

Summary Report:

GP Forum

14 October 2015 | 1:30 pm

Bath Cricket Club

Following a presentation from Sue Blackman and Mike MacCallam, the following comments were raised from the floor:

- GPs know the local health and care system better than anyone.
- GPs are gatekeepers not caretakers.
- GPs just need more services and more capacity in the community to help us look after our patients.
- Having a single care plan won't work because patients need to tell a different story for different specialists/conditions.
- I'm excited by the vision for **your care, your way** and see similarities with the Bromley By Bow Centre which was presented by Sam Etherington at a previous GP Forum but how can we do it with no money?
- GPs are swamped by lifestyle illnesses now. Is there enough money to really tackle this?
- Having a realistic workforce plan is absolutely vital. We need money and people for any of these models to work.
- Health visitors, DNs etc. should be tied in with general practice.
- This is an opportunity to move away from a consumerist/industrial conveyor belt of care that is very linear e.g. in one end and out the other.
- We need to encourage more individual responsibility – patients should be seen as a resource/provider of their own care as well as the workforce.
- We need really good collaboration and communication across the system with a set of values that underpin the work of all providers. The system will reorganise itself continually so we need to be working towards a shared goal.

- As a GP, I've spent many years being a "care coordinator" – we're used to treating patients holistically.
- We need to be clear whether this project is about commissioning differently or providing differently – or is it both? If budgets are devolved the boundaries between provides and commissioners will be blurred.
- Whichever model is chosen, will patient choice be a victim? Patient choice is expensive to deliver.
- Primary care in BaNES needs to decide how we want to move forward. What is our appetite for change? We cannot afford to miss this opportunity to integrate community services into general practice.