

## BRIDGE LANE GROUP PRACTICE - PATIENT GROUP

### PATIENT BRIEFING

*Our most recent Briefing was in the Practice on Wednesday 7 February and was open to all patients of Bridge Lane.*

*We had a Practice Update with Dr Pearson then a Question & Answer session with practice staff.*

*It was an interesting session, and thanks to those who came out on a cold evening.*

### COMMITTEE

*We are keen to widen our patient committee (see below for some detail).*

*This would involve attending 6 committee meetings per year - contact Jamie Gillespie on 07710-426694 for more information.*

### FUNDING NEWS

NHS England has said it was 'forced' to cut primary care transformation funding last year due to inflation and energy cost pressures. The national commissioners' annual report for 2022/23, published recently said it needed to find extra funding to cover higher energy costs and inflationary pressures. As a result, NHSE had to cut other funding streams, particularly for primary care and digital investment.

Recent figures showed that general practice funding per patient has seen a real terms cut of 7% since 2019.

Another relevant statistic is that the share of the NHS budget spent on GP/primary care is about to drop to 8.4% - the lowest in 8 years according to *Health Services Journal* (Jan 2024).

***The lack of primary care investment is 'one of the most significant policy failures of the past 30 years', one of the country's most influential health think-tanks has said. The NHS in England 'must be radically refocused to put primary care at its core', according to a new report by the Kings Fund.***

It pointed out that on average there are more than 876,164 GP appointments in the NHS every day – an increase of 34,219 appointments a day since 2018/19 – but that despite this rise in demand, the proportion of DHSC spending on primary care has fallen – from 8.9% in 2015/16 to 8.1% in 2021/22.

The report said: 'The failure to grow and invest in primary and community health and care services despite the often-avowed intention to do so, must rank as one of the most significant and long-running failures of policy and implementation in the NHS and social care over the past 30 years'.

'Future growth in funding and staffing needs to be directed proportionately more to primary and community health and care services rather than to acute hospitals'.

King's Fund chief executive Sarah Woolnough said: 'Many people across the country will have personal experience of struggling to get a GP appointment, trying to contact other services, and when all avenues have been exhausted, reluctantly going to A&E. It feels like all roads lead to the hospital, but our hospitals are already full'.

## PATIENT GROUP

*The Patient Group is organised by a committee consisting of Zenobia Cowan-Davies (chair); Jamie Gillespie (secretary); Julia Rossman; Barrie Temple; Laura Roberts and David Herbert.*

*It acts as a link between Bridge Lane Group Practice and its patients and works to (a) contribute to the improvement of services (b) ensure the Practice is responsive to the needs and wishes of patients (c) help patients take more responsibility for their health. We appreciate your messages and suggestions - please keep them coming.*

## PRACTICE UPDATE

GP numbers nationally are falling and the Practice has been fortunate to recruit three new doctors. A big welcome to Dr.s Alisha Patel, Anna Stubbens and Charlotte Hine. They will each contribute two days per week. We hope to bring you more news about them soon.

## GP PATIENT SURVEY

The annual national survey has begun. It is designed to give patients the opportunity to provide feed back about their experiences of their GP practice. It is organised by NHS England and Ipsos.

Around 2.4 million patients in England will be randomly selected to answer a questionnaire about their experiences. If you receive one, **please be sure to complete and return it.** Last year 533 Bridge Lane patients were selected but only 137 completed it. This data is essential for making improvements to the primary care we receive from the Practice.

## THE PATIENT STORY

I have been reading a newly published book - The Crisis of Narration by Byung-Chul Han (published by Polity). The author is interested in our information-saturated, phone fixated, digital enabled age. Han describes the effects of this on storytelling.

In one chapter he reflects on the strange death of storytelling in GP surgeries. Doctors have neither the time nor the patience to listen. "Instead of telling my GP my ailments, today I am encouraged to post symptoms on an app called Dr iQ, which is designed to make medical care more efficient. But only certain forms of narration are permissible: the app encourages patients to cram symptoms into tick boxes that seem devised expressly to prevent one giving a rich, subjective account of how one is feeling. We are reduced to identikit puppets with identikit symptoms. Quality of care? A tale told by an idiot, signifying nothing."

This rang alarm bells with me. Perhaps we are losing the skill (or opportunity) to tell our story to our GP? Do you agree? Is our patient story still important? Please let me know what you think?