



Glasgow City Council

**Wellbeing, Empowerment, Community and Citizen Engagement
City Policy Committee**

**Report by Chief Officer, Glasgow City Health and Social Care
Partnership**

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GLASGOW CITY PRIMARY CARE IMPROVEMENT PLAN

Purpose of Report:

The purpose of this report is to brief the committee on the primary care improvement plan for Glasgow City.

Recommendations:

The Wellbeing, Empowerment, Community and Citizen Engagement City Policy Committee is asked to:

- a) note the contents of this report.

Ward No(s):

Citywide: ✓

Local member(s) advised: Yes No X consulted: Yes No X

1. Introduction

- 1.1 The Primary Care Improvement Plan (PCIP) is a joint plan between Glasgow City IJB and the GP Subcommittee of the Local Medical Committee. The GP Subcommittee formally approved the plan on 31 July 2018 and will be considered for approval by the IJB at its meeting on 19 September 2018. Link to IJB report and PCIP below:
<https://glasgowcity.hscp.scot/publication/item-no-9-primary-care-improvement-plan>

2. Background

- 2.1 The Scottish Government has introduced a new contract with GPs for the next three years in response to growing pressures within primary care that are threatening sustainability, such as rising demands on the service and concerns about GP recruitment, early retirement and retention. The aim of the new contract is to enable GPs to operate” as “expert medical generalists”. This will be achieved by diverting work that can best be done by others from GPs, thereby leaving GPs with more capacity to care for people with complex needs and to operate as senior clinical leaders of extended multi-disciplinary teams.
- 2.2 The principal elements of the new contract are:
- To re-design primary care services to enable longer consultations with GPs for people with multiple morbidities requiring complex care.
 - Health Boards to take on responsibility for GP leased and owned premises.
 - Health Boards and GPs to become joint data holders to reduce the risk to GPs from information sharing.
 - Improved use of new information technology.
 - To give GP clusters a role in quality planning, quality improvement and quality assurance.
 - Provide new opportunities for other practice staff-nurses, managers and receptionists.
- 2.3 GPs voted to support introduction of the new GP contract and this came into force from April 2018. A further poll of GPs on the new contract is due to take place in 2020.

- 2.4 To support the introduction of the new contract a Memorandum of Understanding (MoU) covering the period 1st April 2018 to 31st March 2021 was signed jointly by the Scottish Government, the British Medical Association, Integration Authorities and NHS Boards. The purpose of the MoU is to facilitate the introduction of the new contract and, in particular, to set out how additional funding will be used over the next three years to reconfigure services.
- 2.5 The MoU was followed up by the Scottish Government with a funding letter which outlined how the additional investment through the Primary Care Improvement Fund (PCIF) would be allocated to each Integration Authority and to explain the conditions attached to the funding.
- 2.6 For 2018-19 the PCIF is £45.7M for Scotland which is planned to rise over the next four years to £50M in 2019-20, £105M in 2020-21 and to £155M in 2021-22. Based on NRAC, Glasgow City's allocation for 2018-19 is £5.5M rising to £18.7M by 2021-22. This sum is inclusive of existing commitments and combines previous separate funds.
- 2.7 Although described as "earmarked recurring funding", it is emphasised in the Scottish Government funding letter that we should treat these figures as planning assumptions and subject to amendment by Ministers without notice. The allocation of PCIF requires to be planned alongside separate funding allocated for out of hours primary care and for Action 15 of the national mental health strategy (a part of which is intended for primary care).

3. Content of the Primary Care Improvement Plan

- 3.1 The MoU committed integrated joint boards to develop for each HSCP a Primary Care Improvement Plan in collaboration with GPs and other stakeholders. The PCIP should set out how we will deliver on the MoU's six priorities for reducing appropriately the workload of GPs over the next 3 years and how we intend to use the additional funding from the Scottish Government.
- 3.2 The key priorities for the PCIP are prescribed by the MoU and are as follows:
- A **vaccination transformation programme** to transfer work from GPs to the HSCP for children, adults and travel.
 - **Pharmacotherapy services** with the transfer of acute, repeat prescribing and medication management to HSCP employed pharmacy support staff
 - **Community treatment and care services** to be undertaken by the HSCP, including phlebotomy, ear syringing, suture removal and management of minor injuries and dressings.

- **Urgent care** with the employment of advanced practitioners providing first response for home visits and for urgent call outs.
- **Additional professional** roles as part of multi-disciplinary teams, including physiotherapists and community clinical mental health professionals to see patients as a first point of contact.
- **Community Links Workers** to help patients navigate and engage with wider services.

3.3 We undertook a communication and engagement process to inform the preparation of this plan. We used our existing city wide and local planning structures as well as running additional workshops and meetings. We received also a number of written comments. The communication and engagement process involved the following stakeholders:

- GPs and their staff, such as practice managers and practice nurses
- Patients, their families, carers and local communities, primarily through our local engagement forums.
- Primary care providers: pharmacists and optometrists
- HSCP staff, such as district nurses, physiotherapists, prescribing support pharmacists
- Third sector bodies carrying out activities related to the provision of primary care.

3.4 This plan has been written in partnership with GPs in Glasgow over the past few months and we have made every attempt to respond to their views and suggestions.

3.5 We gave a commitment also to all the people we talked to that we will continue to involve them in the further development of the proposals outlined in this plan.

3.6 For each work stream the plan is structured around the following sections:

- Background and context
- Requirements of the MoU
- Evidence from the work so far and implications for Glasgow
- Messages from engagement
- Initial modelling based on the available intelligence to indicate what is likely to be required to support all practices. In some cases this is based on broad assumptions
- Actions split between those actions to be started in 2018/19 and those for subsequent years

4. Policy and Resource Implications

Resource Implications:

Financial: None for Glasgow City Council

Legal: None for Glasgow City Council

Personnel: None for Glasgow City Council

Procurement: None for Glasgow City Council

Council Strategic Plan: A Healthier City

Outcomes are:

- Glasgow is healthier
- our services are focused on early intervention and prevention
- citizens and communities are more self reliant for their health and wellbeing
- we have integrated services with health that support Glaswegians when they need it

Equality Impacts:

Does the proposal support the Council's Equality Outcomes 2017-22

Yes. For example, the Community Links Workers and Mental Health Workers are likely to contribute to the achievement of Outcome 8 "Service users with protected characteristics are provided with targeted, improved and more accessible information about services provided by the Council family".

What are the potential equality impacts as a result of this report?

Positive impacts

Sustainability Impacts:

Environmental: Not applicable

Social: Promoting the sustainability of primary care services

Economic: Additional employment opportunities

Privacy and Data Protection impacts: None for Glasgow City Council

5. Recommendations

5.1 The Wellbeing, Empowerment, Community and Citizen Engagement City Policy Committee is asked to:

a) note the contents of this report.