

6<sup>th</sup> October 2008

## **The way I see it!**

### *Current DH demands:*

1. Reduce national surgical waiting time to 13 weeks (NB: Down to 8 weeks in the next few years)!
2. Promote 'Care Closer To Home' –as per patient preference

### *Current workforce:*

1. Numerous trained surgeons (Gen surgery, Plastic surgery etc) will find it hard to get Consultant posts in the secondary care in the coming years
2. Numerous GPwSI / PwSI keen to offer their skills
3. Numerous PCTs and GP surgeries have infrastructure

### *Current solutions:*

1. Redesign patient pathways as published in DH CCTH OCT 2007
2. Encourage GPwSI / PwSI to train, update, and become providers of 'appropriate' procedures
3. Encourage qualified and 'trained' surgeons to move from Secondary care to Primary care
4. Need for structured training / curriculum for future workforce –collaboration between RCS and RCGP is imperative
5. Need formal accreditation and revalidation procedures

*Conclusion:* There is a huge untapped potential in GPwSI and PwSI, there will be vast numbers of trained surgeons with no senior hospital jobs, patients prefer CCTH –as long as quality and safety of care is not compromised. Minor and intermediate procedures can be delivered safely from Primary care. It is evidence based and documented.

It is 'no brainer': that procedures that can be safely performed by PCS (GPwSIs' and Surgeons) should be encouraged and actively promoted. Training and accreditation of future workforce is paramount for sustainability.

GPwSI = General practitioners with Specialist Interests

PwSI = Practitioners with Specialist Interests

PCS = Primary Care Surgeons

CCTH = Care Closer to Home