

Scottish Borders Health & Social Care
Integration Joint Board



Meeting Date:20 August 2018.....

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PRIMARY CARE IMPROVEMENT PLAN

Purpose of Report:	To propose to the Integration Joint Board the submission to the Scottish Government of the Primary Care Improvement Plan for the Scottish Borders, and to agree its implementation.
Recommendations:	The Health & Social Care Integration Joint Board is asked to: <ul style="list-style-type: none"> a) Agree the Primary Care Improvement Plan. b) Agree to issue a direction to NHS Borders to implement the Primary Care Improvement Plan.
Personnel:	There will be staffing implications within the PCIP, these will be addressed through each work stream.
Carers:	N/A
Equalities:	The overall policy direction of the Primary Care Improvement Plan will apply equally where possible. Health Inequality Impact Assessments will be undertaken at individual work stream level.
Financial:	There will be staffing implications within the PCIP, these will be addressed through each work stream and funding applied within the overall budget limit of the plan. Should further funding be required the normal decision making and governance procedures will apply.
Legal:	Introduction of a new approach to primary care provision. This proposal has been discussed at the Board Executive Team, the Executive Management Team, the Clinical Executive Strategy Group and agreed by the GP Sub Committee.

Risk Implications:	Risk Assessments will be undertaken at individual work stream level.

Background

- 1.1 The Primary Care Improvement Plan (PCIP) will aim to support the further introduction of the new contract for General Practitioners and improve the overall efficiency and quality of Primary Care provision within the Scottish Borders.
- 1.2 Integration Authorities are required to;
1. Develop three-year Primary Care Improvement Plans (PCIPs), consulting NHS Boards and other partners. These must be agreed with the local GP Sub Committee of the Area Medical Committee, with the arrangements for delivering the new GMS contract being agreed with the Local Medical Committee (LMC),and
 2. Through the Plans, commission, deliver and resource (including staff resources) the six priority services identified in the Memorandum of Understanding (MoU) and the Contract document (“Blue Book”) in support of the new GP contract.
- 1.3 The Primary Care Improvement Plan focuses on six priority work areas:
- Vaccinations
 - Pharmacotherapy
 - Community Treatment and Care
 - Urgent Care
 - Additional Professional Roles
 - Community Link Workers
- 1.4 The GP Sub Committee of the Scottish Borders agreed the plan at its meeting held on 8 August 2018.
- 1.5 The plan offers a high level summary of intentions and an indication of resource allocation. Further work is required to reach agreement on the required provision for the Vaccination work stream for example. The Primary Care Division of the Scottish Government have been involved throughout our preparations and remain supportive. We expect, as do all Integration Joint Boards (IJBs), that more detail will be added to the plan as we progress further into the financial year. The plan expects delivery within three years, there is time therefore to work across the partnership of stakeholders to provide further detail on requirements. Further reports and refinements to the plan will be taken to the Strategic Planning Group of the IJB, with highlight reports being brought to the IJB.

Funding

- 2.1 The Scottish Government is investing a total of £115.5 million in the Primary Care Fund (PCF) in 2018-19. There are a number of elements to the overall Primary Care Fund:

- Primary Care Improvement Fund:
- General Medical Services;
- National Boards; and
- Wider Primary Care Support including Out of Hours Fund.

2.2 An in-year NRAC allocation to Integration Authorities (IAs) (via Health Boards) will comprise £45.750 million of the £115.5 million Primary Care Fund. For the Borders this equates to an allocation of £962,000 for 18/19, the fund must be delegated in its entirety to Integration Authorities.

2.3 Primary Care Improvement Plans should set out how this additional funding will be used and the timescale for the reconfiguration of services.

2.4 The money must be used by IAs for the purposes described by Scottish Government. The PCIF including base lined GP pharmacy funding should be:-

“treated as PCIF and cannot be subject to any general savings requirements and must not be used to address any wider funding pressures.”

Directorate for Population Health, Primary Care Division, Scottish Government. 23rd May 2018.

2.5 The PCIP will enable the Health Board and the Health and Social Care Partnership, to support the continued introduction of the new GP Contract and to introduce further improvements in the primary care offer for the residents of the Scottish Borders.