

## Welcome



The NHS Long Term Plan sets out a series of aspirations for the health service and fundamentally redefines how we will deliver care to our population. The Plan, drawn up by those who know it best - including frontline health and care staff, patient groups and other experts - recognises that primary care remains the bedrock of our NHS.

I was delighted to see some great examples of GP Forward View work from our region featured at publication earlier this month (January 2019), such as the excellent video about [social prescribing in Hertfordshire](#).

As the pages of this Bulletin illustrate, the innovative work that will deliver the Long Term Plan's aims for primary care continues to grow across Midlands and East.

With their specialist knowledge of the areas they serve and the patients they care for, GPs and their wider multidisciplinary teams are best placed to improve the health and well-being of local residents. But general practice has also faced challenges in recent years, with particular difficulty in some areas recruiting and retaining enough staff to meet rising and increasingly complex caseloads.

In response to this challenge, GPs and their teams are increasingly coming together with other practices to form primary care networks, which can employ a greater variety of professionals to provide a wider range of services for patients.

Over the next few years, we will support commissioners, GPs and their teams to develop these networks, which will work with hospitals, community teams, social care and voluntary services, to help people stay well and better manage their own conditions.

This will be backed by increased funding, with an extra £4.5bn a year going to primary and community care by 2023/24, coupled with concerted action to recruit 5,000 more GPs, alongside other professionals to work with them.

And as people's preferences change, we will provide support to enable every primary care network to offer 'digital first' services, in a way that maintains quality for patients and benefits the whole NHS.

On 1 April we will become two regions - East of England and Midlands - to facilitate the closer alignment of NHS England and NHS Improvement. Implementing the GP Forward View will continue within these new regions and the planning process will ensure a seamless transition so that the excellent work achieved to date continues in 2019 and beyond.

**Dr Paul Watson**  
Regional Director, NHS England (Midlands and East)

## To ensure a strong future for primary care, the NHS Long Term Plan will:

- Increase investment in ‘out of hospital’ primary and community health services by £4.5bn a year by 2023/24, to ensure that staff and services are available close to people’s homes.
- Deliver a further 5,000 GPs, alongside other roles such as pharmacists, counsellors, physios and nurse practitioners, to ensure that GPs’ skills are focused on where they can best help patients.
- Support GPs and their teams to work more closely with colleagues in other practices across an area, so that they can offer better access and more services and proactive care for patients.
- Help practices embrace new digital-first services, providing convenient access to care and advice, in a way that is safe and provides fairness for all kinds of GP practices.



Find out more: [www.longtermplan.nhs.uk](http://www.longtermplan.nhs.uk)

Join the conversation: [#NHSLongTermPlan](https://twitter.com/NHSLongTermPlan)

## Multidisciplinary teams to boost patient care and staff satisfaction



**Dr David Levy, Regional Medical Director for NHS England (Midlands and East), considers the aims of the Long Term Plan for the primary care workforce:**

The Long Term Plan sets out how we will progress and build on the work that has been started through the GP Forward View to further develop the multidisciplinary provision of primary care – to improve care for patients, further develop resilience and provide an attractive place to work. The creation and development of primary care networks is an important step to delivering these improvements.

With a restated commitment to deliver a further 5,000 GPs, work to increase doctor numbers will continue with new retention schemes being rolled out locally, further initiatives to expand international recruitment, and funding to encourage GP trainees to work in hard-to-recruit areas.

The Plan also explains how we will further expand the workforce with more pharmacists, physiotherapists, mental health therapists, social prescribers, and physician assistants.

Nationally there are now over 5,000 more health professionals like these working in primary care than three years ago, as NHS Digital figures released in November 2018 show - that exceeds NHS England’s target of an additional 5,000 by 2020 as set out in the GP Forward View.

## Featured in this issue

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# Physician Associates

## Unique Staffordshire scheme helps bolster general practice

North Staffordshire GP Federation is continuing to lead the way in supporting local practices and other healthcare providers, thanks to a pioneering Physician Associate (PA) internship programme.

The fourth cohort of PAs joined the one-year programme recently. The internship is an opportunity for, predominantly, new PAs to develop skills in primary and secondary care with a supported, supervised and (for GP practices) subsidised scheme. This allows practices and PAs to learn how they can best work together.

The teaching element of the internship is primary care focused. The PAs value the educational content, which covers a wide curriculum, and the peer support and networking.

The teaching team has expanded as the programme has grown and now comprises senior GP Tutor Dr Jonathan Wright, Dr Anil Sonnathi and PA Ambassador Alex Scrivens-Joyce, who said:

“In the relatively short time since it was launched, we now have 17 Physician Associates working across Staffordshire and Stoke-on-Trent, with more on the way.

“All of them are helping to bolster general practice, and acute and mental health care locally. That’s extremely rewarding for me and a real feather in the cap for the local system here to have the only programme like this in the UK.”

The programme has received visits from various sectors of the NHS keen to replicate the internship. Shropshire and Telford & Wrekin are now developing a similar model and working in partnership with the Staffordshire team to commission the teaching programme.



Celebrating the first internship cohort to graduate are from the left: Cymone Argent – PA; Lucy Minshull – Project Manager; Dr Jon Wright – Senior GP Tutor; Dr Sharon Turner – Clinical Lead and Elita Unyolo – PA.

**An academic evaluation of the Staffordshire PA Internship funded by Health Education England is due to be finalised in the early part of this year.**

The work has been undertaken by Dr Lizzie Cottrell of Wolstanton Medical Centre, the Keele University academic practice.

Patient questionnaires that form part of the evaluation have included comments such as “I really appreciated the time taken and the decision for a second opinion. It showed to me empathy and care” and “Listened fully to symptoms, consulted with GP and I felt I was given the same treatment as a GP”.

Feedback from PA graduates, those currently on the internship programme, and GPs from receiving practices is similarly positive.

**North Staffordshire GP Federaton is holding the first-ever Primary Care for Physician Associates conference on Thursday 13 June. For further details please contact Lucy Minshull at [lucy@howbeckhealthcare.co.uk](mailto:lucy@howbeckhealthcare.co.uk).**

**NHS Castle Point and Rochford CCG Workforce Team (on behalf of the CCGs in Mid and South Essex STP) has produced a leaflet aimed at general practice that describes what a Physician Associate is, what they can do, how best to introduce them to their new role, and even a diary of a typical day. It is available to [download online](#).**

# GP retention

## Great response from West Midlands GPs to local career support

Following the successful launch of its first GP retention schemes in The Black Country and West Birmingham, the STP has received 240 expressions of interest from local GPs, including 190 applications to access career support.

The workforce schemes encourage local GPs to stay in general practice and offer:

- Up to £10,000 for training
- Flexible working opportunities
- A network for newly qualified GPs/early career GPs/GP trainees
- Peer support and career mentorship
- Collaborative arrangements to support both individual GPs and their practices
- Opportunities for continued professional development (CPD) credits and career development.

Co-designed with local GPs, they include:

### First 5 and GP Trainee Network

In December, 45 newly-qualified GPs and GP trainees and their families attended a launch event to socialise, meet local senior GP leaders and find out what support is available to them, which proved very successful and a model which might be rolled out across the region.

### Portfolio career support

This is proving very popular with GPs at all stages in their career. The STP's intention was to support 16 to 20 but this number is likely to increase due to further funding being secured.

### Wise 5

GPs who are considering or approaching retirement (Wise 5) act as expert advisers to less-experienced colleagues on such issues as partnerships, estate, and pensions, and can also act as mentors providing 1:1 support.

Also added recently are further initiatives such as a leadership programme for GPs, coaching for practice managers, and a workshop to explore opportunities for improved integration and interface with secondary care.

Places on each of the schemes, which are currently open for further applications from GPs working in The Black Country and West Birmingham, are limited. For further information, contact [england.blackcountry.gpfv@nhs.net](mailto:england.blackcountry.gpfv@nhs.net).

The Black Country and West Birmingham STP is one of seven GP Retention Intensive Support Sites (GPRISS) being funded nationally, and is receiving up to £400,000 to promote new ways of working and offer additional support to local GPs.

Midlands and East has a second GPRISS site in Mid and South Essex STP.

Find out more in this [video](#) about the work taking place through the GPRISS programme.

Retention of the GP workforce is a key national and regional priority. The other 15 STPs in Midlands and East are being supported with funding to provide support tailored to their local areas through the [Local GP Retention Fund](#).



Those responsible for delivering the GPRISS sites across England met up at the end of 2018 to their share experiences and discuss next steps.

# International GP recruitment

## On the ground support

Each STP in Midlands and East has a co-ordinator who acts as the point of contact for doctors interested in moving to a local area through the International GP Recruitment programme.

Providing pastoral support is an important part of their role - and local IGPR co-ordinators Sonia Carnegie (left of picture) and Eleanor Ward (right) found that taking new recruit and football fan Dr Gabriel Calfa from Romania to a match at Ipswich Town Football Club was the perfect way to introduce him to local life and culture.



Eleanor (Norfolk and Waveney) and Sonia (Suffolk and North East Essex) liaise between the recruitment agency, candidate, NHS England and the employing practice in order to ensure that a doctor's transition to the UK is as smooth as possible.

"With the support of our project manager, we play to our individual strengths, with each member taking responsibility for a certain aspect of the programme," explained Eleanor. "We are a proactive team, anticipating risks and also taking advantage of opportunities as soon as they emerge."

"We've taken the initiative to build up a relationship with the recruiter over the past few months, including doing a short video to introduce ourselves to potential recruits. As our recruitment company is based overseas, maintaining this rapport has been crucial in ensuring we work collaboratively to overcome obstacles. It also means we have access to the most current information that we can then act on immediately."

"We have also ensured that we are linked into the local primary care workforce teams," added Sonia. "This avoids duplication of resources, and it also makes our team more aware of potential opportunities for collaborative working, such as the pastoral support projects specific for Norfolk and Suffolk."

For further information, please contact [eleonor.ward2@nhs.net](mailto:eleonor.ward2@nhs.net) or [sonia.carnegie@westsuffolkccg.nhs.uk](mailto:sonia.carnegie@westsuffolkccg.nhs.uk).

## Sharing on screen

NHS England and the General Medical Council (GMC) have organised a series of video conferences for all international GPs joining the NHS in England, whether they are considering applying, have started the application process or are already working in England.

The sessions will use real-life situations to discuss the complexities of the NHS, the role of the GP and practical application of GMC guidance. The lunchtime sessions run until 3 July 2019 covering different themes.

The GMC also runs a free half-day [Welcome to UK practice](#) programme for any doctor new to the UK.

For more information contact [alexio.gardiner@gmc-uk.org](mailto:alexio.gardiner@gmc-uk.org).

# Central Midlands expansion starts in LLR



One of the initial pilots for the International GP Recruitment programme was in Lincolnshire, and this is now going to be extended to the four other STP areas in the Central Midlands DCO.

The local team will deliver this expanded scheme, with oversight and continued involvement from NHS England's national team, alongside colleagues from HEE and other partners as necessary to ensure successful delivery. Learning will continue to be fed back into the national programme.

The Central Midlands programme started off with a stakeholder engagement event in November 2018. Since then, plans for recruiting GPs to Leicester, Leicestershire and Rutland as the initial STP area in the DCO have been in development.

LLR practices interested in taking part attended a planning event with the recruitment company, Paragona, and key leaders from the primary care system in January.

LLR project lead Tine Juhlert said: "I was delighted with the attendance and the commitment to finding a solution to the current vacant posts. A further engagement event with practices is taking place in early February."

For more information about the Central Midlands programme, please contact [jillian.guild@nhs.net](mailto:jillian.guild@nhs.net).

## Help to start a new life

Kim Tolley has been seconded from the General Medical Council to NHS England as training development adviser to the IGPR programme.

"My role is to help support the international doctors throughout their recruitment journey," Kim said.

"They may be worried about how the NHS works and how a GP functions within this complex structure – and may not have experienced some aspects of clinical care in the UK in their home country."

If anyone would like to book the GMC Regional Liaison service to run GP trainee sessions or has any questions about the GMC support for the IGPR programme, please contact [kim.tolley@gmc-uk.org](mailto:kim.tolley@gmc-uk.org).

## Going down under

NHS England is now actively recruiting Australian doctors, or UK doctors working in Australia, through the IGPR programme. Two recruitment agencies have been appointed to actively market opportunities in Australia.

Doctors from outside the EEA must complete the Certificate of Eligibility for General Practice process in order to practise in England. For Australia-trained GPs qualified under curricula from 2007 onwards, NHS England has now agreed a new streamlined approach with the GMC and the RCGP.

This significantly reduces the timescales and the amount of evidence required, and includes a three-month supervised placement rather than I&R assessments.

## Tailored social media campaign

A new paid-for international social media campaign using social media sites such as Facebook and Instagram aims to target and attract capable family doctors to the UK.

The campaign, commissioned by NHS England's national team and due to launch in January 2019, is uniquely tailored to different countries and will build on a successful mini-campaign run at the end of last year which saw a significant increase in interest from potential GPs.

## Targeted programmes deliver more trainees

Eight areas across Midlands and East are to benefit from the latest round of a national scheme to recruit trainee GPs to work in areas where vacancies for family doctors are hardest to fill.

Under the [Targeted Enhanced Recruitment Scheme](#) (TERS), run by NHS England and Health Education England, the trainees must commit to working there for three years in return for a £20,000 “golden hello” funded by NHS England.

A total of 75 GP trainees will be supported in Midlands and East in this latest round of TERS. More than 500 trainee GPs have been recruited through the scheme since it started in 2016/17.

Dr David Levy, Medical Director for NHS England (Midlands and East), said: "Improving access to general practice services is a key priority for the NHS Long Term Plan and that is even more vital in areas that have historically found it difficult to attract GPs. TERS has already had a hugely positive impact in other parts of our region, such as Lincolnshire."

The TERS areas for 2019/20 are Boston & Lincoln: 18 GP trainees, Sherwood Forest: 12, Colchester & Ipswich: 6, Great Yarmouth: 6, King's Lynn: 6, Hereford: 6, Shropshire: 7, and Staffordshire: 11.

TERS supports HEE's specialty recruitment campaign.

HEE recruited the highest-ever number of people accepting offers of GP specialty training in NHS history last year, passing the annual target of 3,250 for the very first time. A total of 3,473 doctors were recruited in 2017-18, compared with 2,693 in 2015-16.

## Improvements to I&R scheme

Improvements have been introduced to the [Induction & Refresher Scheme](#), making it easier for clinicians to return to general practice after a career break, working abroad or trying a different profession.

These include an increase in relocation support for overseas returners up to £18,500; help with visa costs and sponsorship for UK-qualified, non-EEA clinicians; and no fees for returning via the portfolio route.

The scheme also offers flexibility around learning and personal needs, along with help with indemnity and other fees.

## GP nursing pilot launched in region



A pilot project to train and employ nurses who are new to General Practice or newly qualified was launched in the region at the end of last year (December 2018).

The nurses will be trained at Leicester's De Montfort University on a nine-month Fundamentals of Practice Nursing course and receive placement experience at a training practice. They will be supported to find permanent employment in Northamptonshire at the end of the course.

The initial project is a partnership between NHS England, Health Education England and the Northamptonshire Health and Care Partnership.

A further ten training places will be rolled out in Lincolnshire and ten more in another STP in NHS England's Central Midlands area in 2019. There will be an evaluation to see if the programme can be rolled out more widely on a sustainable basis.

## Benefits of a wider workforce

The successful implementation of a musculo-skeletal first contact practitioner is celebrated in a video featuring a practice in Lincolnshire.

GP Dr Majid Akram and physiotherapist Phil Richards discuss how the new role at The Deepings Practice in South Lincolnshire has resulted in better outcomes for patients and helped to reduce GP workload. You can view the [video here](#).

## New criteria ease access to clinical pharmacists

In response to feedback, the criteria for the [Clinical Pharmacist in General Practice programme](#) have been amended.

Providers covering a population of 15,000 are now able to make an application for one whole time equivalent clinical pharmacist - previously this had been per 30,000 population - and funding for part-time posts (minimum of a 0.5 whole time equivalent) is now available.

GP practices and other providers of general practice medical services can submit applications on an ongoing basis through the [clinical pharmacist portal](#). Application deadlines are:

- Wave 8 – closing date 22 February 2019
- Wave 9 – closing date 31 May 2019

[Read the blog](#) by Bruce Warner, Deputy Chief Pharmaceutical Officer on the benefits of relaxing the criteria.

## Active signposting delivers

Measham Medical Unit in Derbyshire reduced the number of inappropriate appointments from its urgent care clinic by 22%, helping patients who need urgent appointments to access them more easily.

The practice has a patient population of over 13,000 and nine GPs, of which 6.5 are whole time equivalents. When it started to see an increase in the number of minor illnesses presented at its urgent care clinic, it needed to find ways to prevent the problem from escalating.

One GP took the lead in rolling out active signposting as part of the work the practice was doing on the Learning in Action element of the [Time for Care programme](#). Find out more about what Measham did [here](#).

## Services to be boosted by ETTF investment

Patients in Earl Shilton, Leicestershire, are among the latest to benefit from NHS England's fund to improve local GP facilities.

Heath Lane Surgery has been awarded just under £780,000 from the [Estates and Technology Transformation Fund](#). Together with an investment from the practice, it will fund four additional consulting rooms, a surgical suite, an additional office and reconfiguration to the current administration space with relocation of medical records.

The improvements will enable the practice to offer pre-bookable appointments, increase the number of trainee doctors, and provide additional services to save patients having to travel to hospital, such as the Home-from-Home Renal Dialysis Unit and higher-tiered minor surgery. Work got underway in November 2018 and is expected to take around 40 weeks.

Dr Priestman of Heath Lane Surgery said: "How fortunate we are to be able to improve and extend the practice at a time when we are expecting patient numbers and demand to see health care professionals increase."

His colleague, Dr Lawrence, added: "This is an exciting development in order to provide increased healthcare and services to the people of Earl Shilton and surrounding areas."





# Primary care networks



**Dr Ken Deacon, Medical Director for NHS England (North Midlands), and Regional Lead for Primary Care Networks, welcomes their development as part of the NHS Long Term Plan:**

One of the key aims of the Plan is to enable GPs and their teams to work more closely with colleagues in other practices across an area, so that they can offer better access and more services and proactive care for patients. GP practices, no matter their size, will be able to work together and support each other through primary care networks (PCNs).

There is so much great work already going on in our region and we were delighted to see an example from Luton in our region featured as part of the Long Term Plan's launch earlier this month.

We look forward to working with all the GPs, practices and CCGs in Midlands and East to help build on what has already been achieved for the benefit of both staff and patients.

## Luton model delivers 3,000 extra GP appointments

A primary care network (PCN) model in Luton was showcased as part of the launch of the NHS Long Term Plan earlier this month (January 2019).

The specially-made video shows how GP practices in Luton have worked together to provide more than 3,000 extra appointments a year, including halving the number of appointments lost due to patient non-attendance. As well as freeing up appointments, the PCN model has led to Friend and Family satisfaction with services being positive nine times out of ten, while complaints have fallen by 12 per cent and £50,000 has been saved.

To achieve this, the GPs made a number of changes including altering the types of healthcare professionals in the practice, offering alternative appointments where appropriate, and introducing long-term conditions clinics.

Groups of practices have pooled their skills and resources to provide patients with access to more health professionals including GPs, pharmacists, paramedics, physician associates and specialist doctors. They can treat patients for a wide range of illnesses, ensuring they see the right person from the start, and freeing up the GPs to spend more time with patients who have complex needs.

Dr Nina Pearson, GP at Luton's Lea Vale Medical Group and GP lead for Bedfordshire, Luton and Milton Keynes Integrated Care System, said: "We now have a workforce that can see hope. They can see a possibility of working differently and being able to be in charge of their own destiny and to manage their workload."

"I would encourage everyone to start to work together with your neighbouring practices and really work as a team to deliver the needs of that population. It's very satisfying and has absolutely brought back the joy of working in general practice."

Watch [this video](#) to find out how the approach has changed the lives of patients and read [Dr Nina Pearson's blog](#) on how the Luton PCN is benefiting staff and patients.



**The Luton PCN video features interviews with members of the extended workforce.**

# Innovation brings fantastic results

Innovative working at St Luke's Primary Care Centre in Duston, Northampton, has enabled the practice to offer an amazing 10,000 more urgent care appointments a year.

In response to a series of GP partner retirements in 2014-15 and difficulties finding direct replacements, the St Luke's team analysed the practice's workflows and looked at how a different approach to recruitment could help meet patients' needs.

As a result, the team refocused its recruitment drive to bring in more nurses and provided more training for its existing nurses in minor illness. This was coupled with the introduction of a new pre-triage process to direct patients to the right practice professional at the right time, while a new primary care consultant role was created to support the team.

In addition to its GP team, St Luke's now has ten other professionals in place to meet demand for same-day appointments – and the pre-triage process has turned out to be hugely beneficial for both patients and staff.

By responding to a recruitment challenge with some smart forward thinking, the practice and local health community are reaping the benefits.

Dr Tom Howseman, GP partner at St Luke's, said: "The development and implementation of our pre-triage process (PTP) has benefited our practice staff and patients. It has helped with team building, staff personal development and the sustainability of our practice - and has hugely increased our ability to offer patients appointments when they need them."



"Encouragingly, PTP has also drawn the interest of many other practices, one of which is now adopting our way of working, in true GP Forward View collaborative spirit. It has also attracted several new GPs to consider working with us permanently. We are now looking forward to the future - a real recovery story, one that can be repeated in any practice. General practice is tough, but it is so much better facing it together!"

Tom (pictured above) is very happy to be contacted personally on [tom.howseman@nhs.net](mailto:tom.howseman@nhs.net).

## Primary care networks webinars

NHS England is hosting a series of webinars for anyone working within primary care and the wider NHS, focusing on the benefits, impacts and development of PCNs:

**Sharing the learning:** an update from the national programme, with examples of work already in progress across the country, with a chance to ask questions and find out more about next steps. Dates, which run up to March, can be found on [NHS England's website](#).

**PCN support and development:** find out details on initial proposals for a PCN support and development package on [Thursday 21 February](#). For further information, or to put forward any questions in advance, please contact [england.PCN@nhs.net](mailto:england.PCN@nhs.net).

## Stay in touch

To keep up to date with the latest news and information, please:

- visit [www.england.nhs.uk/gp](http://www.england.nhs.uk/gp)
- watch [NHS England's Primary Care and NHS111 animation](#)
- view the [General Practice Forward View animation](#) explaining the changes and additional support being rolled out
- join the discussion at [LinkedIn](#)
- follow [@NHSEnglandMidE](#) on Twitter, [#GPForwardView](#)

# Extended access

## 100% success for Midlands and East



**Oli Newbould, Locality Director for NHS England (North Midlands) and Regional Extended Access Lead, charts how people are now benefiting from pre-bookable appointments to GP services, seven days a week, across the region:**

I would like to say a very big thank you to all the CCGs in the region for ensuring that extended access schemes were live in time for the national deadline of 1 October.

An enormous amount of work has gone into designing and setting up services, and the challenges of the delivering the advanced targets cannot be under-estimated.

The work does not stop here though. While we have achieved the extended access core requirements related to capacity, we now need to focus on making sure services are effectively advertised.

This means all practices making sure extended access services are visible on their websites, reception staff offering extended access appointments on the same basis as in-hours appointments, and making the most of advertising space in other venues such as urgent care centres, emergency departments and elsewhere in hospitals, and in community venues.

### The importance of data

Extended access progress is monitored through the national GP Forward View Monitoring Survey data which is collected every month from CCGs. It is really important that these returns are submitted every month and that the data is as accurate as it can be.

Thank you to everyone for their efforts in submitting this data on time as it is extremely helpful in allowing us to understand what support is needed across the region.

We are now well into the winter period and ensuring people know about, and make use of, the newly-available capacity in primary care is really important in easing some of the pressures experienced across acute services at this time of year.

Enabling 111 services to make appointments into extended access hubs is high on our list of priorities and we are working with national and regional digital leads to fully understand current capabilities, barriers and solutions so we can move to a fully-connected system as soon as possible.

## Getting the message out

BBC TV Look East's camera crews paid a visit to the Riverside Clinic in Ipswich, one of the bases for the [Suffolk GP+ service](#), as part of promotional work by NHS England in the region to support the national advertising of extended access just before Christmas last year.

Suffolk GP+ provides extra doctor appointments in the evenings, at weekends and on Bank Holidays with other bases in the area at Bury St Edmunds, Felixstowe, Haverhill, Stowmarket, Wickham Market, Colchester, Sudbury and Mildenhall.

The TV feature described how the service is working in Suffolk, including how it is benefiting patients and helping to ease pressures on local hospitals over winter. It included interviews with one of the doctors working from the clinic, Dr Paul Driscoll, as well as patients arriving for a consultation.



## Patients highly satisfied with Derby access hub

A hub system in Derby offering extended access to GP services for 160,000 people has recorded a 98% satisfaction rating among its patients. Sixteen GP practices in and around Derby city have joined forces to offer evening and weekend appointments through five 'hub' surgeries.

The hub system has created around an extra 1,000 appointment slots each month since the first one was set up in April 2017. Appointments last up to 15 minutes, which is helping resolve health problems at an earlier stage and reduce the need for further appointments.

As well as seeing a doctor, patients can book for blood tests, smear tests and renewal of dressings. There are plans to further extend the service to include vaccinations. Clinical staff have full access to patient records which means they are aware of any existing conditions or other issues.

GPs and other practice staff are feeling the benefit of reduced pressure for appointments at their daytime surgeries, in particular when patients need to see a doctor or nurse on the day of booking.

Dr Annabel Stewart of the Lister House Practice (pictured right) said: "It is very helpful to know that there are appointments available each day and over the weekend if I feel a patient's condition needs to be reviewed, but they are not ill enough to be in hospital. It adds an extra layer of safety."



The 16 practices have formed a community interest company called Primary Care Plus to run the hubs, and any profit made is invested back into patient services. The group is collating data to analyse whether the cost of running the hubs is being recouped by reduced hospital costs.

## Digital-first for primary care

Under the Long Term Plan, digital-first primary care will become a new option for every patient, improving fast access to convenient primary care.

CCGs in Midlands and East are working with their practices to ensure that by March 2020, 75% of practices are offering online consultations to their patients, based on CCGs procuring licences for approved systems on behalf of their practices.

Every GP practice is eligible to access the support from the national funding. The fund is to be used towards the costs of providing patients with the facility to conduct a clinical consultation with their GP practice online.

Eligible systems are required to have specific features including: web browser and mobile app connection; symptom checker; sign posting; and patient information imported back into the GP's system.

This approach helps to align online consultation with other initiatives to increase access through digital innovations, greater collaboration and co-ordination across practices, and increased uptake of digital solutions for patients.

The funding is provided within CCG baselines and the GP Monitoring Survey is being used to identify which practices within a CCG offer online consultations.

**A [video](#) featuring staff and patients at New Court Surgery in Malvern, Worcestershire, shows how access to GP online services is revolutionising and improving care.**

For further information please contact NHS England's regional head of digital technology [jasbinder.sandhu1@nhs.net](mailto:jasbinder.sandhu1@nhs.net).

## And the winner is ...

**Congratulations to two practices in Midlands and East which were winners at the General Practice Awards announced towards the end of 2018.**

Abbeyview Surgery in Crowland received The Collaboration with Patients and Other Providers Award, sponsored by NHS England.

GP partner Dr Abhijit Banerjee said: "To say we were thrilled to win the award would be an understatement. It recognises our journey towards innovative and better patient care, putting the community in the heart of general practice again."

"Looking back a few years, the practice was struggling to keep up with demand and ensure patient satisfaction," said Dr Banerjee.

"We knew we needed to change, and so we restructured our management and established a patient participation group to help increase communication with patients, and improve their perception of the practice."

A particular criticism from patients at the time was lack of access to care. The practice introduced a telephone callback service that allows GPs to speak to three times the number of patients, which has proven to be particularly useful in assisting patients with routine enquiries. A significant number of these patients would have previously needed to make an appointment and come into the practice.

The practice has also introduced other innovations designed to improve access for patients, including recruiting nurse practitioners to provide extra appointments, and launching minor illness walk-in sessions and ad-hoc Saturday clinics. As a result it now has an average of ten spare appointments across the team every day which allows for more proactive interventions with patients and working with other agencies.

"I felt great pride and shared joy with our team and also with our patient participation group," adds Dr Banerjee. "This is a prize for all of us in our patch and beyond who are working hard with limited resources but crucially with an eagerness and vision to go beyond and think out of the box."



**Well done also to Canon Street Medical Centre in Leicester City, which was named People's Surgery of the Year.**

**"We had never been nominated for something like this before, it was a wonderful sensation," Dr Bhupendra Vanravan Modi told the Leicester Mercury. There were 81 nominations for the award, put forward by patients.**

This **Midlands and East Bulletin** is designed to bring you the latest news and opportunities available through the GP Forward View. We want to reach GPs, other primary healthcare professionals, practice staff, LMCs, LPCs, commissioners, STPs and anyone else who is interested in sustaining and transforming primary care in Midlands and East. Please pass on the news to your colleagues who can [sign up](#) to our mailing list to get the next issue straight to their inbox.

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