

**Date:** 14.05.16  
**Meeting:** Joint Commissioning Committee  
**Item No.** 7.0      **Public**

**REPORT TITLE:** General Practice Forward View  
**DECISIONS TO BE MADE:** To consider and note

**Author:** Ian Reekie, Chair  
  
**GB Lead:**

Continue to improve the quality of services	✓	Improve patient experience	✓
Reduced unwarranted variations in services	✓	Reduce the inequalities gap in North Lincolnshire	✓
Deliver the best outcomes for every patient	✓	Statutory/Regulatory	

**Executive Summary (Question, Options, Recommendations):**

During April NHS England published 'General Practice Forward View', a strategy for tackling the pressures currently facing general practice containing proposals covering investment, workforce, workload, infrastructure and care redesign. The document is attached for the consideration and noting.

Equality Impact	Y/N	
Sustainability	Y/N	
Risk	Y/N	
Legal	Y/N	
Finance	Y/N	

<b>Patient, Public, Clinical and Stakeholder Engagement to date</b>									
	N/A	Y	N	DATE		N/A	Y	N	DATE
Patient:					Clinical:				
Public:					Other:				

## **General Practice Forward View**

1. During April NHS England published 'General Practice Forward View', a strategy for tackling the pressures currently facing general practice containing proposals covering investment, workforce, workload, infrastructure and care redesign. A copy of the document for consideration and noting can be accessed at <https://www.england.nhs.uk/wp-content/uploads/2016/04/gpfv.pdf>.
2. Proposals relating to investment include:
  - An increase in investment from the current £9.6bn per annum to over £12bn by 2020/21, a real terms increase of 14% compared to 8% for the rest of the NHS
  - Capital investment (included in this global sum) of £900m over the next five years
  - An additional £500m over the next five years in sustainability and transformation funding to support struggling practices, further develop the workforce, tackle workload and stimulate care redesign
  - A new funding formula to better reflect practice workload, including deprivation and rurality
  - Consultation by July 2016 on tackling indemnity costs in general practice.
3. Proposals relating to workforce include:
  - Increase in GP training recruitment to 3,250 per year to support net growth of 5,000 extra doctors by 2020
  - Major recruitment campaign to attract doctors to become GPs
  - International recruitment campaign to attract up to 500 extra doctors
  - Targeted £20,000 bursaries in areas where it is hardest to recruit into GP training
  - Measures to attract and retain at least 500 extra GPs back into general practice
  - Investment in extra 3,000 mental health therapists to work in primary care by 2020
  - A further 1,500 pharmacists working in general practice by 2020
  - Additional investment in training and development of practice based staff.
4. Proposals relating to workload include:
  - New hospital contract measures to stop work shifting at the hospital/ general practice interface
  - £40m practice resilience programme
  - Move to five yearly CQC inspections for good and outstanding practices
  - Streamlining of payment processes for practices and automation of common tasks.

5. Proposals relating to practice infrastructure include:
  - £900m capital investment in general practice estates and infrastructure over next five years
  - Up to 100% funding for premises development
  - 18% increase in IT services and technology investment for general practice
  - £45m programme to stimulate uptake in online consultation systems
  
6. Proposals relating to care redesign include:
  - £171 one-off investment in practice transformational support
  - Introduction of new voluntary Multispecialty Community Provider contract from April 2017
  - New three year 'Releasing Time for Patients' programme aimed at freeing up to 10% of GPs' time.