



INTEGRATION JOINT BOARD

Date of Meeting	28 August 2018
Report Title	Primary Care Improvement Plan
Report Number	HSCP.18.010
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Consultation Checklist Completed	Yes
Directions Required	No
Appendices	a. Primary Care Improvement Plan

1. Purpose of the Report

- 1.1. The purpose of this report is to bring the Primary Care Improvement Plan forward for approval by the IJB.
- 1.2. This document has already been submitted to the Scottish Government to meet the timeline within the process as set out by the Scottish Government and now require to be approved by IJB.
- 1.3. The Scottish Government have clarified that they required a “local agreement” to be in place (with the GP Sub Committee) prior to sharing with Scottish Government and that IJB sign off may come later, subject to the next available IJB meeting. Local approval by the Local Medical Committee and GP Sub Committee was achieved during July 2018.



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2. Recommendations

2.1. It is recommended that the Integration Joint Board:

- a) Approve the Primary Care Improvement Plan as attached at Appendix A.

3. Summary of Key Information

- 3.1. As reported to IJB in May 2018, the new General Medical Services (GMS) contract came into force from April 2018. This will mean changes in the way the contract is delivered by practices and how the contract is monitored by both NHS Grampian and the Health and Social Care Partnership (HSCP).
- 3.2. Related to this new contract is the provision of transformation funding to help provide GPs with the capacity to undertake their roles as Expert Medical Generalist as set out in the new contract. Each IJB is required to set out our aims and priorities for releasing GP capacity within a Primary Care Improvement Plan (PCIP).
- 3.3. A City GMS Implementation Leadership Group has been established and has worked with and consulted colleagues across our wider primary and community care services to identify priorities for the city across six pre-identified areas. These are:
 - The Vaccination Transformation Programme
 - Pharmacotherapy Services
 - Community Treatment and Care Services
 - Urgent Care (advanced practitioners)
 - Additional Professional Roles
 - Community Links Practitioners
- 3.4. The final PCIP is attached at Appendix A and was submitted to Scottish Government at the end of July 2018 along with equivalent plans for Aberdeenshire and Moray Integration Authority areas.
- 3.5. The development of this plan (considered in conjunction with our Transformation Plan; the Action 15 Plan and the Technology Enabled Care Framework) provide clarity around the prioritisation of a number of tangible



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activities which will contribute towards the delivery of our Reimagining Primary and Community Care Vision and Strategic Plan.

- 3.6. These tangible activities are currently at varying stages from implementation to business case development. In line with usual process, proposed directions will be brought to IJB for approval supported by detailed business cases, and implementation progress and benefits realised will be reported through the Audit and Performance Systems Committee to provide assurance of progress.

4. Implications for IJB

4.1. Equalities

It is anticipated that the implementation of this plan will have a neutral to positive impact on the protected characteristics as protected by the Equality Act 2010.

4.2. Fairer Scotland Duty

It is anticipated that the implementation of this plan will have a neutral to positive impact in relation to the Fairer Scotland Duty.

4.3. Financial

There is specific ringfenced funding available in respect to the implementation of the Primary Care Improvement Plan. Some of this new ringfenced funding replaces previous funding which has now ceased. A high level summary of the allocation of the available funding and how it is planned to be allocated to deliver the PCIP is as set out below:

	2018/19	2019/20	2020/21	2021/22
Vaccine Transformation Programme	£104,776	£181,447	£236,705	£242,173
Pharmacotherapy Services	£410,000	£512,083	£535,926	£555,523
Community Treatment and Care Services	£55,000	£170,400	£400,073	£412,476
Urgent Care	£88,814	£131,752	£421,752	£671,504
Additional Professional Roles	£289,162	£210,847	£401,168	£852,109
Community Links	£747,500	£795,000	£841,200	£873,648
Other/ Under development	£98,160	£64,181	£1,294,596	£2,214,114
PCIP Total	£1,793,412	£2,065,710	£4,131,420	£5,821,547



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Note: These figures are projections based on the available information at the current time. These figures will be updated as business cases are developed and projects implemented and are therefore likely to change over time.

Financial summaries in relation to this plan is required to be submitted to the Scottish Government in September 2018. It is anticipated that financial reports will require to be provided to the Scottish Government at regular intervals.

4.4. Workforce

The plans will result in significant changes to our workforce, including additional staff and new ways of working.

The Scottish Government has included projections for funding for future years, and has advised that it should be assumed that the funding will be recurring and that workforce recruitment to deliver the plans can be progressed as permanent posts where appropriate.

4.5. Legal

The PCIP plan seeks to provide the capacity within General Practice to support the implementation of the new GMS Contract. Any commissioning and procurement of services is required to implement the plan will be progressed in a compliant manner.

4.6. Other

5. Links to ACHSCP Strategic Plan

5.1. These plans link to the following priorities as set out in our Strategic Plan:

- **Support and improve the health, wellbeing and quality of life of our local population.**

The PCIP is a high-level plan, looking to modernise primary and community care in Aberdeen to support and improve the health, wellbeing and quality of life of our local population.

- **Promote and support self-management and independence for individuals for as long as reasonably possible.**

Activities identified in the PCIP, for example Link Practitioners have self-management at their core. The PCIP states an aim to ensure patients are



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better informed about to manage their long term-conditions using technology enabled care.

- **Value and support those who are unpaid carers to become equal partners in the planning and delivery of services, to look after their own health and to have a quality of life outside the caring role if so desired.**

Activities in the PCIP such as Link Workers, and support in using digital technologies will help support unpaid carers, including during periods of need.

- **Strengthen existing community assets and resources that can help local people with their needs as they perceive them and make it easier for people to contribute to helping others in their communities.**

Again, activities identified in the PCIP, such as the introduction of Link Practitioners, will help strengthen and sign-post to existing community assets.

- **Support our staff to deliver high quality services that have a positive impact on personal experiences and outcomes**

Support for our workforce, both existing and new is interwoven throughout this plan. A key aim of the PCIP is to releasing capacity for General Practitioners to allow them to focus on their Expert Medical Generalist roles.

6. Management of Risk

6.1. Identified risks(s)

Workforce: There is a risk that the workforce required to deliver the aims that are the subject of this report may not be available. This risk will be mitigated through ongoing engagement with key stakeholders and the ongoing refinement of implementation proposals to deliver the plans.

Financial: The risk of not approving the PCIP may result in the loss of funding to the partnership as set out in the financial implications of this report.

6.2. Link to risks on strategic or operational risk register:



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- Workforce planning across the Partnership is not sophisticated enough to maintain future service delivery
- There is a risk of financial failure, that demand outstrips budget and IJB cannot deliver on priorities, statutory work, and project an overspend

6.3. How might the content of this report impact or mitigate these risks:

The PCIP sets out ACHSCP's intentions in relation to releasing capacity of General Practitioners which help mitigate the workforce risks as outlined in the ACHSCP's strategic risk register. Furthermore, approving the PCIP will help ACHSCP may use of the additional funding to address these issues.

Approvals	
	Sally Shaw (Interim Chief Officer)
	Alex Stephen (Chief Finance Officer)