



## INTEGRATION JOINT BOARD

<b>Date of Meeting</b>	26 March 2024
<b>Report Title</b>	General Practice Vision and Objectives
<b>Report Number</b>	HSCP.24.002
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<b>Consultation Checklist Completed</b>	Yes/No
<b>Directions Required</b>	Yes/No
<b>Exempt</b>	No
<b>Appendices</b>	a. General Practice Vision Report b. EQIA Checklist c. General Practice Vision One Page Summary
<b>Terms of Reference</b>	1

### 1. Purpose of the Report

- 1.1. To seek approval of a new vision and set of objectives for General Practice in Grampian.

### 2. Recommendations

- 2.1. It is recommended that the Integration Joint Board:



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- a) Approves the vision and objectives for General Practice in Grampian as set out in Appendix A; and
- b) Instructs the Chief Officer to report back to the Integration Joint Board by end of March 2025 with a progress update on the implementation of the vision and objectives.

### 3. Strategic Plan Context

**3.1.** One of the Strategic Priorities set out in the Aberdeen City Health and Social Care Partnership Strategic Plan 2022-2025 is to create capacity for General Practice to help improve patient experience. The delivery of the proposed vision for General Practice in Grampian will contribute to that Strategic Priority.

### 4. Summary of Key Information

#### HSCP Chief Officer Objective

- 4.1.** The three HSCP Chief Officers held a shared objective for 23/24 to design and create a delivery plan for a Grampian Primary Care Strategy. This was in response to the challenging implementation of the 2018 General Medical Services (GMS) contract. There are a number of relevant factors, many of which are particularly relevant to Aberdeen and Grampian. This includes challenges around recruitment and retention, the application of multi-disciplinary teams across a wide and rural geography resulting in teams being spread too thinly, and a large region with diverse populations, communities and needs. All of which have an impact on the sustainability of general practice and the ability for General Practice to play a key role in preventing ill health in our communities.
- 4.2.** General Practice became the focus of the project due to the particular acute challenges faced by General Practice with primary care providers acting as key stakeholders in the process of determining the vision and associated objectives.
- 4.3.** As a programme we are aware of the cost pressure relating to primary care prescribing and savings plan for 2024/25. Having sustainable general



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practices in the medium to longer term will facilitate continuity of patient care which will contribute to medication reviews and effective prescribing.

### Programme Summary

- 4.4.** A Programme Initiation Document was developed and it set out three aims:
- a shared vision for General Practice across Grampian;
  - identification of the challenges to achieving that vision; and
  - a set of strategic objectives to address those challenges in order to realise the vision.
- 4.5.** In July 2023, a programme board was set up for the General Practice Vision Programme, this includes representation from NHS Grampian, the Health and Social Care Partnerships (HSCP's), General Practice Sub Committee (GP Sub) and the Local Medical Committee (LMC).
- 4.6.** A series of facilitated workshop sessions were organised to develop the vision and strategic objectives. The first workshop was for General Practice staff (166 attendees). The second and third workshops included wider stakeholders such as other primary care services (pharmacy, dental, ophthalmology), acute and secondary care representation, patient representation, and Scottish Government representation (208 and 209 attendees respectively). These were held on:
- Wednesday 27th September 2023;
  - Wednesday 8th November 2023; and
  - Wednesday 22<sup>nd</sup> November 2023.

### General Practice Engagement

- 4.7.** A Service Level Agreement (SLA) between NHS Grampian and practices was agreed to ensure appropriate practice staff were able to engage in and codesign the development of a strategic direction and vision of General Practice across Grampian.

### Patient engagement

- 4.8.** A Patient engagement plan was developed to ensure that a co-production approach was used, and patients from across the Grampian were involved in the development of the vision and strategic objectives.

A wider patient engagement survey has been circulated via multiple sources including; Locality Empowerment Groups (LEG); Patient Participation



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Groups (PPG's); Social Media and GP practices. A total of 1293 responses were submitted.

- 4.9.** A patient stakeholder group to attend the facilitated stakeholder was created. The aim was to have a cross section of patients from across various communities and age ranges. There were around 25 members of the public on this group from across the Grampian areas
- 4.10.** The patient stakeholder group attended the facilitated events on 8th and 22nd November. There were a total on 24 and 22 patient's representatives at the two workshops respectively.
- 4.11.** Feedback from the patient participation group was overall positive. The themes from the patient feedback was that there was a good mix of roles on the table, the sessions were interactive and there was time for good discussions.

### Young Persons Engagement

- 4.12.** Output of the Patient survey showed that there was limited input from young people 16 – 34. Therefore the programme planned and completed further work to reach out to this age range. This included a series of focus groups with senior high school pupils, engagement with university and college students.
- 4.13.** Focus groups at 4 high schools were arranged to ascertain views of the younger generation in relation to 'what matters to them' in general practice. In addition to this a drop in session at Aberdeen university was arranged to engage with students. A survey at these was also shared via QR code to allow for further views to be sought.

### Further Stakeholder Engagement

- 4.14.** NHS Grampian Groups - Presentations were given to various groups across the system this includes the NHS Grampian Clinical Board NHS Grampian Pharmacotherapy Group and the Clinical Interface group to provide an overview of progress to date and emerging key themes.
- 4.15.** MP / MSP briefing - a presentation was given to the NHS Grampian MSP / MP Briefing group, including what the current strengths and challenges are, what the summary output from the facilitated sessions was and what local and national action and support is required.



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- 4.16. Aberdeen City HSCP Locality Empowerment groups – a presentation was given to each of the three Locality Empowerment groups to provide an overview of where this work came from, the approach taken and key emerging themes.
- 4.17. Aberdeen City Council Strategy Board – an overview of the work was provided with a view to considering the future role that General Practice can play in with Aberdeen City Council services to deliver the Local Outcome Improvement Plan (LOIP).

### GP Vision and Objectives

- 4.18. In response to current sustainability challenges and evolving needs within the NHS Grampian area, we have articulated a new vision statement and strategic objectives that capture the changes required to move towards a more sustainable general practice sector within the area.
- 4.19. The proposed Vision Statement, '*A sustainable General Practice across Grampian which enables people in their communities to stay well through the prevention and treatment of ill health*', encapsulates a commitment to fostering health and well-being within our communities. It signifies a commitment to providing comprehensive and accessible healthcare services that not only address illness but also promote preventive care and empower individuals to lead healthier lives.
- 4.20. The Vision is underpinned by 10 Key themes that were highlighted during the stakeholder engagement programme as a problem or challenge to achieving the Vision.



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4.21. An initial objective has been identified against each of the key themes.

Table 1 outlines the 10 Objectives.

Theme	Objectives
<b>Data</b>	Through the Grampian Data Gathering Group, develop a programme of work to: <ul style="list-style-type: none"> <li>• identify and define necessary data sets;</li> <li>• create data gathering processes which enables consistent and consolidated data to be collected across General Practice in a standardised way; and</li> <li>• develop data sharing arrangements with relevant partners where necessary.</li> </ul>
<b>Models of Contract</b>	Develop a flexible approach to the delivery of the existing GMS contract, using currently available levers, following consultation with relevant stakeholders, including: <ul style="list-style-type: none"> <li>• NHSG Primary care and Contracts representatives;</li> <li>• General Practices;</li> <li>• Scottish Government;</li> <li>• Scottish General Practitioners Committee (SGPC);</li> <li>• Local Medical Committee;</li> <li>• Advisory Committees to the Health Board; and</li> <li>• other relevant stakeholders.</li> </ul>
<b>Keeping the population well</b>	Develop, in consultation with community planning partners, a programme to deliver targeted and comprehensive health interventions for at risk communities to offer proactive preventative care and empower communities to participate in their own healthcare and wellbeing.
<b>Digital</b>	Support the development of a regional Grampian Digital plan, which includes General Practice. This will help to develop a coherent approach to the development of a prioritised set of digital solutions to ensure the wider system is best placed to meet the needs of communities within available resource.
<b>Pathways</b>	Review pathways to explore the opportunities, risks and challenges to these pathways. A priority-based implementation plan will be created to improve these pathways.  It is anticipated that the plan will include a solution to empower service users to track progress of their situation across the pathways and offer help and advice while on the pathway. This will promote effective communication, collaboration and coordination, ensuring staff and patients are well informed about the pathways..
<b>Multi-Disciplinary Team</b>	Initiate and complete an evaluation and review of PCIP services that are in place across NHS Grampian. Where best practice is identified, learn from this, and facilitate its rollout to other areas if appropriate.
<b>Continuity of Care</b>	Create pathways that achieve continuity of care for those who will benefit most from continuity of care. In the context of flexible models of contract, identifying areas that can be used for a test of change to support practices to improved models to support meeting complex care.



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<b>Premises</b>	Via the Primary Care Premises Group, each HSCP, in consultation with practices and relevant partners, will develop an estate plan to meet the needs of our communities. Regard will be had to buildings (where required) being well-equipped, accessible, patient-centred, conducive to partnership working, integrated with advanced and standardised technologies, and in the right place to meet the needs of the communities.
<b>Mental Health &amp; Wellbeing</b>	<ul style="list-style-type: none"> <li>• Improve mental health and wellbeing support for schools / young people; making use of technology for adoption and engagement</li> <li>• encourage better wellbeing across patient groups through, for example, supporting social prescribing and realistic medicine where appropriate; and</li> <li>• Identify improvements that will help ensure patients see the most appropriate person the first time to minimise delays in appropriate treatment.</li> </ul>
<b>Recruitment Retention &amp; Education</b>	<p>Develop and implement comprehensive training initiatives that will inspire individuals to enter careers in General Practice and wider MDT and administrative Roles to encourage the retention of talent in Grampian.</p> <p>Future colleagues will have the knowledge and technical and digital skills necessary to meet the vision for General Practice in Grampian.</p> <p>This objective will be delivered in consultation with relevant stakeholders, including:</p> <ul style="list-style-type: none"> <li>• local authorities;</li> <li>• colleges;</li> <li>• universities;</li> <li>• NHS Education for Scotland (NES); and</li> <li>• Royal College of General Practitioners (RCGP).</li> </ul>

### 4.22. Contribution to other National and Local Priorities

The new vision for General Practice will contribute to both local, regional and national initiatives including:

- The National Health and wellbeing outcomes;
- NHS Grampian Vision, Values and Strategic Themes;
- Aberdeen City, Aberdeenshire and Moray HSCPs; and
- Local Outcome Improvement Plans across Grampian.

### Delivery Plan

4.23. It is anticipated that implementation of the vision and objectives will be delivered via the creation of a new programme board which in turn will be supported by project sub groups. Monitoring and evaluation of the programme delivery will be through the programme board structure with annual updates to the three integration joint boards anticipated. This would include updates against, for example, progress against the objectives, the development of new objectives to support the delivery of the vision, and the impact of the objectives as they are delivered. Aberdeen City HSCP's





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contribution to the delivery of the vision will be outlined in future iterations of its Strategic Plan and associated Strategic Delivery Plan.

**4.24.** Key Metrics have been identified to determine if the programme has had a positive impact on the sustainability of general practice within Grampian. These include:

- Number of 2C practice within Grampian
- % of total 2C practices within NHS Grampian
- Number of GPs / GP head count
- Full Time Equivalent of GPs
- GP headcount by designation
- Practice list size
- Average number of patients per GP
- Inpatient waiting list size
- Outpatient waiting list size
- ED attendance rates
- Emergency admission rates
- General Practice Alert System (GPAS)
- Grampian Operational Pressure Escalation System (GOPES)
- Number of GP List closures
- % of List Closures
- Practices Managing List Informally
- % of practices Managing List Informally
- Number of contracts returned
- % of contracts returned
- British Medical Association staff survey

### Next Steps

#### Lessons Learned

**4.25.** A lessons learned process will be carried out post consideration of the new General Practice Vision and Objectives. The lessons learned process is crucial for continuous improvement in the development and optimisation of future projects.

#### Project Closure

**4.26.** Following on from the IJB meetings in March 2024. The programme in its current state will commence the project closure process to ensure that all aspects of the project are completed, documented, and handed over appropriately into the delivery phase.

**4.27.** As we move forward with the programme of work, we are fully committed to realising the vision and objectives outlined, with confidence in the ability to drive positive change and enhance General Practice within NHS Grampian, fostering a renewed sense of purpose and determination among all stakeholders involved.



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- 4.28.** Together we will balance financial pressure, clinical governance, patient safety and staff governance with a focus on prevention and services to some of our most deprived communities.
- 4.29.** This programme of work provides the foundations of which the next steps of true aspirational transformational change can flourish from. It will enable partners across all sectors to be able to collectively identify the future model of what is 'the possible' and work towards implementation to create long term sustainability of general practice services for residents of Grampian.
- 4.30.** We extend our deepest appreciation to all stakeholders for their vital contributions, commitment, and ongoing support in our collective pursuit of enhancing patient-centred care and improving health outcomes across the community and look forward to working with those with the vision for 'the possible'.

### 5. Implications for IJB

#### 5.1. Equalities, Fairer Scotland and Health Inequality

An Equalities Impact Assessment (EQIA) has been carried out as part of the development of the proposals set out above. It is included as Appendix B and no impact has been identified at this time.

As described in the EQIA Checklist Any workstreams agreed by the IJBs and Scottish Government will ensure an EQIA specific to that workstreams will be completed. Continued stakeholder engagement and consultation will be critical across all objectives.

#### 5.2. Financial

There are no direct financial implications arising from the recommendations of this report.

#### 5.3. Workforce

This report links to the following key priority in the workforce plan:  
Recruitment and retention      The Recruitment, Retention and Education Objective within the General practice vision which aims to develop and implement comprehensive training initiatives that will inspire individuals to enter careers in General Practice and Wider MDT Roles so that we can



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retain talent in our area. This will assist with the Recruitment and Retention priority for Aberdeen City HSCP.

### 5.4. Legal

There are no direct legal implications arising from the recommendations of this report.

### 5.5. Unpaid Carers

There are no direct implications arising from the recommendations of this report.

### 5.6. Information Governance

There are no direct implications arising from the recommendations of this report.

However there is potential considerations around increased data sharing which would require information governance resource.

### 5.7. Environmental Impacts

There are no direct environmental implications arising from the recommendations of this report.

### 5.8. Sustainability

The recommendations from this report aim to have a positive impact on General Practice sustainability across Grampian



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### 6. Management of Risk

#### 6.1. Identified risks(s)

Category	Description	Mitigation	RAG Status Post Mitigation)
Sustainability	There is a risk that if the project is not delivered, General Practice within Grampian will continue on an unsustainable basis. This will further exacerbate the challenges outlined above. As the first point of access to healthcare for 90% of the population General Practice delivers early intervention and preventative measures for the whole system and therefore the consequences will not be limited to GP services. Failure to deliver the project will increase the prospect of further increasing demand on secondary care services, unscheduled and urgent care (including PC & OOH), a reduction in NHS performance and poorer outcomes for Grampian's residents across the health and social care system.	<p>The development of a project to deliver a shared vision and strategic objectives for General Practice in Grampian.</p> <p>Adequate funding support from the Scottish Government to build the necessary capacity to deliver this project (which is preventative in nature) to March 2024 and anticipated support to deliver the implementation plan beyond March 2024.</p> <p>Working with public health colleagues to ensure preventative focus of workstreams and focus interventions on need.</p>	Amber
Resource	The programme is required to be approved and then delivered within existing resources, therefore there is a risk that the programme is not delivered due to the financial pressures across	Continued highlighting of concerns and engagement with all stakeholders to understand the importance and risks	High



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	Grampian and other competing priorities.	of not undertaking this project  Consideration of current priorities and workforce that could be realigned to deliver some or all of the programme. As well as phasing of timelines to make workloads manageable.	
Engagement – Public	Reputational risk due to the potential service changes being disliked by the public  Potential increased complaint due to changes to services  There are also risks if changes are not made around patient expectations and experience – waiting times etc.	Patient representatives as part of the Programme governance structure moving forward for co-design and engagement  Patient stakeholder engagement – working with communications teams, partner agencies, and social media to make sure messages made on an ongoing basis  Working with LEGS and working with elected members and community councils to increase understanding for the case to change.	Amber
Engagement – Workforce	Risk that key stakeholder do not have the capacity and therefore loose interest in implementation of priorities	Continued highlighting of concerns and engagement with all	High



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	<p>No dedicated resource to release General Practice to implement within an already pressured system</p> <p>Reputational risks with General Practice if programme not implemented</p>	<p>stakeholders to understand the importance and risks of not undertaking this project</p> <p>Consideration of current priorities and workforce that could be realigned to deliver some or all of the programme. As well as phasing of timelines to make workloads manageable.</p>	
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### 6.2. Link to risks on strategic or operational risk register:

Risk 1: The commissioning of services from third sector and independent providers (e.g. General Practice and other primary care services) requires all stakeholders to work collaboratively to meet the needs of local people.

Mitigation: The proposals within this report aims to mitigate this risk by supporting the sustainability of general practice for the future

Risk 5: Demographic & financial pressures requiring IJB to deliver transformational system change which helps to meet its strategic priorities.

Mitigation: The programme board will look to realign workforces within current recourses well as re-prioritising workload

Risk 7: The ongoing recruitment and retention of staff.

Mitigation: The proposals within the reports aims to take a preventative and early intervention approach in general practice to mitigate the demand on the wider system engagement with public to allow for better understanding on challenges on system, creating better working environment.