**Response to Report: *Getting an appointment with your GP***

**ORGANISATION: Surrey Downs Clinical Commissioning Group**

**DECISION MAKER: Karen Parsons (Director of Operations)**

**RECEIVED: 24/10/2014**

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| **Summary** |
| Surrey Downs CCG recognises that GP access is both a local and national issue. Currently CCGs do not commission GP services. This responsibility lies with NHS England. However, we are working closely with our GP membership practices to develop local GP networks, which will provide a larger range and greater access to primary care services provided by GPs.  We are also working closely with all our provider and partner organisations to increase both access to and variety of care in the community. The CCG also supports the use of new technical advances, such as Telehealth, which allow a patient to have access to specialist support and advice within their own home.  The CCG has set up a local System Resilience Group to look at schemes that benefit patients and the whole health economy during times of greater need, such as winter pressures. Projects this year include:   * Working with councils and the voluntary sector to provide ‘winter warm’ packs out to the elderly, including helping with boiler repairs * Increasing transport links for community and acute appointments * Supporting national campaigns and awareness of self-care   The CCG has submitted bids to NHSE to also look at additional out of hours paediatric support in ED and extended GP hours for 8-8 working. We are also working with local partners and GP’s to design a spoke and hub model for community MDT teams, providing holistic and rapid assessments to support our local patients and carers. |
| **Quote** |
| Surrey Downs CCG works closely with our GP membership practices to support them, where we are able. This includes looking at technical advances that can improve GP provision and access to services. As a commissioner we also review the community services that are available to support practices and are currently working with our GPs to develop networks, which will increase the number of services available and free up GPs to deal with their diverse populations.  Karen Parsons, Director of Operations |
| **Detail** |
| Are there experiences documented in the report that you were not expecting? |
| No, GP access is a nationally and locally recognised problem. Each individual GP contractor has different ways of managing their appointment systems, (not standardised). This, coupled with increasing GP demand on increased consumer expectations, has impacted on access. |
| What work, initiatives or decisions are you aware of that will support improvements in the experiences of people accessing GP services in the next 12 months? |
| SDCCG is developing GP networks, which brings GP practices together to provide services. This will improve GP access by freeing up GP times to manage their diverse population. Primary Care co-commissioning are currently exploring with our GP’s on how we could take delegated functions. |
| What are the main barriers to improvements in the experiences of people accessing GP services? |
| • Access times  • Complexity of patients health issues  • Lack of investment in Out of Hospital care, (acutes over-performing). |