



Derby City Council

**PROTECTING VULNERABLE ADULTS  
OVERVIEW & SCRUTINY BOARD  
25 October 2016**

# ITEM 5

Joint Report of the Chief Officer Southern Derbyshire CCG and Strategic Director of People Services

## GP Surgeries Access

### SUMMARY

- 1.1 At the December 2015 meeting of the Protecting Vulnerable Adults (PVA) Board members received a presentation from Southern Derbyshire CCG (SDCCG) about the experience of patients trying to access local GP services.
- 1.2 It was recognised that responsibility for commissioning GP services had only recently transferred from the “NHS Area Team” to SDCCG.
- 1.3 The December 2015 presentation highlighted the wider issues facing GP services in the city. SDCCG undertook to work with GP surgeries to share best practice and where possible address the issues contributing to poor patient access experience, in some surgeries.
- 1.4 This presentation to the Board shall provide an update on the progress made since the last report. In addition, the presentation shall explore the themes from the national NHS GP Forward View (April 2016) and the local response.

### RECOMMENDATION

- 2.1 To note the targeted work being undertaken to improve GP access.
- 2.2 To note the reforms required in the GP Forward View and local progress.

### REASONS FOR RECOMMENDATION

- 3.1 PVA Board members requested an update on GP access experience at their meeting in December 2015.
- 3.2 To provide an opportunity for PVA Board members to make further comments on progress and the reforms contained within the GP Forward View.

## SUPPORTING INFORMATION

- 4.1 Members will be aware of the issues facing people trying to access their GP surgery in a timely way. It is well documented that primary care and general practice in particular is under considerable strain, locally and nationally.
- 4.2 The national GP survey can throw some light on the experience of people trying to access GP services in Derby. The latest Survey was undertaken in July 2016.
- 4.3 We know that demand for service is increasing significantly due to an ageing population and people with co-morbidities, long term conditions and complex needs, all on the increase.
- 4.4 The GP workforce is an ageing cohort of professionals. We also know that per head of the population Derby and Derbyshire is under doctored. The attractiveness to newly qualified GPs of Derby and Derbyshire has been limited in the past.
- 4.5 The traditional GP practice self-contained service model is not viable moving forward. Investment and reforms are required if GP services are to be sustainable into the future.
- 4.6 The presentation highlights the work that has been undertaken with local GP surgeries to address issues facing individual practices.
- 4.7 The presentation also highlights the work to be undertaken in the future as a result of the GP Forward View to improve the sustainability and quality of GP services in the city.

## OTHER OPTIONS CONSIDERED

- 5.1 None

**This report has been approved by the following officers:**

<b>Legal officer</b> <b>Financial officer</b> <b>Human Resources officer</b> <b>Estates/Property officer</b> <b>Service Director(s)</b> <b>Other(s)</b>	Perveez Sadiq Kate Brown (SDCCG)
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**For more information contact:**

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<b>Background papers:</b>	Jacquelynn.Dominiczak@derby.gov.uk
<b>List of appendices:</b>	None Appendix 1 – Implications

<b>IMPLICATIONS</b>
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**Financial and Value for Money**

1.1 None arising as a direct result of this report.

**Legal**

2.1 The local authority has the power to scrutinise local health services under the NHS Act 2006. Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 (“the Regulations”), which came into force on 1st April 2013.

**Personnel**

3.1 None arising as a direct result of this report.

**IT**

4.1 None arising as a direct result of this report.

**Equalities Impact**

5.1 None arising as a direct result of this report.

**Health and Safety**

6.1 None arising as a direct result of this report.

**Environmental Sustainability**

7.1 None arising as a direct result of this report.

**Property and Asset Management**

8.1 None arising as a direct result of this report.

**Risk Management and Safeguarding**

9.1 None arising as a direct result of this report.

**Corporate objectives and priorities for change**

10.1 Creating healthy sustainable communities to maximise independence, choice and life opportunities.