

Subject: **New General Medical Services Contract**

Purpose: To identify the key points of the new General Practitioner (GP) contract – in particular the implications for North Ayrshire Health and Social Care Partnership (HSCP). The document will summarize the key points of the GP contract, the key Integrated Joint Board/North Ayrshire Health and Social Care Partnership (IJB/NAHSCP) responsibilities relating to the new GP contract and will overview the proposed pan-Ayrshire (multiple IJB collaboration) approach.

Recommendation: Members of the IJB are asked to note the key points of the new GP contract and how this relates to North Ayrshire HSCP.

GP	General Practitioner
HSCP	Health and Social Care Partnership
IJB	Integrated Joint Board
NA HSCP	North Ayrshire Health and Social Care Partnership
EMG	Expert Medical Generalist
HB	Health Board
PC	Primary Care
SPOG	Strategic Planning Operational Planning Group
A&A	Ayrshire and Arran
NA	North Ayrshire

1. EXECUTIVE SUMMARY

- 1.1 The General Practitioner (GP) contract has been accepted and approved by Scottish GPs. The contract will change the way in which Primary Care services are delivered in Scotland and North Ayrshire.
- 1.2 Integration authorities have a statutory role to commission Primary Care services.
- 1.3 Health and Social Care Partnerships (HSCPs) must produce Primary Care improvement plans to clarify funding and timescales to deliver the content of the new contract.
- 1.4 The contract indicates that there must be a pan-Ayrshire approach to the production of improvement plans to ensure consistency of approach within our health board (HB) area.

2. BACKGROUND

- 2.1 The new GP contract (the Blue Book) was accepted by general practitioners via a national vote: 71% voted in favour. The new GP contract aims to provide a new way of providing general medical services in Scotland in order to deal with significant GP practice sustainability issues linked with increasing primary care demand associated with changing national demographics including an ageing population and poverty.
- 2.2 Part of the new contract documentation includes a paper entitled: 'Memorandum of Understanding' which outlines the roles and responsibilities of various stakeholders in the delivery of this new contract. The new contract will deliver significant changes in a phased manner over a 3 year period from 1st April 2018 until 1st April 2021.
- 2.3 The following are the key IJB /HSCP points/implications
1. Integration bodies have a statutory role in commissioning primary care services in order to re-design services to support general practitioners and their new role, as described in the new contract, as Expert Medical Generalist (EMG).
 2. IJBs will plan, design and commission primary care services and will direct the health board (HB) to provide the proposed primary care (PC) services
 3. Each HSCP has to compile and complete an HSCP PC improvement plan by 1st July 2018. This plan will clarify funding and timescales associated with implementing the proposed changes within this plan.
 4. In HB areas where there is more than one HSCP, the new contract states that HSCPs must work together to produce improvement plans that support complementary pan-HB developments. This means that locally we are empowered to produce 'Pan-Ayrshire' improvement plans collaboratively with South and East Ayrshire HSCPs.
 5. A Strategic Planning Operational Group (SPOG) meeting was held on 26th January 2018 to discuss Pan-Ayrshire improvement plan principles / guidelines, alongside Clinical Directors and local GP representatives. At this meeting it was agreed that there will be a Pan-Ayrshire approach to the production of HSCP PC development plans. This will be managed via the PC Programme Board which will be expanded and co-chaired by the Chief Officer of EA HSCP and the Secretary of the GP Sub Committee.
 6. An important part of the new contract is moving work from GPs to the health board and development of multi-disciplinary team working. As part of this process, there are 7 key priorities embedded in the new contract. These include the following which must be completed over a 3 year period:
 - Vaccination transformation program
 - All vaccinations will be managed and administered by non-GP providers. Key priority is travel vaccination
 - Pharmacotherapy
 - All non-consultation prescribing tasks will be devolved to the Ayrshire and Arran (A&A) HB prescribing team
 - Community treatment and care services
 - Urgent care including out of hours
 - Additional professional roles

- Community link workers
 - Workforce optimization – recruitment and retention
7. The following funding will be made available to facilitate the progress and completion of the first three years of the new GP contract. Some of this proposed funding is already in the system. Over the next three years the following funding will be made available across Scotland, in brackets is the Ayrshire allocation within that sum:-

1. 2018/19 £45m (£3.4m)
2. 2019/20 £58m (£4.3m)
3. 2020/21 £112m (£8.4m)

£23m has been committed to finance the new funding allocation to GP practices in Scotland. Practices with high demand and socio-economic deprivation will have increased funding. This includes many North Ayrshire practices. No practices will have any reduction in their funding.

In addition to the £45m funding to fund the new GP contract in 2018/19 (including MDT formation and delivery of the seven key priorities) a further £65m will be made available to health boards to pay for general medical service provision and primary care development.

8. Funding

By the end of this Parliament the Scottish Government will invest an additional £250m in support to General Practice. The funds will support the new practice funding formula, national support arrangements, premises support and the development of the multi-disciplinary team.

- The Scottish Draft Budget proposals for 2018/19 published in December 2017 confirmed a first phase of funding of £110m for 2018/19;
- A letter was circulated in November 2017 to Practices setting out the implications from the new proposed funding formula and allocating the £23m. No practice has a reduction in funding;
- A proportion (to be confirmed) of the £110m for 2018/9 will be allocated using the NRAC formula to support the development of multi disciplinary teams in line with the MoU. Primary Care Improvement Plans will set out how these funds will be used.

3. PROPOSALS

- 3.1
- NA IJB and HSCP note the implications of the new GP contract
 - NA IJB agree to pan-Ayrshire IJB collaboration to produce primary care improvement plans which will facilitate the implementation of the new GP contract

3.2 **Anticipated Outcomes**

The new GP contract has been approved. The IJB will be responsible for the commissioning and delivery of several primary care services that were previously carried out by GPs and their practice-based teams. The 3 HSCPs and IJBs in Ayrshire are tasked with developing 'Pan-Ayrshire' primary care improvement plans in collaboration with East and South HSCPs/IJBs. These plans must detail resources and timelines over the 3-year time frame for delivery of the content of the new GP contract.

3.3 **Measuring Impact**

Impact will be measured within North IJB and across our fellow Ayrshire IJBs via delivery of anticipated outcomes. Processes/plans of action and timelines will be developed to measure progress and achievement of outcomes.

4. **IMPLICATIONS**

Financial :	The Scottish Government has empowered IJBs to be service commissioners and this is bound in statute. The IJB in collaboration with the other Ayrshire IJBs will develop primary care improvement plans which will deliver the outcomes which have been ordered by the Scottish government. These outcomes must be delivered within the context of tight fiscal context faced by all IJBs with additional funding from the Scottish government, the details of which have yet to be fully clarified.
Human Resources :	None.
Legal :	None.
Equality :	None.
Environmental & Sustainability :	None.
Key Priorities :	None.
Risk Implications :	None.
Community Benefits :	None.

Direction Required to Council, Health Board or Both	Direction to :-	
	1. No Direction Required	x
	2. North Ayrshire Council	
	3. NHS Ayrshire & Arran	
	4. North Ayrshire Council and NHS Ayrshire & Arran	

5. **CONSULTATION**

- 5.1 This document is based on consultation with my interpretation of the new GP contract and with primary care teams, pan-Ayrshire.

6. **CONCLUSION**

- 6.1 Members of the IJB are asked to note the key points of the new GP contract and how this relates to North Ayrshire HSCP.

For more information please contact Dr Paul Kerr, Clinical Director on 01294 317705 or paulkerr@north-ayrshire.gcsx.gov.uk