Dear Colleagues

**GP Services and Responsibilities for <CARE HOME NAME> Residents**

We are writing to you in the hope that we can improve working relationships between <PRACTICE NAME> and <CARE HOME NAME> and to ensure there are clear expectations for both parties, moving forward.

We value working in partnership and are committed to providing the best possible care for residents registered with us. It is important that both parties are clear on the scope of services <PRACTICE NAME> can offer. This letter serves to outline our expectations of working with <CARE HOME NAME> and the services we will provide under our General Medical Services (GMS) contract, to ensure there are no misunderstandings about the scope of our responsibilities. Please ensure that the contents of this letter are fully understood at all levels within your organisation.

For routine appointments or urgent issues, residents should access medical services in the same way as any other patient registered with our practice. Here are the appropriate ways to arrange appointments with <PRACTICE NAME>.

• **Routine appointments:** These can be booked by calling **<number>** or using our online system [refer to system by name/NHS app/include link].

Requests for routine advice can also be made by using **<system name>** or by calling **<number>.** Be advised that **<System name>** must only be used for non-urgent appointment requests, medication queries and admin requests.

• **Urgent appointments**: For urgent but non-emergency medical concerns, please contact us directly on **<number>** at 8am on the day appointment is needed[or insert any practice specific detail here]

We offer same-day appointments for urgent issues, and residents will be seen or triaged as appropriate. [Insert any practice specific detail here] All residents will have the same access to general practice services as any other patient registered at our practice

Please note:

* Requests for same-day appointments must be made as early as possible due to limited availability.
* Home visits are reserved for truly bed bound patients or those who are nearing end of life as per our practice policy.
* We would expect <CARE HOME NAME> to facilitate transport for patients who can attend the practice. Residents attending the practice for appointments may also benefit from being accompanied by someone where necessary, to help facilitate communication and care. Non-urgent issues or requests that can be addressed at the practice should not be directed as home visit requests.
* Outside of our core working hours (8am-6.30pm, Monday-Friday excl. Bank Holidays), urgent medical care can be accessed by calling NHS 111, which will provide guidance and refer to the appropriate service if necessary.
* In cases of emergencies, the first point of contact should always be the Ambulance Service by calling 999.

We believe that clear communication between your staff and this practice is essential, and we are seeking commitment from you to ensure that all other requests on behalf of <CARE HOME NAME> residents are raised appropriately with us, with necessary details and through agreed channels. To this end, we propose that repeat prescriptions should be requested with at least [time] notice as is the time scale for all our patients via the patients NHS app or the prescription line.

Additional to our obligations set out in the GMS contract mentioned above, local commissioners resource some enhanced support via Local Enhanced Services and as part of Primary Care Networks (PCNs), GP practices are contracted to work collaboratively with care homes to ensure coordinated and appropriate medical care for residents. This includes care home rounds and developing and maintaining care plans for residents.  PCNs focus on proactive care, identifying and managing the health needs of residents before they escalate into emergencies.

For the avoidance of doubt, GP practices are commissioned to and are responsible for offering medical care to our registered patients - we cannot accept the responsibility of providing direct or routine medical cover for care home establishments themselves unless this is specifically commissioned and resourced. We understand that the health needs of your residents can be complex, and we are committed to working closely with you to ensure that residents receive the care they need in a timely manner. However, <CARE HOME NAME> should have its own arrangements in place for ensuring continuous care and support for residents outside of what we are commissioned to provide.

It is vital that we can move forward with an improved understanding of what is deliverable given the current workload and workforce pressures impacting GP practices. The above is highlighted not out of an unwillingness to support, but of capacity. We simply cannot deliver services outside of our contractual responsibilities. We trust that the above will help both parties and thank you for your understanding and cooperation. Should you have any questions or wish to discuss this further, please do not hesitate to [contact named individual/invite to meet with the team]

Yours Sincerely

<SIGNED>