

Options for Suffolk primary care

Around 75 GPs and PMs attended the two open meetings on how practices could respond to the pressures on primary care. The meetings considered five broad strategies including 'wait and see', networks/mergers of small groups of practices, federations, salaried model incl. integration with hospitals and super-partnerships. Slides from the meetings are on www.suffolkfed.org.uk under News.

We have developed an action plan following the meeting which covers:

- For those unable to attend the meetings we will hold another session after the Trinity Park educational session on 14 January.
- Providing further information and a forum for discussion, including regular updates on what is happening across the county and nationally. We will also prepare a paper on how clinical models based on working at scale can improve services for patients, help manage workload and increase cost efficiency.
- Helping practices prepare for the 2017 voluntary contract which will require a minimum population of 30,000 (and probably 7 day working).
- Leading a project to review how members can improve practice back office efficiency via collaborative working.
- Super-partnerships - for practices with a 'no obligation' interest in this option we have arranged a follow-up meeting on Thursday 28 January with a lawyer from Hempsons, who advised the 180 partner Our Health Partnership in Birmingham, and a financial adviser from BDO.

If you are interested in reading more on the various options there are numerous publications which compare models and give the pros/cons, including a recent one from the RCGP. David Pannell can send you the list.

GP+ update

- GP+ in Bury is now operating.
- We have decided not to wait for the SystemOne/EMIS interoperability solution and will be making provision so EMIS practices can book into the service. We are setting-up training sessions before Christmas for the East EMIS practices with the West to follow early New Year.
- Across Suffolk we have 75 GPs and 20 NPs inducted to work in the service along with a full admin team. Only 23 GPs currently do OOH.
- During November there were 1,017 consultations of which 83% were booked via practices. Utilisation is 54%.
- Weekday evenings are virtually full but weekend utilisation is low.
- We are linking with 111 and will offer some capacity, particularly over the weekend and holiday period. We have some controls to avoid being overwhelmed.
- An average 13 ambulances are diverting each week to GP+ and 24 patients redirected from A&E.
- 27% of patients would have gone to A&E, called 111 or 999 and 59% would have waited.
- We are in discussions with IHT to relocate GP+ next to A&E. Paul Driscoll and Debs Banerjee started building relationships with A&E by spending a weekend in the department. A number of interesting observations were made including the hospital not always understanding the complexity of patients being managed in primary care. We will only move if the space is suitable for primary care.

Additional GP Fed Board directors

Mike Bairstow from Framlingham has been elected for the DHG practices. Sriyanika Ratnayake from Haverhill Family Practice will represent Sudbury/Haverhill.

Felixstowe care home services

The Fed will have been running the Felixstowe care home LES for two years at the end of this financial year. Sue Diggins has done a superb job setting up and running the service which has had a positive impact on patient care and practice workload. The original reason for providing the service was to demonstrate how practices could work together - which we have done. However, we have now decided to pass the service back to practices as Sue wants to move to a different role and the LES is now part of the PMS contract.

Paul Driscoll
Chair
Paul.driscoll@suffolkfed.org.uk