NHS Rotherham Clinical Commissioning Group

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A & E delivery board: 1 February 2017

GP access

Lead Executive:	Chris Edwards
Lead Officer:	Jacqui Tuffnell
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Purpose:

The purpose of this paper is to provide assurance in relation to the increasing capacity being provided in general practice to meet the growing demand.

Background:

A key expectation of NHS England in the GP Forward View is to improve access in general practice. A separate paper has described and approved a pilot of Saturday general practice provision and these arrangements commenced on 14 January 2017. There are now 3 'hubs' open each Saturday providing routine appointments for Rotherham population.

Like most other areas, Rotherham practices are struggling with demand for their services. All practices in Rotherham are currently undertaking a programme 'productive general practice' which looks at areas within the practice which could be amended or improved to release capacity/improve systems. Practices are also considering alternative workforce models as per the CCG workforce plan with many already employing Advanced Nurse Practitioners and a smaller number with Clinical Pharmacist roles.

Rotherham also has the highest proportion of GPs and Practice Nurses in the age bracket 55-59 with insufficient numbers of GPs and nurses coming through to fully backfill. Rotherham CCG is therefore working with NHSE on any initiatives to support recruitment and retention.

4 practices chose not to participate in the audit.

Analysis of key issues and of risks

The attached report identifies the significant increase in capacity from 2015 to 2016, over 92000 more appointments being provided in primary care. This will include a change in service in October 2015 of all phlebotomy now being provided in general practice when some inner city practices received a phlebotomy service via the community health centre.

Workforce is not increasing at the same rate as demand. Therefore if demand continues to increase at this rate, without further workforce investment, waiting times for appointments will increase and the expectation that there will be continued secondary to primary transfers will be difficult to achieve. To mitigate this, work will continue to encourage practices to diversify their workforce by ensuring their skill mix is correct and better use of unqualified nurses, clinical pharmacists, therapists and associate physicians.

Financial Implications:

N/A

Human Resource Implications:

Practices need to keep reviewing their structures and ensuring they are appropriately succession



planning.

Procurement:

N/A

Recommendations:

To note the increase in appointment capacity across Rotherham and continuing action to meet the levels of demand.

