

OVERVIEW AND SCRUTINY COMMITTEE			
Report:	NHS Lewisham Clinical Commissioning Group: Update: Primary Care Strategy – Developing GP Services		
Ward:	All	Item No.	3
From:	Martin Wilkinson, Chief Officer, NHS Lewisham Clinical Commissioning Group Dr Jacky McLeod, Clinical Director, Primary Care Lead, NHS Lewisham Clinical Commissioning Group		
Class:	Part 1 (open)	Date:	31 st October 2017

1. Purpose

1.1 The purpose of this paper is to provide the Overview and Scrutiny Committee with an update on the NHS Lewisham Clinical Commissioning Groups (LCCG) Primary Care Strategy – Developing GP Services (2016 - 2021), particularly in regard to Primary Care access and workforce.

2. Recommendations

2.1 Members of the Overview and Scrutiny Committee are recommended to note LCCGs progress on delivering its Primary Care Strategy – Developing GP Services (2016 – 2021).

3. NHS Lewisham Clinical Commissioning Group Primary Care Strategy – Developing GP Services (2016 - 2021)

3.1 The LCCG Primary Care Strategy (<http://www.lewishamccg.nhs.uk/about-us/our-plans/OurPlans/NHS%20Lewisham%20CCG%20Primary%20Care%20Strategy%20016-21.pdf>) was presented to the Lewisham Healthier Communities Select Committee on the 12th January 2017.

3.2 The strategy predominantly focuses on the development of General Practice within the wider context of primary and community based care, with key interfaces made to other care services and settings where appropriate.

3.3 It is a refresh of the Primary Care Strategy originally approved by NHS Lewisham Clinical Commissioning Group in 2014 and builds on the existing vision, whilst also ensuring alignment with local and national plans that have since been published, including the following:

- Transforming Primary Care in London: Strategic Commissioning Framework
- Our Healthier South East London (OHSEL): Sustainability & Transformation Plan
- Lewisham Health and Wellbeing Board Strategy
- Lewisham Health & Care Partners
- NHS Five Year Forward View
- NHS GP Forward View

3.4 There are now 39 GP practices in Lewisham providing primary care services out of 42

surgeries (sites) and are arranged in four neighbourhood groups. This pragmatic geographical grouping has been in place in Lewisham for more than ten years and has enabled the development of relationships between practices resulting in agreeing collective goals and improvements.

3.5 LCCGs vision for primary care is to ensure the systematic development of primary and community care to produce; (a) a network of advice, support, education physical/mental health and social care hubs embedded in activated communities; and (b) work together to maximise health and well-being of the population, with access to specialist and diagnostic services when needed.

3.6 The LCCG Primary Care Strategy continues to focus on the four key high impact changes for General Practice, in summary;

1. Proactive Care	<i>Work to ensure that ‘every contact counts’, seeing each contact with a patient as an opportunity to address preventative health needs, to provide brief interventions or to sign post the patient to other services within the network.</i>
2. Accessible Care	<i>Support people to access care appropriately by working to simplify access points so that people can easily navigate the system and access care in a timely way.</i>
3. Co-ordinated Care	<i>Identify people that will benefit from co-ordinated care and a care plan.</i>
4. Continuity of Care	<i>On identifying patients care plans will be co-designed with patients and carers, ensuring that patients have a named skilled professional accountable for their care.</i>

3.7 The strategy supports the existence of Integrated Health and Social Care neighbourhood community teams wrapped around a registered list held by GP practices.

3.8 NHS Lewisham CCG will commission services to achieve sustainable General Practice delivering primary care. This care will increasingly be delivered at scale across local populations through GPs leveraging opportunities afforded by technology and working collaboratively through new models of care, which deliver integrated services.

3.9 In line with Our Healthier South East London Sustainability & Transformation Plan, primary care (general practice) will form a key component of Neighbourhood Care Networks who will be delivering Community Based Care, which includes;

- Building strong and confident Lewisham communities
- Delivery of consistently high standards of care, including London Primary Care Standards
- Responsive services providing access from 08:00 – 20:00, 7 days a week
- Focus on physical health and wellbeing of patients with mental health problems
- Proactive primary (and secondary) prevention
- Systematic risk stratification and problem solving approach with shared care planning
- Access to specialists in the community
- Increased accessibility to diagnostics

3.10 The four core components of the CCGs commissioning approach for the lifetime of the strategy for General Practice are;

1. Supporting GP practices to work together and provide care and services at scale;
2. GP practices delivering primary care are an integral part of Neighbourhood Care Networks;
3. Shifting resources from secondary care to primary care to support care in the community;
4. Supporting outlier GP practices to reduce variation and the improve quality of services provided.

3.11 The CCGs aim is to support development of the provider landscape to provide primary and community based care via appropriate population based services. The table below lists the providers and new models of care, which will be delivering services and the characteristics;

Table 1: Providers/Model of Care

Providers	Providing
<ul style="list-style-type: none"> • GP Practices • GP Super-partnerships • GP Federations • Multispecialty Community Providers (MCP)/Primary and Acute Systems (PACS) 	<ul style="list-style-type: none"> • GP List based care • At scale across local populations • Outcomes based • Core, Enhanced and Community services

3.12 The CCGs local approach to new models of care is based on working with the Lewisham Health & Care Partners, which includes the local GP Federation.

3.13 There are a number of critical enablers required to support implementation of the strategy; (i) utilising contracting opportunities; (ii) improved information technology and better management and use of the local estate; and (iii) supporting the development of the local workforce. The CCG will utilise these enablers working collaboratively with local partners.

4. Primary Care Commissioning

4.1 Following a successful application to NHS England, as of the 1st April 2017, Lewisham CCG have been fully delegated (level 3) commissioners of primary care services provided by Lewisham GP practices.

4.2 Level 3 delegated commissioning of primary care (General Practice) offers CCGs the opportunity to assume full responsibility for commissioning general practice services, whilst NHS England legally retains liability for the performance of primary medical care commissioning.

4.3 The functions included as part of Level 3 delegated commissioning arrangements include:

- GMS, PMS and APMS contracts (including the design of PMS and APMS contracts, monitoring of contracts, taking contractual action such as issuing breach/remedial notices and removing a contract)
- Newly designed enhanced services
- Design of local incentives schemes as an alternative to Quality Outcomes Framework (QOF)
- The ability to establish new GP practices in an area

- Approving practice mergers and
- Making decisions on 'discretionary' payments (e.g. returner/retainer schemes).

4.4 NHS England remain accountable for outcomes and therefore continues its assurance role of CCGs to ensure responsibilities are being adequately discharged and well managed to yield the intended outcomes.

4.5 Responsibilities remaining with NHS England are:

- Holding the medical performers' list
- Performers' appraisal and revalidation
- Pay and rations
- Complaints
- Commissioning of dental, community pharmacy and eye health services

4.6 To support the move to fully delegated commissioning, the following new local governance arrangements have been enacted;

- (i) Changed composition of the Governing Body to include a third Lay Member;
- (ii) Enhanced role of the Lay Member, who leads on audit, remuneration and conflicts of interest matters (deputy chair) to become the Conflicts of Interest Guardian;
- (iii) Amendment of both the CCG Conflicts of Interest and Procurement Policies to reflect national guidance (Procurement Policy: <http://www.lewishamccg.nhs.uk/about-us/Who-we-are/Governing%20Body%20papers/Enc%2013.2%20Appendix%20II%20Procurement%20Policy%20Draft.pdf> and Conflict of Interest Policy: <http://www.lewishamccg.nhs.uk/about-us/Who-we-are/Governing%20Body%20papers/Enc%2013.1%20LCCG%20COI%20Policy.pdf>)
- (iv) Formation of the Lewisham Primary Care Commissioning Committee (meeting in public) to oversee level 3 delegated commissioning responsibilities.

5. Integrated Primary & Urgent Care

5.1 *The Model*

5.2 The CCG is reviewing all urgent care services that will support the design and development of an Integrated Primary & Urgent Care Model. This has been supported by patient engagement on primary and urgent care and a review of patient activity and access to services. It is also supported by the national requirement to deliver extended access to General Practice, the national standards in regard to Urgent and Emergency care services and the local Estates Strategy.

5.3 The Model will support delivery of Integrated Primary & Urgent Care Services at the University Hospital (UHL), Lewisham & Greenwich Trust. The identification of the UHL site is supported by the local Estates Strategy, due to its location and transport links. The new model will;

- Replace existing access to A&E for all walk-in (non-emergencies) attendances
- Provide extended hours access to General Practice
- Deliver rapid clinical assessment and appropriate redirection of patients (where appropriate) to, for example; A&E, Ambulatory Care, Neighbourhood Care Networks and Patients own GP

5.4 The CCGs intention is to commission a fully integrated Primary & Urgent Care Service in 2018/19.

5.5 The CCG has commenced commissioning of services that respond to the key concerns raised by our local population with regard to improving access to General Practice. However, it is important to consider that as part of delivering General Practice 'at scale', that further engagement and the development of clear and accessible messages is required to complement these new services for our local population on; making appropriate choices and accessing primary and urgent care services in Lewisham.

5.6 Clinical streaming and redirection at the Lewisham Hospital

5.7 Phase 1 of the review of the Urgent Care Centre (UCC) is complete and building on the success of the Primary Care Assessment Pilot which was launched on 3rd October 2016, the CCG has now commissioned a clinical streaming and redirection service at the front door of the Lewisham Hospital which will go live from the 1st November 2017.

5.8 This service will provide a nurse who will clinically assess and redirect/stream patients as appropriate. The service will also consist of a GP and a Health Care Assistant available from 8:00 to 23:00, 7 days per week who will manage patients with urgent primary care needs who don't need to be seen in the UCC/emergency department.

5.9 Extended Access to General Practice

5.10 In line with delivering the Primary Care Strategy, the London Strategic Commissioning Framework and the Our Healthier South East London Sustainability Transformation Plan, Lewisham CCG implemented a GP Extended Access Service which commenced on the 3rd April 2017

5.11 The service is based at the University Hospital London (UHL) site, offering appointments from 8am-8pm, 7 days a week (including public holidays).

5.12 The selection of the UHL site is supported and articulated in the Lewisham System Estates Strategy. The UHL site is centrally located with evidenced good travel links.

5.13 25,425 appointments will be delivered in 2017/18 and 29,914 appointments will be delivered in 2018/19. The service is offering a combination of GP and nurse face to face appointments and video consultations.

5.14 Appointments are accessible by GP practices, Integrated Urgent Care (formerly 111), and diversions from the clinical streaming and redirection service at UHL. Pending a national solution, patient online direct booking is due to be available soon.

5.15 The GP Extended Access service has been commissioned from One Health Lewisham Ltd (the borough wide Lewisham GP Federation).

5.16 As part of our ongoing evaluation of the GP Extended Access Service, we are surveying patients about their experience. Based on 181 responses to date:

- When asked "How convenient did you find the location of the service?" **81.7%** rated the location as *Very Good/Good* and **13.3%** as *Neither Good nor Poor*.
- **47.8%** stated they would have gone to A&E if they were not offered an appointment with the service
- **91.1%** rated the service in general as *Very Good/Good*

6. Primary Care Access – other initiatives

6.1 Extended Hours

6.2 As part of the national Extended Hours Direct Enhanced Service (DES), 35 practices are already providing extended hours outside of their core contracted hours (Monday to Friday, 8.00am-6.30pm) to allow patients to attend appointments at times when it is more convenient for them. The number of appointments that practices are required to make available is proportional to their registered list size. See appendix 1 for details.

6.3 GP Online Services

6.4 All Lewisham practices offer GP online Services to patients which includes booking appointments, ordering repeat prescriptions and accessing medical records. Lewisham is currently the third best performing CCG in London for the number of patients that are registered for online services. The CCG will look to continue this good progress and support patients and practices to maximise the benefits of this facility which will free up practice time to support patients who may not be able to take advantage of online services.

6.5 eConsultations

6.6 As part of the eConsultations GP Forward View programme, the CCG are looking at developing local solutions to improve access at individual practices which are supported by technology i.e. symptom checkers/video consultations. These solutions free up time for GPs, allowing them to spend more time managing complex needs. Some issues can be resolved by the patient themselves, or by another member of the practice team. Others are managed by the GP entirely remotely, in about a third of the time of a traditional face to face consultation. Other patients will still require a face to face consultation, and these are enhanced by the GP already knowing about the patient's issue. As well as improving the service for patients, evidence to date indicates that online consultation systems can free up to 10 per cent of GPs' time.

6.7 Pharmacy First (minor ailments) scheme

6.8 The CCGs locally commissioned Pharmacy First scheme provides advice, treatment and medicines for common ailments (e.g. Constipation, Hay fever, Sprains/strains, Head lice, Cold and flu, Cold sore, Mouth ulcer, Conjunctivitis, Headache, Ear wax) from local pharmacies. All advice is free and for patients that do not normally pay prescription charges, any medicine recommended will be free. This scheme reduces unnecessary pressure on GP practices and provides patients with more flexible access to support across Lewisham pharmacies.

6.9 PMS contract

6.10 Lewisham CCG has developed its commissioning intentions for General Practice as a part of the new Personal Medical Services (PMS) contract which is scheduled to go live from the 1st January 2018. As part of this contract, there is a 'premium' element of £3.2M.

6.11 Within this premium, the CCG has incorporated a specific focus on improving the overall experience of patients making an appointment at their GP practice. As part of this specification, practices will be asked to undertake a self-assessment of current access arrangements and then to develop an action plan to address any areas of challenge. This will encompass areas such as a review of appointment systems, the use of Patient Online services, reviewing patient information on Practice websites and NHS Choices, sign posting patients to alternative services and engaging with practice Patient Participation Groups (PPGs) to discuss challenges and potential solutions.

6.12 Telephony support

6.13 The CCG do appreciate that some practices are constrained by their telephone systems and earlier this year, the CCG provided additional funding to support the following 8 practices to improve their telephony infrastructure.

- Clifton Rise (North Lewisham)
- Deptford Medical Centre (North Lewisham)
- Lewisham Medical Centre (Central Lewisham)
- Hurley at Waldron (North Lewisham)
- Deptford Surgery (North Lewisham)
- Rushey Green (Central Lewisham)
- The Vale (South West Lewisham)
- Torridon Road (South East Lewisham)

6.14 Self-management

6.15 We are continuing our focus on increasing uptake of self-management programmes for our Long Term Condition patients (including diabetes/COPD) to support them to better manage their own condition. This also includes the offer of an online self-management programme for diabetes in addition to the more traditional face to face approach. This provides patients with a choice of ways to engage based on their individual circumstances and preferences.

6.16 Telephone triage and consultation skills

6.17 In 2015/16 we supported training for telephone triage and consultation skills which was taken up by several practices who are now using this approach as business as usual.

6.18 Social prescribing

6.19 From a social prescribing perspective, in Lewisham we have a local “Community Connections” service which provides community development and access-facilitation with a preventative health and wellbeing focus. (<http://www.ageuk.org.uk/lewishamandsouthwark/our-services/community-connections/>). We have also launched “Lewisham SAIL Connections” which provide a quick and simple way to access a wide range of local services to support older people in maintaining their independence, safety and wellbeing (<http://www.ageuk.org.uk/lewishamandsouthwark/sail/>). These initiatives can help to reduce demand on GP practices with patients needs being better met by other local services.

6.20 Patient feedback

6.21 We regularly review patient feedback i.e. national GP patient survey to identify practices who may have specific challenges in regard to access and are also engaged with Healthwatch who have shared their feedback and reports on access which we are directly responding to.

7. Workforce

7.1 There have been concerns raised about the capacity of local GP practices in Lewisham and the lack of GPs and Nurses.

7.2 Health Education England has conducted a national workforce analysis published in January 2017 in to support the General Practice Forward View on Primary Care for GPs and Nursing.

7.3 In comparison to both the national and London GP Full-time equivalent (FTE) to

patient list size ratio Lewisham in a better position and this trend continues when compared with neighbouring CCGs in Lambeth, Southwark, Greenwich, Bromley, Bexley and Croydon.

7.4 In practical terms this means that in Lewisham there are fewer patients to each GP. The national average GP FTE to patient list size ratio is 1:2000 and for London the average is 1:2100. For Lewisham CCG the average GP FTE to patient list size ratio is 1:1900, which equates to 143.8 FTE in January 2017. These ratios do not include locums, retainers and registrars, which do help to support the substantive workforce. This also excludes the GP Extended Access (which includes Nurses and GPs) and the Primary Care Assessment (GP Streaming) services.

7.5 The current number of GPs in Lewisham as per the latest publication of NHS Digital data (publication August 2017; data extracted 30th June 2017) is 147 as shown in Table 2 below;

Table 2: GP WTE

CCG	All Practitioners	GP Providers	Salaried/Other GPs	GP Retainers	GP Registrars	GP Locums
08L Lewisham	161	94	53	1	4	9

7.6 Health Education England has conducted a national workforce analysis. Nursing Full-time equivalent (FTE) to patient list size ratio puts Lewisham in a better position in London. However, when compared with the national average Lewisham falls behind. The national average Nursing staff FTE to patient list size ratio is 1:3600 and for London the average is 1:5300. For NHS Lewisham CCG the average Nursing staff FTE to patient list size ratio is 1:5000, which equates to 58 Full Time Equivalents. However, all London CCGs have a lower ratio of nursing staff compared with the national average.

7.7 In recognition of these challenges facing our nursing workforce the CCG has been working in partnership with Lewisham Community Education Providers Network (CEPN) on developing and sustaining the Primary Care Workforce. This has included on-going recruitment of newly qualified nurses, or nurses from other domains, to undergo General Practitioner Nurse training, in order to address the early succession issues in Lewisham.

7.8 Lewisham has the 4 of the first Healthcare Assistants from primary care in London on the Nurse Associate training programme at the University of Greenwich. The CEPN supported by the CCG has commissioned additional places for the Advanced Care Practitioners at Greenwich University (MSC in Advanced Clinical Practice). There are 10 currently on the course and 4 started in September 2017.

7.9 In Lewisham 6 General Practice Nurses commenced non-medical prescribing, which supports with reducing the workload of GPs and improving patient satisfaction training.

7.10 The CCG appointed the first Nurse Consultant in Primary Care in the country and 3 General Practice Nurse Advisors to support with professional development and recruitment.

7.11 The CEPN has supported 6 student nurses on the 3rd year management placements in general practice and each spends 3 months in GP practices.

Consequently, 5 have qualified and 2 are working for GP practices in Lewisham and 1 is a District Nurse in Lewisham.

7.12 Practice nurses are recruited directly on completion of their training and are being mentored by the CCG Nursing Team. There are no current vacancies in Lewisham (except where practices are not recruiting).

7.13 Other workforce development initiatives

7.14 The CCG working in close partnership with the Lewisham Community Education Provider Network (CEPN) who are a commissioning organisation whose focus is on integrated, community-based training and education programmes for clinical and non-clinical staff working in health and social care. They are an autonomous organisation, who collaborate with providers and other commissioners in Lewisham to shape a responsive and coherent workforce development programme, to improve population-based health outcomes.

7.15 Through the CEPN we are implementing a care navigator programme to support receptionists to sign post patients to alternative services. We are also looking at new and different roles within practices to free up GP time e.g. medical assistants and physicians associates.

7.16 The CCG will continue to work with our local CEPN around recruitment, retention and differential use of workforce, building on the work that has already begun such as our local apprenticeship programme, placements programme for student nurses and training of Health Care Assistants.

7.17 Lewisham has also submitted a successful bid against the GP Forward View Clinical Pharmacist in General Practice programme which will support Clinical Pharmacist to work in GP practices. This bid will initially cover a population of approximately 90,000 and provide additional clinical support to GPs in managing patients and their prescribing needs.

7.18 The CCG is also supporting practices to improve productivity through initiatives such as:

- The Productive General Practice (PGP) Quick Start programme (part of the GP Forward View). This is an on-site, hands-on, short term support package for practices that aims to help practices release time for care and build improvement capability. 11 practices successfully completed this programme in October 2017.
- The Lewisham Primary Care Quality Academy. The CCG have secured funding to take this forward, supported by London Southbank University. The academy will focus on using data and co-production to understand demand in order to co-design new consultation models and reduce failure demand. 7 practices are currently actively engaged with this programme.

8. Supporting 'at scale' General Practice delivering primary care

8.1 GP Federations

8.2 The CCG has supported the formation of four local GP Federations which have subsequently now come together to form a borough-wide organisation (One Health Lewisham Ltd) delivering enhanced primary care services.

8.3 One Health Lewisham Ltd currently holds three contracts:

- GP Extended Access Service
- Coordinated Care Service
- Enhanced Support to Care Homes

8.4 The Coordinated Care Service commenced in 2016/17 with the following overall aims;

- Improve the health outcomes for people in Lewisham
- Reduce variation in outcomes amongst Lewisham GP practices
- Support and sustain collaborative practice working as part of the wider Neighbourhood Care Networks
- Support a reduction in avoidable admissions

8.5 Year 1 of this population (raising the quality of care at borough level) and outcomes based service has delivered the following improvements in 2016/17;

- *Closing the gap:* At a borough level, those patients on GP registers for Chronic Obstructive Pulmonary Disease (COPD) increased by **127%** above standard annual growth and for Hypertension, the register increased by **97%** above standard annual growth.
- *Prevention:* **21%** of newly diagnosed COPD patients stopped smoking.
- *Prevention:* Lewisham now has the highest Pneumococcal vaccination rate for over 65 year olds at **75.1%**.
- *Patient Voice:* Eight neighbourhood level Patient Participation Groups (PPG) were held, engaging with **142** attendees in total, on the new GP Federations and providing feedback on current and future services.
- *Reducing avoidable emergency admissions and attendances:* GP Federations have proactively managed patients who frequently attend A&E and those who are frequently admitted as emergencies including the establishment of a cross borough clinical multidisciplinary team to review and coordinate care for these patients.

8.6 Year 2 (2017/18), continues to focus on; increasing the recorded prevalence of long term conditions (LTC) to support closing the gap between recorded and expected prevalence at borough level – early detection and prevention. Support patients with LTCs to better self-manage through GP increased referrals to self-management courses and appropriate support. Improve on Childhood Immunisations specifically Measles, Mumps & Rubella (MMR), and the continuation of the proactive case management of patients. The GP Federation will also continue to proactively support the Patient Voice via neighbourhood level patient participation groups.

8.7 Super-partnerships

8.8 St John's Medical Centre, Hilly Fields Medical Centre, Brockley Road Medical Centre, Morden Hill Surgery, Honor Oak Group Practice and Belmont Hill Surgery have merged their individual practices into one super-partnership which has a combined registered list size of approximately 60,000.

8.9 From the 1st June 2017, the practices are now working under a 'super-partnership model',

initially retaining each of the current PMS contracts held by the 6 existing practices, which the new entity holds in trust; and at a later stage moving on to one PMS contract, or consider the new voluntary Multispecialty Community Provider contract. This involves the 6 current PMS contracts remaining initially as separate contracts but benefiting from the integration of clinical services and back office functions.

8.10 This arrangement fits strategically with local priorities as set out in the CCG's Primary Care Strategy for General Practice, Our Healthier South East London – Community Based Care, Sustainability & Transformation Plan; delivering core general practice 'at scale'. This is also supported nationally, as articulated in the General Practice Forward View, specifically with regard to the sustainability of General Practice.

8.11 We are expecting further developments in Lewisham with practices increasingly working together at scale to deliver improved services to patients.

9. Financial Implications

There are no specific financial implications arising from this report.

10. Legal Implications

There are no specific legal implications arising from this report.

11. Crime and Disorder Implications

There are no specific crime and disorder implications arising from this report.

12. Equalities Implications

12.1 There are no specific equalities implications arising from this report, however addressing health inequalities is a key deliverable of the Lewisham Clinical Commissioning Group and Lewisham Borough Council's 'joint' Partnership Commissioning Intentions.

12.2 The CCG has developed a two year programme to reduce inequalities in General Practice now in its second year, which is a focused and specific response to the national GP patient survey and the CCG commissioned review by Goldsmiths College. Findings on the experience of Black Asian & Minority Ethnic (BAME) Groups (specifically Black Caribbean residents) of General Practice and feeling supported to manage their long term conditions were significantly below those of other groups in the borough.

12.3 In addition, CCG analysis to support the development of the Integrated Primary & Urgent Care Model has demonstrated that disproportionate numbers of BAME groups (specifically Black African and Black Caribbean residents) attend A&E. The CCG has commissioned Healthwatch Lewisham and the local Community Provider Education Network (CEPN) to support with better understanding how these groups access both primary and urgent care and what service developments and/or training might be required for General Practice.

13. Environmental Implications

13.1 There are no specific environmental implications arising from this report.

14. Background Documents

14.1 Our Healthier South East London Sustainability & Transformation Plan

Following publication of the NHS Five Year Forward view, all NHS regions in England are required to work together and with their local councils to produce a Sustainability and Transformation Plan (STP) for local services. This work is being jointly carried out by south east London Clinical Commissioning Groups (CCGs), hospitals, community health services and mental health trusts, with the support of local councils and members of the public.

Link: <http://www.ourhealthiersel.nhs.uk/>

14.2 NHS GP Forward View

The General Practice Forward View, published in April 2016, commits to an extra £2.4 billion a year to support general practice services by 2020/21. It will improve patient care and access, and invest in new ways of providing primary care.

Link: <https://www.england.nhs.uk/wp-content/uploads/2016/04/gpfv.pdf>

14.3 Transforming Primary Care in London: Strategic Commissioning Framework

This document provides both a new vision for general practice, and an overview of the considerations required to achieve it. It details a specification for Londoners in the future, and begins to articulate how these changes fit within the wider out-of-hospital context. The document also considers how this specification might be delivered with regard to cost, workforce, contracts, and other key enablers.

Link: <https://www.england.nhs.uk/london/wp-content/uploads/sites/8/2015/03/Indn-prim-care-doc.pdf>

14.4 NHS Five Year Forward View

The purpose of the Five Year Forward View is to articulate why change is needed, what that change might look like and how we can achieve it. It describes various models of care which could be provided in the future, defining the actions required at local and national level to support delivery.

Link: <https://www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf>

15. Contact/s

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Appendix 1: Lewisham GP Surgeries Extended Hours

Core GP Surgery opening hours are 08:00am – 06:30pm, Monday to Friday

Practice	Extended Hours
Queens Road Partnership	Tue, Wed and Thur 6.30pm-7.15pm
Hurley at the Waldron	None
Amersham Vale Training Practice	Wed and Thur 6.30pm-8pm and Sat 9am-11am
Vesta Road Surgery	Wed 6.30pm-7.30pm and Sat 9am-12am
New Cross Health Centre	Tue 6.30pm-8pm
Mornington Surgery	Mon 6.30pm-7.45pm
Kingfisher Medical Centre	Mon 6.30pm-8pm
Grove Medical Centre	Tue and Wed 6.30pm-7.30pm
Deptford Surgery	Sat 8.45am-12.15am
Deptford Medical Centre	Tue 6.30pm-7.30pm
Clifton Rise Family Practice	Tue 6.30pm-8pm
Dr Batra's Practice	Tue and Wed 6.30pm-7.40pm
St John's Medical Centre	Tue 7am-8am, Wed 7.30am-8am, Thur 6.30pm-7.00pm, 1st Sat month 8am-11am
Brockley Road Surgery	None
Hilly Field Medical Centre	Mon-Fri 6.30pm-8pm
Honor Oak Group Practice	Mon-Fri 7am-8am
Burnt Ash Surgery	Mon-Wed 7am-8am, Fri 7.30am-8am
Lee Road Surgery	Tue and Thur 7am-8am
Lewisham Medical Centre	Wed 6.30pm-8pm and Sat 9am-12pm
Morden Hill Surgery	Mon 7am-8am and Wed 6.30pm-8.30pm
Belmont Hill Surgery	Wed 6.30pm-7.30pm, Thur and Fri 7am-8am
Triangle Group Practice	Tue 7am-8am and Wed 6.30pm-8pm
Woodlands Health Centre	Mon 6.30pm-9pm, Tue 7am-8am/6.30pm-8pm, Wed 6.30pm-9pm, sat 7am-10am
Nightingale Surgery	Fri 7am-8am
Rushey Green Group Practice	Mon 6.30pm-8pm, 6.30pm-8pm and Sat 9am-11am
Oakview Family Practice	None

Torridon Road Medical Practice	Tue to Thurs 6.30pm-8pm and Friday 6.30pm-7.30pm
Park View Surgery	Mon 6.30pm-7.30pm and Wed 6.30pm-7.45pm
Downham Family Medical Practice	Thur 6.30pm-8pm
ICO HG - Marvels Lane Surgery [branch]	None
Baring Road Medical Centre	Wed 6.30pm-8pm
South Lewisham Group Practice	Mon and Thur 6.30pm-8pm
Woolstone Medical Centre	Mon and Wed 6.30pm-8pm
Bellingham Green Surgery	Mon, Wed, Thurs, Fri 7.55am-8am. Tue 7.55am-8am and 6.30pm-8.30pm.
The Jenner Practice	Mon 7.30am-8am and 6.30pm-7pm, Tue 7.30am-8am and Thur 7.30am-8am.
Sydenham Green Group Practice	Fri 7am - 8am. Alternate Mon, Wed and Thurs from 6.30pm-8pm. Sat alternate weeks 8am-10.30am.
Sydenham Surgery	Mon 6.30pm-7.30pm
The Vale Medical Centre	Tue - Thur 6.30pm-7.30pm
Wells Park Practice	Mon 7am-8am and Tue 6.30pm-8pm, 2nd Sat of month 8.30am-Noon