

Subject: Access to GP Care

Report to: Health Committee

Report of: Executive Director of Secretariat

Date: 24 June 2015

This report will be considered in public

1. Summary

1.1 This paper sets out for noting the committee's report on access to GP care in London.

2. Recommendation

2.1 **That the Committee notes its report *Access to GP Care*, as agreed by the Chair under delegated authority, in consultation with the Deputy Chair.**

3. Background

3.1 The Committee first met in February 2014 to discuss access to GP care in London. After a further formal meeting in July 2014 and desk based research by officers, a report was drafted making recommendations based on the work the Committee had undertaken.

4. Issues for Consideration

4.1 In March 2015, the Committee delegated authority to the Chair, in consultation with the Deputy Chair, to agree the Committee's report on access to GP care. Following the Chair's agreement, the Committee published its report in March 2015.

4.2 The full report is attached for Members and officers only, but can be found on the London Assembly website at: www.london.gov.uk/mayor-assembly/london-assembly/publications/access-to-gp-care.

4.3 The report made the following recommendations:

Recommendation 1

We urge NHS England (London), in partnership with Health Education England, to commission work to evaluate the reasons for low morale amongst serving GPs, and to look at ways in which new recruits can be attracted to the profession, and encouraged to remain. We recommend that money be set aside for this from the proposed London Transformation Fund, recommended by the London

Health Commission, to fund investment in strategic change to improve care.

Recommendation 2

NHS England (London) should conduct a wholesale review of its Information Technology Strategy in the capital, and explore how it might provide general practice with the digital capability it needs, to improve patient access and care. We recommend that the review include an evaluation of the impact of technology, on demand for GP appointments.

Recommendation 3

NHS England (London) should commission and facilitate general practice to explore and embrace alternative ways of working, to ensure inclusive patient access that meets the need of London's diverse population. These can include the adoption of alternate service models, and better use of technology, where appropriate.

Recommendation 4

The increasing demands on NHS services, including primary care, necessitate a whole-system review so that services and financial flows can be integrated. Changes to one part of the NHS system will inevitably have an impact elsewhere and could lead to unintended consequences. We recommend that NHS England (London), in its review of general practice, incorporates analysis of the impact changes to the wider primary and community care infrastructures could have, on general practice service provision.

Recommendation 5

Alongside the need to develop and increase the primary care workforce, improving existing GP premises, and investing in new ones will be essential to enable the increase in capacity needed, to cope with the demographic and service challenges faced by general practice. As the largest land owner in London, the Mayor can, through better planning, play a major role in relieving the crisis in general practice premises. The Committee urges the Mayor, to work with NHS England (London) to improve the primary care estate.

5. Legal Implications

- 5.1 The Mayor of London's statutory responsibilities in relation to health matters, as set out in the Greater London Authority (GLA) Act 1999, are to develop a strategy which sets out "proposals and policies for promoting the reduction of health inequalities between persons living in Greater London". The GLA Act 1999 defines health inequalities as inequalities between persons living in Greater London "in respect of life expectancy or general state of health which are wholly or partly a result of differences in respect of general health determinants" and also goes on to define "health determinants". The Mayor of London has no statutory role in the commissioning of any health services or health service provision.

6. Financial Implications

- 6.1 There are no direct financial implications arising from this report.

List of appendices to this report:

Appendix 1 – *Access to GP care*

Local Government (Access to Information) Act 1985

List of Background Papers: Member's Delegated Authority Form 584

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