

Report to: East Sussex Health Overview and Scrutiny Committee (HOSC)

Date: 29 March 2018

By: Assistant Chief Executive

Title: GP Access

Purpose: To provide an overview of East Sussex Clinical Commissioning Group (CCG) strategies for ensuring accessible and sustainable GP services for the county.

RECOMMENDATIONS

HOSC is recommended:

- 1) To consider and comment on the East Sussex CCG reports.
 - 2) To consider whether further scrutiny of this issue is required.
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1. Background

1.1 The Health & Social Care Act (2012) changed commissioning arrangements for GP practices. Formerly the responsibility of local Primary Care Trusts (PCTs), primary care commissioning was transferred to NHS England (NHSE) Area Teams from April 2013.

1.2 In November 2014, the Department of Health introduced a co-commissioning initiative. This offered CCGs the opportunity to work with NHSE Area Teams to 'co-commission' GP services.

1.3 In East Sussex, Eastbourne, Hailsham & Seaford CCG and High Weald Lewes Havens CCG both opted to be early adopters of co-commissioning. Hastings & Rother CCG began co-commissioning from April 2016. Co-commissioning arrangements subsequently developed into full delegation of primary care commissioning in many areas, including East Sussex. Local CCGs therefore now have responsibility for planning, commissioning and monitoring local GP services for their populations.

1.4 Most GP practices are independent businesses which are contracted to provide NHS services by commissioners. All GP practices providing NHS services are required to be a member of a CCG. Both nationally and locally GP practices are increasingly working together in various forms of partnership or federation to share resources and provide a wider range of services locally.

2. Supporting information

2.1 HOSC Members have raised a number of issues in relation to GP services which this report aims to address, falling into three main areas:

- **The sustainability of GP services** – particularly in relation to workforce challenges, population growth and rising demand.
- **Practice closures** – the reasons why closures occur, the process for managing these and the impact on patients and other local practices.
- **Accessibility of GP services** – including availability of appointments, use of digital technology to improve access and the physical accessibility of premises.

2.2 Local CCGs have provided reports outlining their approach to ensuring accessible and sustainable GP services for their populations. Appendix 1 is a report from Eastbourne, Hailsham and Seaford and Hastings and Rother CCGs on the approach being taken through the East Sussex Better Together programme. Appendix 2 is a report from High Weald Lewes Havens CCG on the approach being taken through the Connecting 4 You programme. Representatives of the CCGs will be in attendance to discuss the reports with HOSC.

3. Conclusions and reasons for recommendations

3.1 HOSC Members have raised a number of issues in relation to the sustainability and accessibility of GP services which this report aims to address. The committee is invited to consider the reports from local CCGs and whether further scrutiny of this issue, or specific aspects of it, is required.

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