HEALTH SCRUTINY PANEL FUTURE OF GP PROVISION IN MIDDLESBROUGH – ACTION PLAN

8th SEPTEMBER 2015

SCRUTINY RECOMMENDATION	PROPOSED ACTION	POST TITLE	BUDGET COST	TIMESCALE
a) That the panel revisit this topic at appropriate times to consider how the various initiatives that are being put in place are making a difference.	Scrutiny panel to include this topic in their work programme	Elise Pout	Nil	By 31 August 2015
b) That the Council, the South Tees CCG and the Local Medical Committee work together to promote the area's attributes in order to encourage doctors to come and live and work in the area. This might include articles in Medical Journals and making reference to the relatively affordable cost of housing, the public health challenges in the area and the state of the art facilities at James Cook University Hospital.	The CCG is currently developing a workforce strategy, opportunities to work with the council and the LMC will be identified through this process. In addition the LMC are holding a workforce event on the 1st of October, 2015 to explore the issues and develop a way forward. The CCG workforce strategy.	Alex Sinclair Head of Programmes, South Tees CCG.	Nil at this stage	By 30 September, 2015.
c) That the Council consider ways in which they can encourage student doctors to study in this area, for example creating a scholarship which would see the student committing to	The Director of Public Health to write to a letter to NHS Health Education North East (HENE) in the first instance to understand the plans in place for addressing GP recruitment in the North	Edward Kunonga Director of Public Health	Nil (at this stage)	By 31 August 2015

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stay in the area following their studies.	East region and whether there are specific actions being carried out for Middlesbrough and Teesside.			
d) Building on the success of the A&E campaign the panel would like to see if the Council can assist the CCG develop a publicity campaign involving information about the most appropriate times to visit a GP and details of other sources of help including pharmacists and self-help.	The CCG has carried out a number and range of extensive urgent care awareness campaigns. (Details of this were shared with Joint Health OSC on the 16/7/15 as part of the iMProVE Update). The CCG will be developing an urgent care strategy which will include a section on self-care and how we intend to communicate public messages around accessing relevant services. National evidence shows that messages delivered at the time of patients accessing services have the most impact. However, the urgent care engagement work the CCG is currently undertaking with the public will also help inform methods of raising awareness. The Council, through the Integration programme Board and its executive will be supporting the CCG in designing and implementing the urgent care awareness campaigns. The Council will support the CCG, through the existing community engagement mechanisms, to ensure the campaigns are disseminated across the local communities.	Craig Blair Associate Director of Commissioning, Delivery and Operations.		First draft of strategy due Jan 2016. An implementatio n plan will be developed alongside the strategy with a detailed timeline for projects.

e) That the Council write to the Department of Health to i) Express concern about the impact of the decreasing numbers of GPs in Middlesbrough and what action the DoH will instigate to address the problem.	The Director of Public Health to write to a letter to NHS Health Education North East (HENE) in the first instance to understand the plans in place for addressing GP recruitment in the North East region and whether there are specific actions being carried out for Middlesbrough and Teesside.	Edward Kunonga Director of Public Health	Nil	By 31 August 2015
 ii) Ask for comment on whether or not there scope for encouraging and facilitating clinical professionals to retrain as GPs. iii) Ask for comment on the success of the implementation of the new Induction and Refresher Programme and whether there have been any projections/analysis to assess if scheme has/or will have had the desired effect of encouraging qualified GPs back in to profession in sufficient numbers. 				