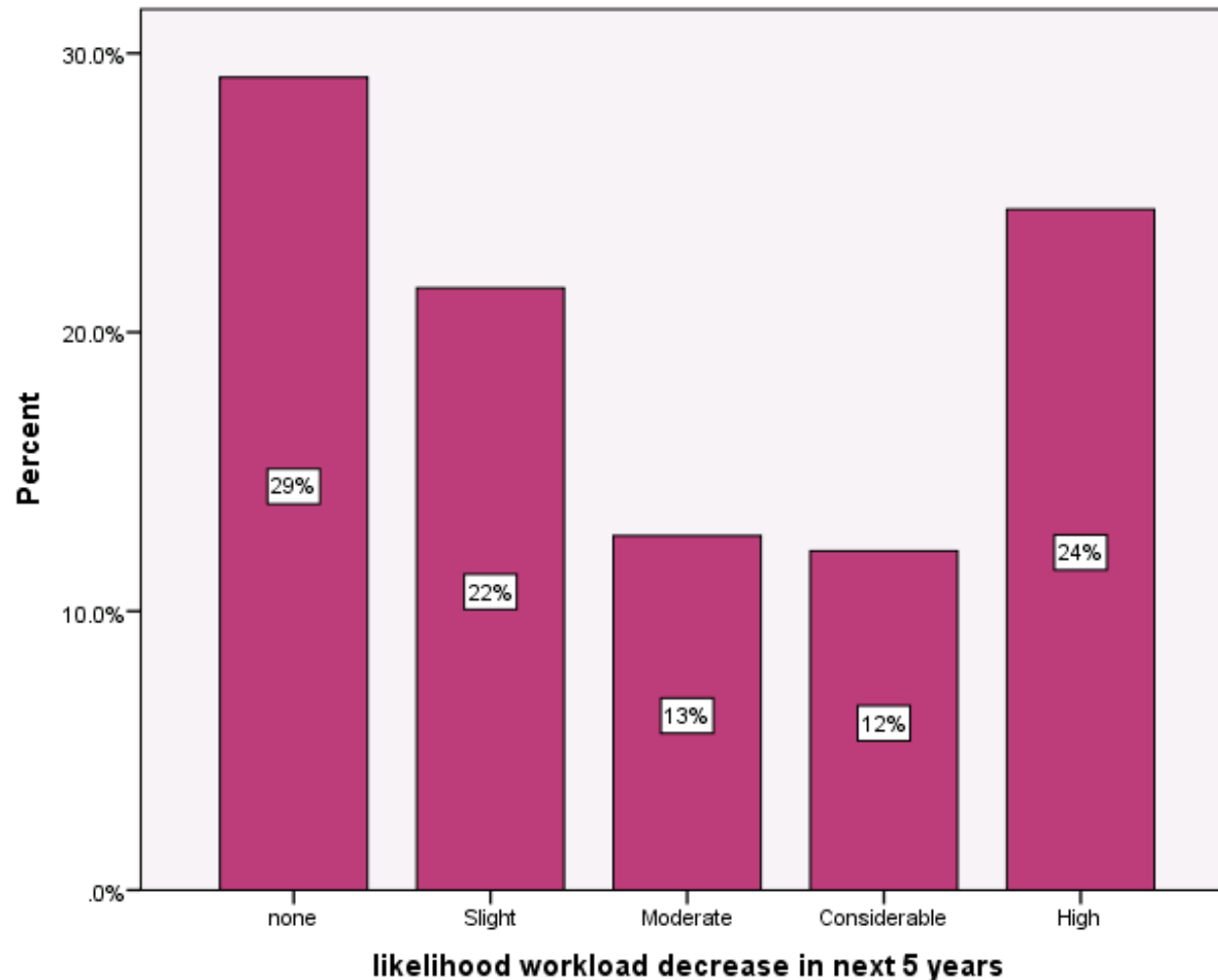
# Change in long-term sustainability of the Practice in last 12 months

52%  
worsened



17%  
Improved

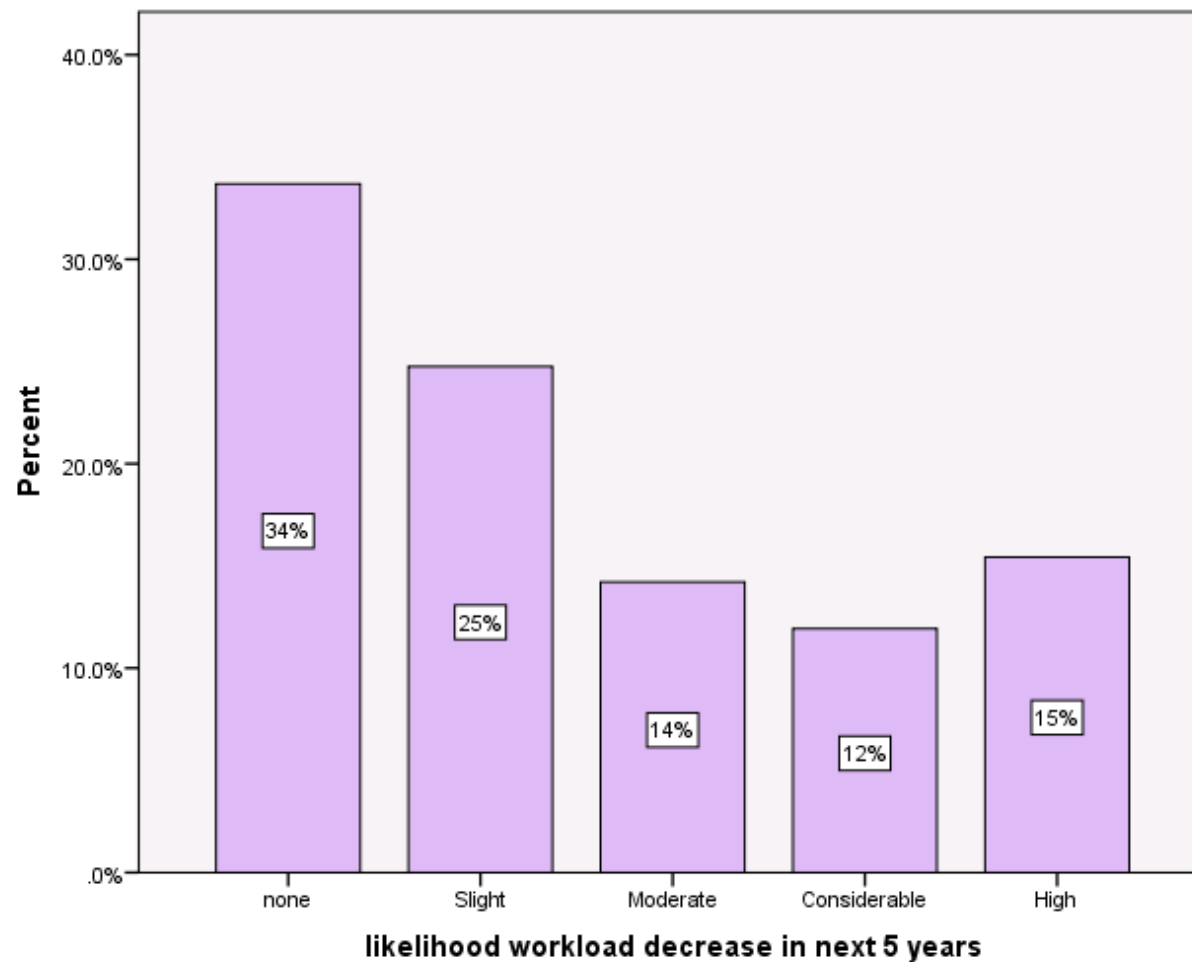
# Likelihood of reducing working hours in next 5 years – all ages



**71% - a possibility**

**49% -  
Moderate to High  
(44% in 2012)**

# Likelihood of reducing working hours in next 5 years – GPs under 55 years

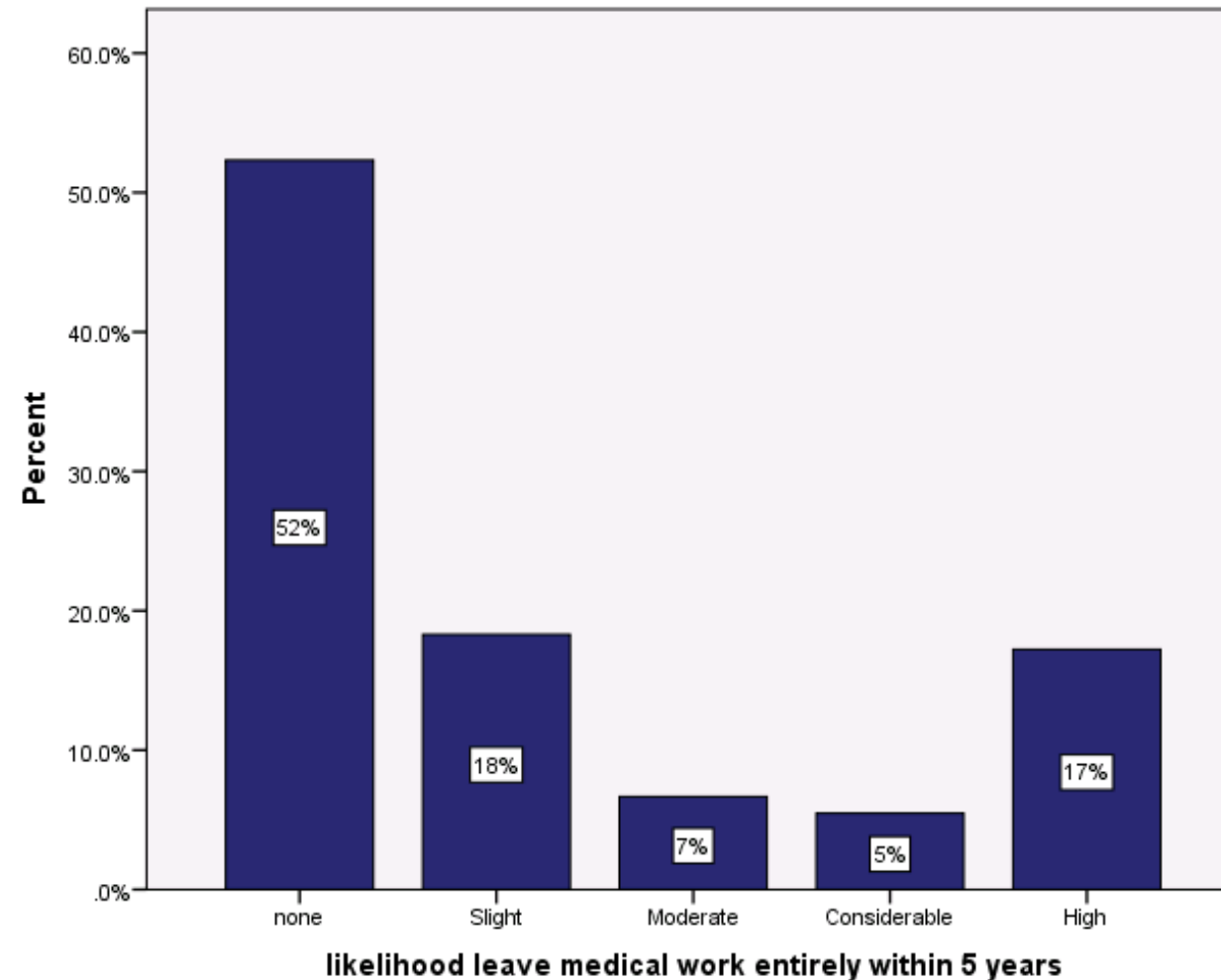


**66% - a possibility**

**41% -  
Moderate to High  
(35% in 2012)**



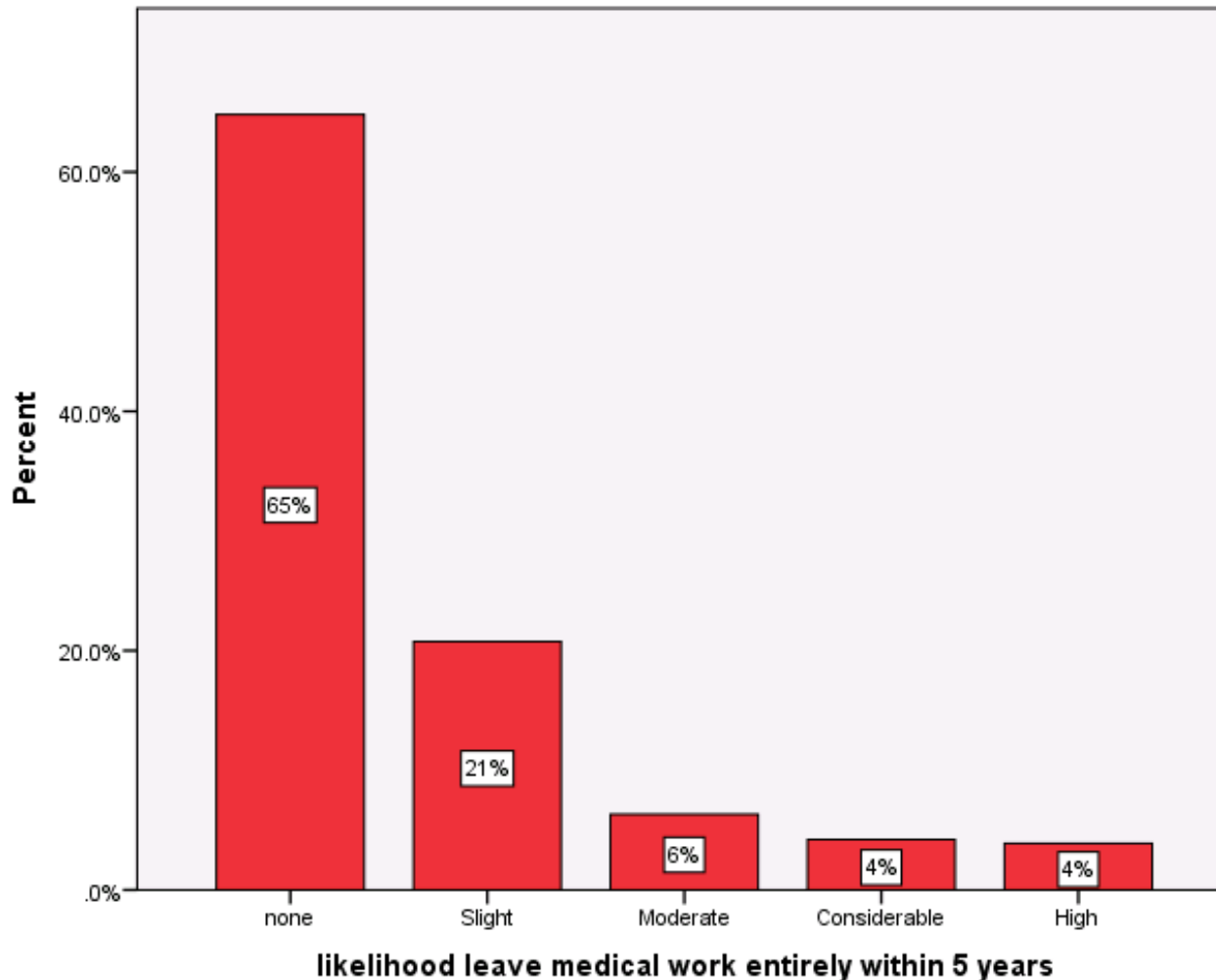
# Likelihood of leaving medical work in next 5 years – all ages



**48% - a possibility**

**29% -  
Moderate to High  
(31% in 2012)**

# Likelihood of leaving medical work in next 5 years –GPs under 55 years

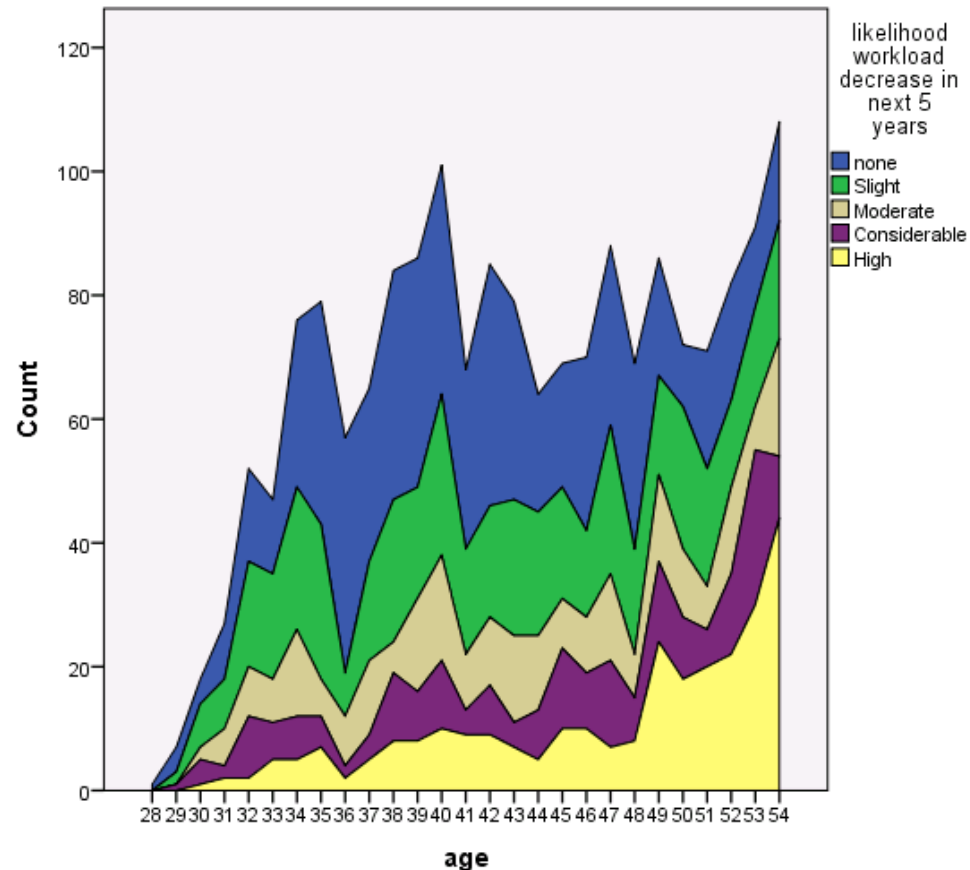


**35% - a possibility**

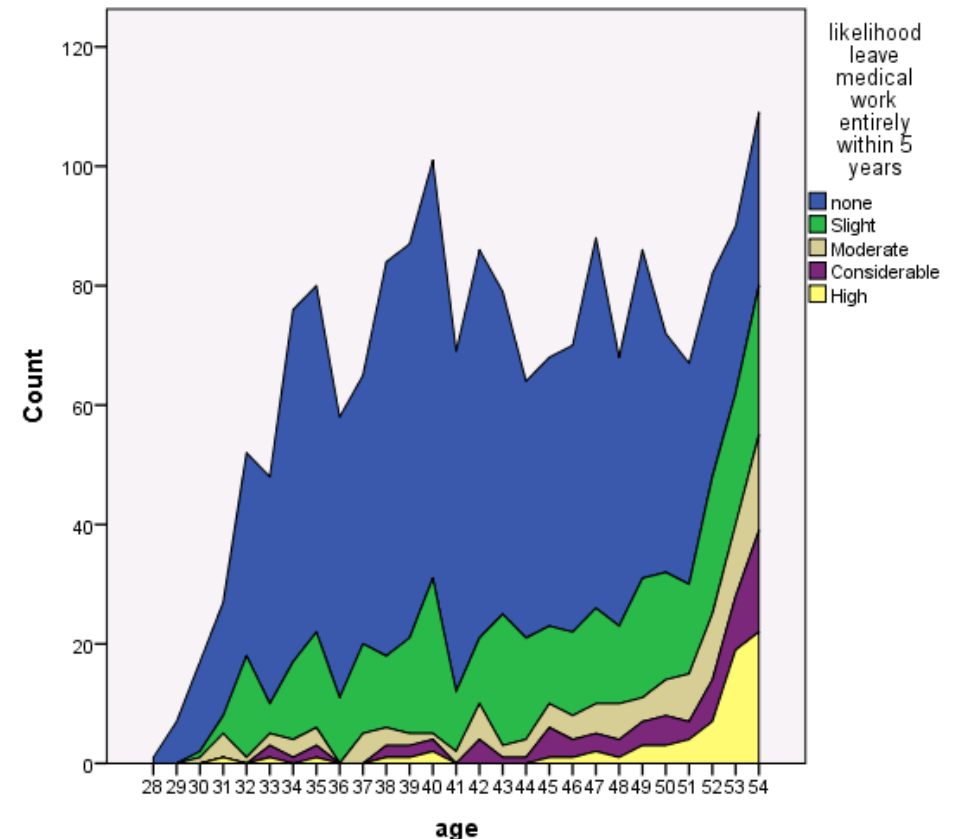
**14% -  
Moderate to High  
(13% in 2012)**

# Likelihood of decreasing hours or leaving medical work in next 5 years –by age in GPs younger than 55 years

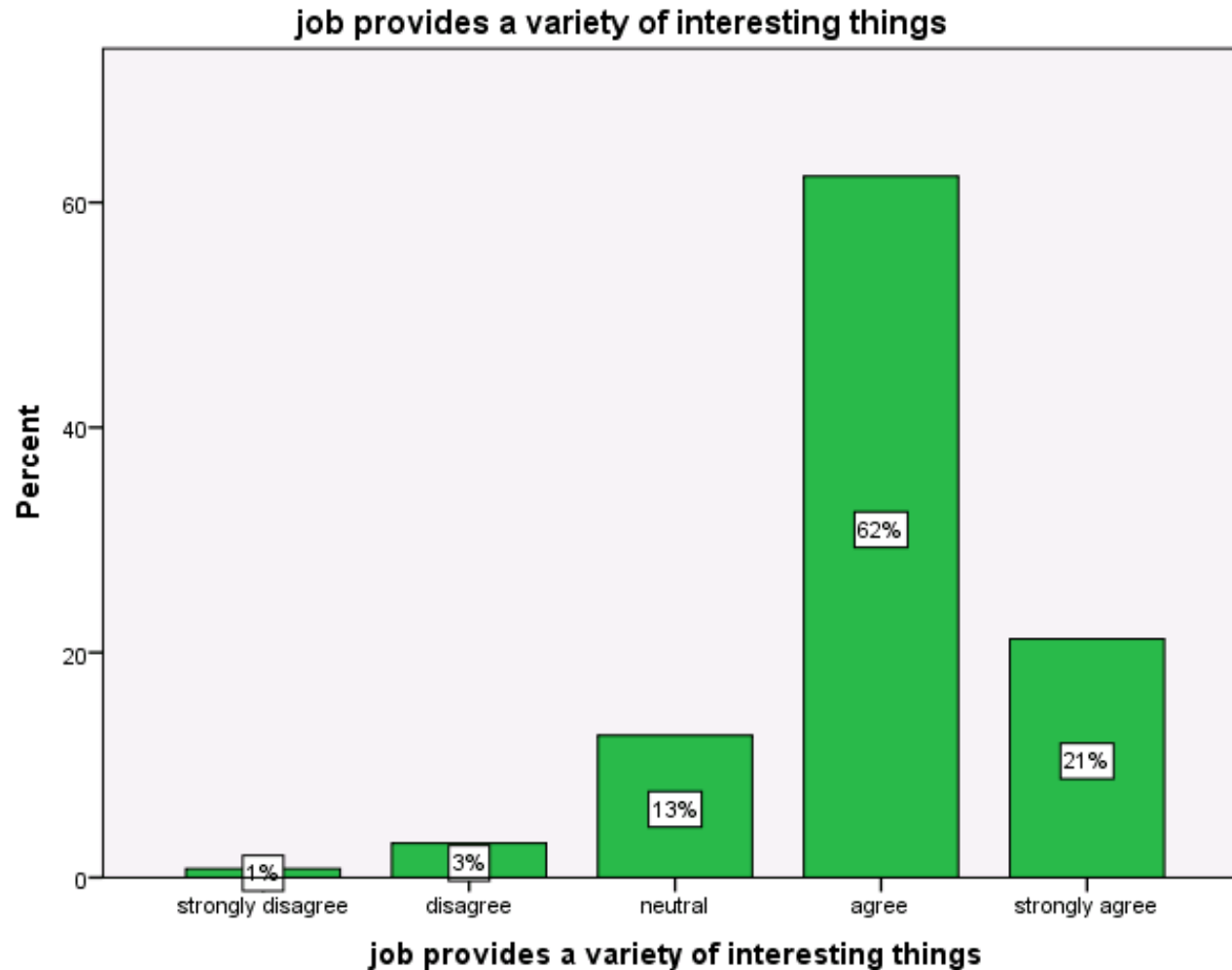
## DECREASE HOURS



## LEAVE MEDICAL WORK

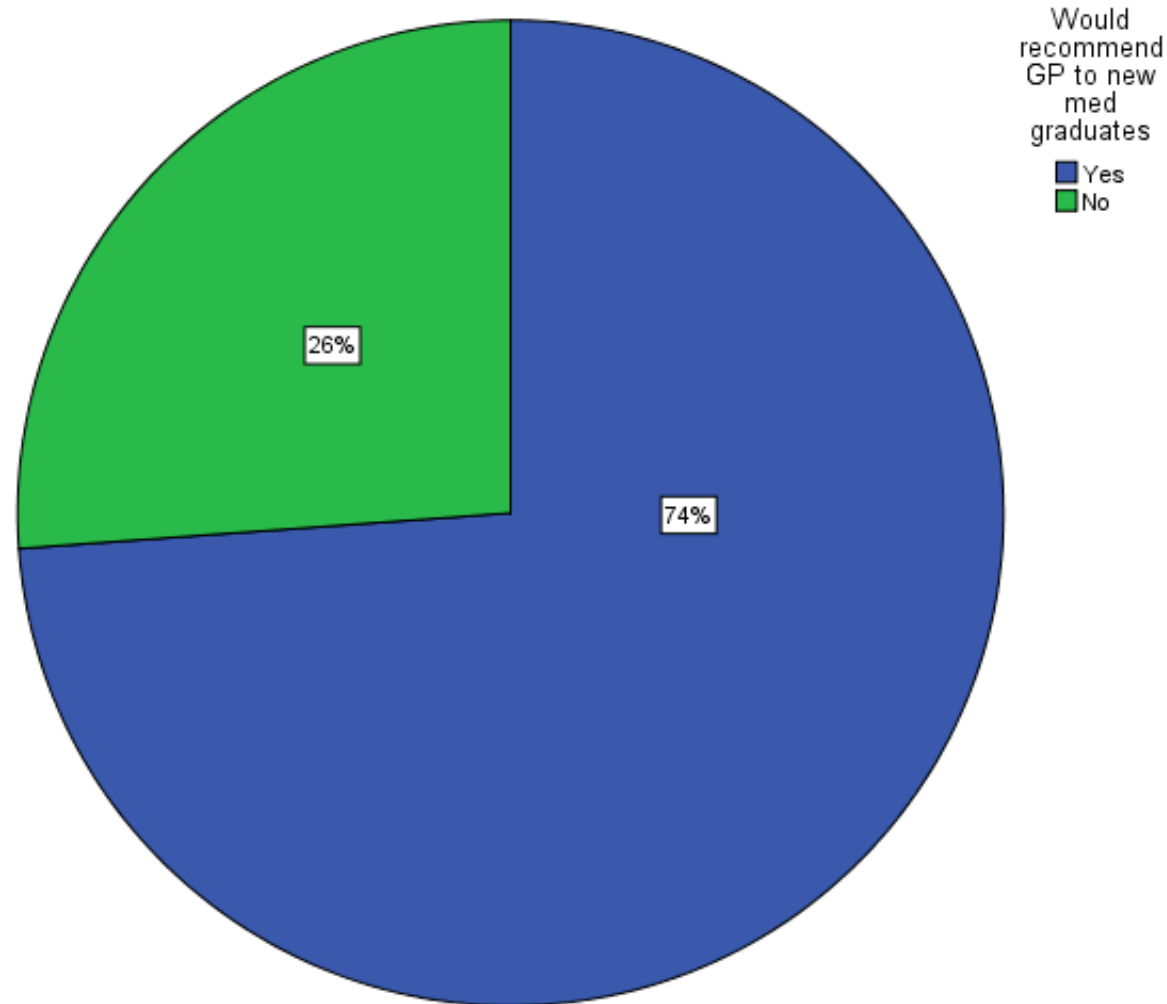


# “My job provides me with a variety of interesting things”



83%  
agree

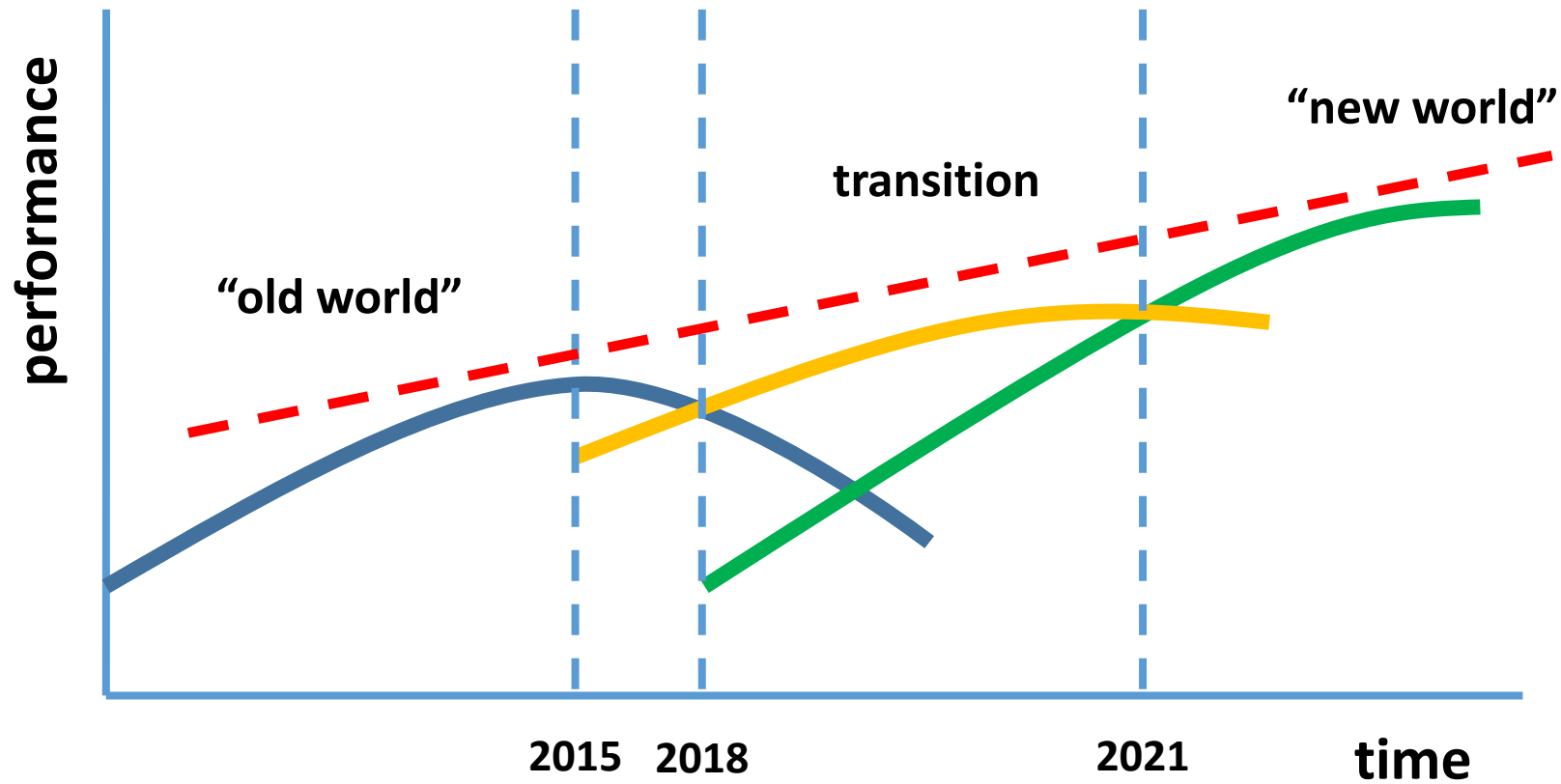
# “Would you recommend general practice as a speciality for new medical graduates?”



# Summary

- Clusters are functional but are reportedly at an early stage in terms of quality improvement and CQLs/PQLs feel they require more support
- GPs do not perceive any benefit, as yet, from Clusters in terms of the quality of care they are delivering
- GPs report high levels of pressure from patient complexity, demand, high workload, and lack of time
- The feel practice sustainability has decreased, and significant numbers are seriously considering reducing their hours or leaving practice, especially in those above 50 years of age
- However, the vast majority still enjoy the variety of the job, and would recommend it as a career

# Transforming primary care



From a prescriptive contract to an enabling contract

# Recent past/current situation?

Photo # NH 96174 Damage to USS Mindanao from Mt. Hood explosion



Courtesy of D. Begg



# The future?



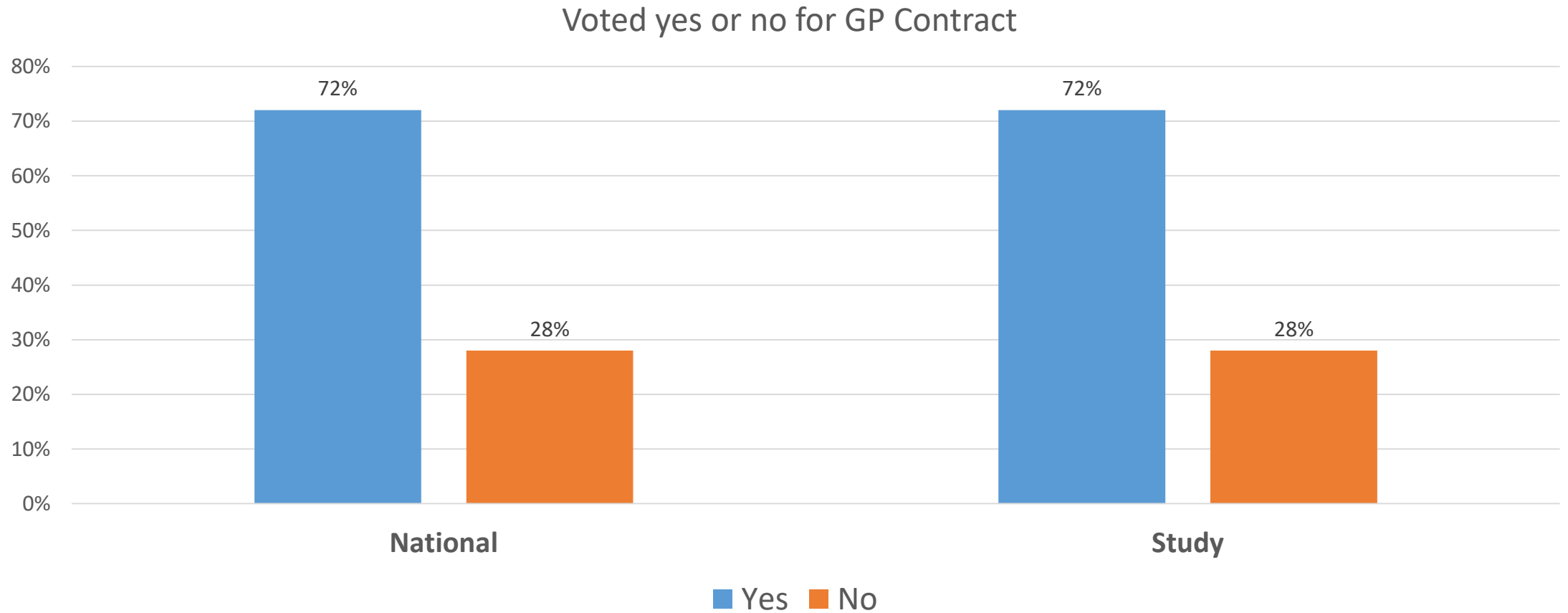
Courtesy of D. Begg

# Thank you!

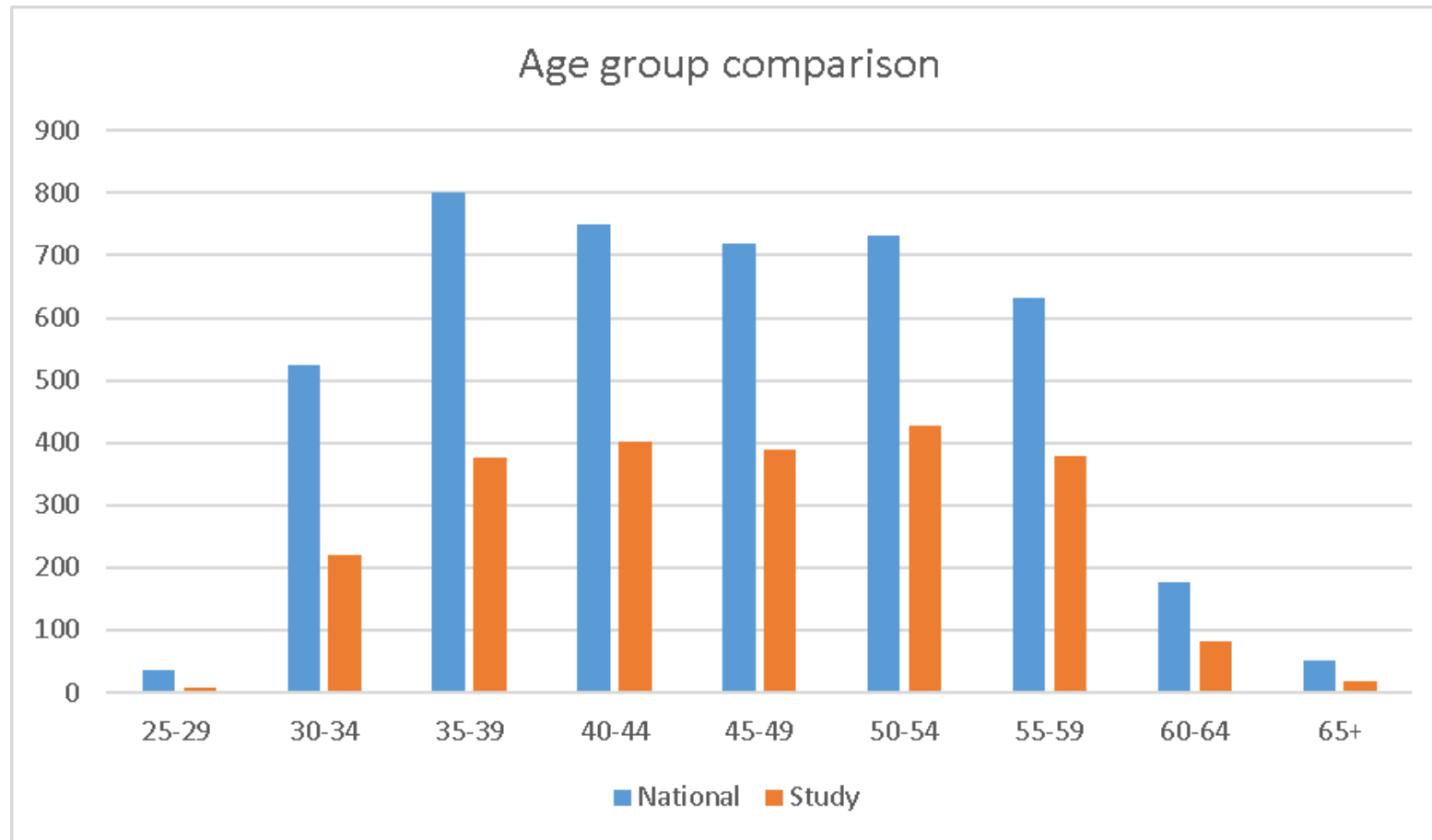
- Questions?



# Voting pattern in Scottish GP Contract (Phase 1)



# Age distribution of Study Respondents similar to National (Scottish) data



# As was gender distribution....

