

Royal College of General Practitioners and Warwick Medical School
Annual Education, Research and Innovation Symposium 18th May 2017
Abstract Submission Form

PRESENTER'S DETAILS		Session B. Workforce
Title Mr Shahavez Kiani		Shahavez@hotmail.com
Department or organisation Warwick Medical school		
Category Research		
PRESENTATION DETAILS		
Authors Shahavez Kiani	Title of Study GENERAL PRACTITIONER LEAD COMMISSIONING: WHAT ARE THE ENABLERS AND BARRIERS TO ENGAGEMENT?	
<p>What's the problem you are tackling? Since the advent of Clinical commissioning groups (CCGs) in 2012, the composition of CCGs and the role that has been taken on by General Practitioners (GPs) within them has fluctuated. The BMA have highlighted GP engagement as being vital to their success (1) and there is evidence of declining engagement according to an NHS England survey (2). GP engagement with CCGs in the sufficient numbers and with the 'ideal GP' is necessary to ensure innovative service development through commissioning (3). It is hence necessary to explore the factors that lead to more GP becoming engaged with commissioning within their communities and also to identify the barriers which disenfranchise GPs from commissioning altogether.</p>		
<p>How did/will you do it? This study was carried out via a review of the literature regarding GP engagement with commissioning in current and past models to identify key domains affecting GP engagement with commissioning. Data was extracted into tables and key findings along with pros and cons of each study were highlighted. From this data, a 'Narrative Synthesis' approach was utilised. Relationships were analysed to find areas of concordance and discordance between the domains to aid discussion.</p>		
<p>What did you find? It was apparent that a GP with commissioning experience would be more likely to engage in commissioning models in the future in the face of health infrastructure redesigns; desirably so as it would bring onto the board an 'awareness of the long-term consequences in setting business model and strategy' (4). Conversely, if these redesigns have left GPs disgruntled after engaging with commissioning, this now leaves them disenfranchised. It is hence imperative that we retain good commissioners as well as enthuse new GP Leaders through an effective commissioning process and defined GP role within it.</p> <p>It was found that if GPs make and see change within their communities through commissioning, they are more likely to take part in it.</p>		

Why does this matter?

For the health policy reform put in place by the health and social care act 2012 to be successful, it requires GPs to engage with the leadership role. As this may not have been an anticipated role, it is important to identify the factors affecting engagement so that we can ensure we bring in skilled GPs into commissioning for sufficient service development and cost reduction.

References:

1. Bma.org.uk. (2012). *BMA - GP engagement vital to CCG success*. [online] Available at: <https://www.bma.org.uk/news/2012/december/gp-engagement-vital-to-ccg-success> [Accessed 1 Dec. 2016].
2. West, D. (2014). *Fall in GP engagement with CCGs, NHS England survey finds*. [online] Health Service Journal. Available at: <https://www.hsj.co.uk/sectors/commissioning/fall-in-gp-engagement-with-ccgs-nhs-england-survey-finds/5075901.article> [Accessed 1 Dec. 2016].
3. Miller, R., Peckham, S., Checkland, K., Coleman, A., McDermott, I., Harrison, S. and Segar, J. (2012). *Clinical engagement in primary care-led commissioning: a review of the evidence*. [online] Available at: <http://blogs.lshtm.ac.uk/prucomm/files/2013/01/Literature-review-revised-Nov-12.pdf> [Accessed 1 Dec. 2016].
4. Imison, C., Ashton, B., Steward, K. and Willis, A. (2011), *Good Governance for Clinical Commissioning Groups: An Introductory Guide* (King's Fund).