

DEEP END SUMMARY 34

The Deep End Project for 2019–2022

Nine general practitioners, all members of the Deep End Steering Group, gathered for a half-day meeting on 10th May 2019 at the Department of General Practice, Horselethill Road, Glasgow to plan the activities of the Deep End Group for the next three years.

The discussion focused on developing the sustained engagement of the Deep End movement – with practices with Deep End patients, relevant primary care and third sector organisations, patient groups and Scotland’s institutions that are charged with addressing health inequalities within the broader socio-economic landscape.

- Planned activities include quarterly meetings of the Deep End Steering Group, to monitor progress and look ahead. This is the core mechanism of the DE group for planning and coordination of activities.
- The proposed program of activities for the next three years includes advocacy activity, engagement and collegiate working, developing collective skill sets, GP leadership, and a series of planned meetings.
- Planned advocacy activities include:
 - Continued support for the roll out of the Community Links worker programme and direct engagement with patient representatives.
 - Engagement with IJBs and influence over priority of joint spending initiatives.
 - Taking forward the combined approach from the SHIP and Pioneer projects.
- We hope to expand the collegiate DE movement nationally and internationally (building on the February 2019 conference). The DE group anticipate co-hosting national conferences with partner agencies to share learning and best practice.
- Further engagement with secondary care colleagues and relevant third sector organisations is also planned.
- Key learning and structural elements of the SHIP and Pioneer projects should be merged with a core aim of improving recruitment of early career GPs and retention of experienced GPs in DE communities.
- We propose a rolling programme of roundtable meetings (three per year) to prioritise and report back on Deep End activity. These will be complemented by DE-initiated conferences for undergraduates, DE GPs, and primary care teams.

“General Practitioners at the Deep End” work in 100 general practices, serving the most socio-economically deprived populations in Scotland. The activities of the group are supported by the Scottish Government Health Department, the Royal College of General Practitioners, and General Practice and Primary Care at the University of Glasgow.

Full report available at www.gla.ac.uk/deepend

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