TO: HEALTH OVERVIEW & SCRUTINY PANEL

12 JANUARY 2017

RESPONSES TO THE REPORT OF THE OVERVIEW AND SCRUTINY REVIEW 'A REVIEW OF WHETHER THERE IS SUFFICIENT GENERAL PRACTITIONER CAPACITY IN BRACKNELL FOREST TO MEET FUTURE DEMANDS'

Assistant Chief Executive

1 PURPOSE OF REPORT

1.1 This report introduces the attached responses by the Executive, the Clinical Commissioning Group and the Joint Commissioning Committee to the report of the Overview and Scrutiny review of whether there is sufficient General Practitioner capacity in Bracknell Forest to meet future demands.

2 RECOMMENDATION(S)

2.1 That the Panel considers the response of the Executive and the NHS to the review of whether there is sufficient General Practitioner capacity in Bracknell Forest to meet future demands, undertaken by one of its working groups.

3 REASONS FOR RECOMMENDATION(S)

3.1 To enable the Panel to consider the attached responses to the report of the review of whether there is sufficient General Practitioner capacity in Bracknell Forest to meet future demands undertaken by one of its working groups.

4 ALTERNATIVE OPTIONS CONSIDERED

4.1 None.

5 SUPPORTING INFORMATION

- 5.1 The report's recommendations to the Executive were:
 - a. The Council should engage both by Members and Officers more proactively with the Joint Commissioning Committee (JCC), for example by attending all meetings or arranging a substitute as necessary.
 - b. The Health and Wellbeing Board (being the forum where the Council and the Clinical Commissioning Group (CCG) come together) should review what needs to be done to establish and maintain clear communication of health needs. This should include clear commitments in the Comprehensive Local Plan, and reference to healthcare facilities in the Community Infrastructure Levy Infrastructure Delivery Plan/ Regulation 123 List or Section 106 agreements.
 - c. Both the Comprehensive Local Plan, and the aims of the Health and Wellbeing Board should explicitly recognise the need to ensure that the

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necessary healthcare facilities will be in place to meet the demands of the expanding population.

- 5.2 The response from the Clinical Commissioning Group incorporates the response of the Joint Commissioning Committee. The report's recommendations to the Joint Commissioning Committee were:
 - d. Encourage Practices to have a good range of specialist interests and then make those services available to patients beyond their own List. This is in line with the Forward View and the STP, whereby the CCG should look to commission locally delivered services where appropriate, based around practices, clusters of practices, or integrated service delivery hubs.
 - e. Adopt a target, based on best practice, for the GP patient survey satisfaction survey question about the ease of making an appointment at a GP Practice. The JCC should openly and regularly monitor the achievement of that target by all GP Practices.
 - f. Re-state clearly and comprehensively who are the partner organsations involved in ensuring sufficient GP capacity, how they have a shared commitment to the task of ensuring there is sufficient GP capacity, and say how their performance is to be monitored and reported openly.
 - g. Systematically collect and publish data on workload and workforce, etc., to ensure that their plans are intelligence-led and timely.
 - h. Periodically publish information showing that they are aware of the changing population numbers using figures agreed with the Council showing that they are responding to forecast changing levels of demand.
 - i. Periodically publish information showing the changing pattern of long term conditions and that they are responding to changing levels of demand.
 - j. Do more to minimise the call on GPs' time through more health promotion and encouraging self care.
 - k. Devise a method to strategically capture different ways of working in GP Practices and best practice possibilities and circulate the information to all Practices.
 - I. Explore the feasibility of Bracknell Forest having a GP 'Training Hub'. Also, to optimise patient care, the JCC should explore the feasibility of supplementary roles, for example introducing 'Physician Associates'.
 - m. Continue its efforts to transfer appropriate work from GPs towards Nurses and Health Care Assistants; and with Health Education England and other partners seek to address any shortage of capacity in those professions locally.
 - n. Consider how to improve capacity and economies by making fuller use of pharmacists and other appropriate professionals.
 - o. Seek to minimise non-clinical contact, such as better signposting on GP Practices' websites and in surgery waiting rooms on where to go for help, which would help to divert people with non-medical issues elsewhere.
 - p. Explore what initiatives could be taken to minimise the clinical time lost through some patients not turning up for their appointments.
- 5.3 The report's recommendations to the Clinical Commissioning Group were:
 - q. Ensure, through their commissioning of hospitals, and the Sustainability and Transformation Plan, that work is appropriately shared between GP Practices and hospitals.
 - r. Explain the reasons for the delay in producing their Estates Strategy and give a firm date for its completion.

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- 5.4 The Health Overview and Scrutiny Panel has previously accepted the report's recommendations to the Panel:
 - s. Monitor the progress of the *Sustainability and Transformation Plan*, and the *General Practice Forward View*, robustly and regularly.
 - t. Carry out a follow up to this review in 18-24 month's time, specifically to see whether the STP and the 'General Practice Forward View' are being delivered successfully, and whether the pressure on GPs is at a sustainable level in the light of increased demand, particularly from new housing developments.
- 6 ADVICE RECEIVED FROM STATUTORY AND OTHER OFFICERS / EQUALITIES IMPACT ASSESSMENT / STRATEGIC RISK MANAGEMENT ISSUES / CONSULTATION
- 6.1 Not applicable.

Background Papers

Report of the Overview and Scrutiny Review of whether there is sufficient General Practitioner capacity in Bracknell Forest to meet future demands, 29 September 2016

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