

Project Manager's Assurance Report

THE 2018 GENERAL MEDICAL SERVICES CONTRACT IN SCOTLAND



1. INTRODUCTION

This Assurance Report has been prepared in relation to the **implementation of the 2018 General Medical Services Contract in Scotland**. This strategic document is supported by a memorandum of Understanding and proposes a refocusing of the General Practitioner role as expert medical generalists. This refocusing of the GP role will require some tasks to be carried out by members of the wider primary care team where it is safe, appropriate and improves patient care. It is expected that these new arrangements will see a reduction in risk for GP partners and a substantial increase in practice sustainability.

Louise Bussell, Senior Responsible Officer has executive responsibility for the delivery of the programme and chairs the Programme Board.

Jill Mitchell is responsible for delivering the programme of work and is supported by a core project team of Catriona Naughton (Project Manager) and work stream leads. Highland GP Sub and LMC are key partners in the development of the programme.

This document provides a summary in relation to progress achieved on the project to date, activity in the previous period and forecast for the coming period. This progress report covers the period to **31/07/2022**.

2. Project Status - RAG

	Previous RAG	Current RAG	Comments
Timeline	Amber	Red	Year 1 programmes of Pharmacotherapy and MSK physiotherapy are well established. Strong progress is being made against year 2 programme CLW and steady progress in MH. RAG status remains at red due to the delay and progress in VTP, CTAC & Urgent Care.
Scope	Green	Amber	Workstream outputs continue to be developed and agreed broadly in line with the plan. There are ongoing discussions around VTP, there is no defined model for CTAC & Urgent Care, and so the RAG status remains as amber.
Budget (Aspirational)	Amber	Red	A total allocation of £7.5m available and ring fenced to develop services associated with the programme. The funding will not deliver all of the tasks and services across all workstreams to all practices. Clarity on service delivery against funding will become clearer as workstreams develop.
Budget (Actual)		Amber	Track actual workstream progress against budget/spend. £3.5m committed @ 30.06.22. Budget management and monitoring arrangement in place around the plan. Development of workstream models will better define actual financial requirements. Increasing pot of non-recurrent funding.

3. PROJECT PROGRAMME

Current Programme:	Rev Date: 31/07/2022	Rev: 31	Current Status:	Update	Amber
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Milestone Activity	Due date	Estimated / actual date	RAG Status
Progress pharmacotherapy recruitment	August 2019	August 2019	Green
MSK physiotherapy recruitment in line with model	January 2019	August 2019	Green
Develop and agree MH delivery model	November 2019	June 2019	Complete
Progress sustainability loan scheme applications	February 2019	April 2019	Green
PCIP 2	May 2019	July 2019	Complete
Tracker Mar 19	May 2019	May 2019	Complete
Tracker Sep 19	Oct 2019	Oct 2019	Complete
Updated PCIP2	Jan 2020	Jan 2020	Complete
PCIP 3	Oct 2020	Oct 2020	Complete
Collaborative Working workstream established	Aug 2020	Aug 2020	Complete
CLW contract awarded	April 2021	April 2021	Complete
PCIP 4/PCIP 4.5	May/Nov 2021	May/Nov 2021	Complete
PCIP 5	May 2022	May 2022	Complete

4. KEY PROJECT DELIVERABLES COMPLETED THIS PERIOD (TO 31st July 2022)

Description	Status	Owner
A number of MH Band 6 & Band 3 posts recruited	Green – In Progress	Arlene Johnstone
A number of CLW posts recruited	Green – In Progress	Cathy Steer / (SIMS)
Vaccinations established within Community Directorate	Complete	Rhiannon Boydell
Progress Urgent Care	Green – In Progress	Jill Mitchell
Establish GP Premises Workstream	Complete	Jill Mitchell

5. KEY PROJECT DELIVERABLES TO BE COMPLETED IN NEXT PERIOD (TO 31st August 2022)

Description	Status	Owner
Workstream eHealth delivery plan developed	Amber – In Progress	Alister McNicoll
Further recruitment to remaining CLWs posts	Green – In Progress	Cathy Steer / (SIMS)
Recruitment and on boarding of MH Band 6 & 3 posts	Green – In Progress	Arlene Johnstone
Phased delivery of PCMH services to Practices across NH	Green – In Progress	Arlene Johnstone
Progress CTAC (VTP integration)	Amber – In Progress	Jill Mitchell

6. KEY PROJECT RISKS IN THE REPORTING PERIOD

Current Risks:	Rev Date: 31/07/2022	Rev: 18	Current Status:	Update	Amber
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Key Risks in the period include:

Description	Risk level (current)	Current Mitigation/Action	Risk level (Target)	Next Review
Risk of destabilising established services due to new services being introduced within their speciality.	High	Close monitoring by project team and programme board	Medium	
Overall funding outlined by SG may not be sufficient to meet the aspirations of full contract delivery.	High	Workstreams to identify gaps or pressures Continue to report via PCIP submissions.	Low	Sep-22
Actual workstream progress against budget/spend	High	Develop workstream models to better define actual financial requirements.	Low	Sep-22
Failing to deliver workstreams in a timely manner.	High	Close monitoring by project team and programme board	Low	Sep-22
Lack of premises space to accommodate staff	High	Close monitoring by project team and programme board	Low	Sep-22
There is a risk to retention of pharmacy staff if they are not being integrated into practice teams and not being encouraged to continually develop professional skills.	High	Close monitoring by project team and programme board	Low	Sep-22
Geography of highland is challenging our ability to provide equitable service to all practices as outlined in the contract.	Medium	Development of workstreams will identify key challenges with delivery of both urban and rural services equitably.	Medium	Sep-22
Unable to recruit to new posts developed as part of the PCIP in an equitable way across North Highland.	Medium	Close monitoring by project team and programme board Skill mix	Medium	Sep-22
Funding available for services/posts may be impacted on increased employers superannuation costs (6%) and agreed Agenda for Change pay structure and pay awards.	Medium	Active monitoring within the governance structures. Focus on tangible operational progression of the outstanding workstreams Funding for existing posts unaffected.	Medium	Sep-22
Workstreams are at different stages of development resulting in delivery based inequitable resource allocation.	Medium	Close monitoring by project team and programme board Gap Analysis	Low	Sep-22
Impact on ability to hold to timescales of end March 2022 and subsequent impact of transitional arrangements and the financial ability to support further development of workstreams.	Medium	SG/BMA Joint Statement and MOU2 issued. Further clarity around transitional arrangements required.	Low	Sep-22
Vaccination Strategy group in place out with this Programme's governance structure. Unknown impact on VTP and Collaborative Working.	Medium	Escalated to Programme Board to seek clarity for this Programme.	Low	Sep-22

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7. ADDITIONAL PROFESSIONAL ROLES – MSK PHYSIO				
Current Programme:	Rev Date: 31/07/2022	Rev: 11	Current Status:	Update GREEN
Current Plan	Progress	Due date	Est. / actual date	
Submit Business case to Programme Board	Complete	October 2018	Complete	
Develop implementation plan 1:13,000 patients	Complete	December 2018	Complete	
Recruit Senior FCP posts	Complete	February 2019	Complete	
Identify E-Health requirements	Complete	October 2018	Complete	
Recruit to FCP posts across Highland	In progress	March 2019	Complete	
Create Memorandum of Understanding	Complete	April 2019	Complete	
Confirm access to clinic accommodation	Complete	April 2020	Complete	
Meet eHealth requirements for access to Vision etc.	Complete	Feb 2020	Complete	
Develop monitoring and evaluation reports	Complete	July 2021	Complete	
Full evaluation of FCP service clinical activity	Requires data sharing agreement	March 2022	October 2022	
Full FCP service evaluation awaited	Details awaited	October 2022	October 2022	

8. PHARMACOTHERAPY				
Current Programme:	Rev Date: 31/07/22	Rev: 12	Current Status:	Update GREEN
Current Plan	Progress	Due date	Est. / actual date	
Develop equitable service model with all practices having access to level 1 services	Gap analysis undertaken and continually reviewed.	Ongoing	Ongoing	
Recruit 4 WTE band 7 clinical pharmacists	Posts continually being advertised	March 2023	March 2023	
Recruit 4 WTE band 5 pharmacy technicians	Posts continually being advertised	March 2023	March 2023	
Recruit 6 WTE band 4 pre-registration trainee pharmacy technicians	Interviews schedules for 27.07.22	Sept 2022	Sept 2022	
Recruit 6 WTE band 6 pharmacists	Job description being developed	Sept 2022	Sept 2022	
Undertake survey of roles and tasks being undertaken in each practice	In development	Oct 2022	Oct 2022	
SBAR submitted to Project Board		May 22	May 22	
Work with practices to optimise efficiency of prescribing processes – acute prescriptions and serial prescribing	Benchmark data reports to compare practices.	Ongoing	Ongoing	
Develop monitoring and evaluation reports	Working with NSS via SP3A	Dec 2022	Dec 2022	

9. ADDITIONAL PROFESSIONAL ROLES – MENTAL HEALTH				
Current Programme:	Rev Date: 31/07/22	Rev: 13	Current Status:	Update AMBER
Current Plan	Progress	Due date	Est. / actual date	
Recruit lead role	Complete	January 2021	Complete	
Develop & Agree equitable service model	Plan to be agreed within Workstream	September 2018	Complete	
Recruit Band 6 posts	Going through recruitment process	September 2021	September 2021	
Recruit Band 3 posts	Going through recruitment process	December 2021	December 2021	
Phased implementation	Ongoing	January 2021	October 2021	
MoU – Operational Policy	Circulated to GP sub reps and workstream group 20.05.22	April 2022	June 2022	
Mental Health And Wellbeing In Primary Care Services funding proposal submission	Complete	May 2022	May 2022	

10. COMMUNITY LINK WORKERS				
Current Programme:	Rev Date: 31/07/2022	Rev: 11	Current Status:	Update AMBER
Current Plan	Progress	Due date	Est. / actual date	
Develop & Agree equitable service model through options appraisal	Complete	December 2018	Complete	
Identify E-Health requirements	Complete	June 2018	Complete	
Create Communications and engagement plan	Complete	April 2019	Complete	
Identify funding requirements and undertake Gap Analysis	Complete	February 2019	Complete	
GP survey undertaken to establish interest in CLW and any current issues	Complete	July 2019	Complete	
Stakeholders analysis undertaken as part of the communication plan	Complete	March 2020	Complete	
Optional appraisal undertaken to identify delivery model	Complete	September 2019	Complete	
Commissioning for one third sector organisation to commence	Complete	March 2020	Complete	
Develop service specification and tendering documentation	Complete	June 2020	Complete	
Develop remote and rural pilot proposal	Complete	April 2020	Complete	
Elemental and ISAs returned	Complete	April 2022	Complete	

11. VACCINATION TRANSFORMATION PROGRAMME				
Current Programme:	Rev Date: 30/06/22	Rev: 2	Current Status:	Update AMBER
Current Plan	Progress	Due date	Est. / actual date	
Vaccinations established within Community Directorate	In progress	March 2022	March 2022	
SBAR submitted for Travel Vax to transfer to Community Pharmacies.	In progress	May 2022	July 2022	
Locality Plans (x 5) being devised for VTP delivery	In progress	June 2022	August 2022	

12. COMMUNITY TREATMENT & CARE				
Current Programme:	Rev Date: 31/07/22	Rev: 3	Current Status:	Update RED
Current Plan	Progress	Due date	Est. / actual date	
Re-establish CTAC activities	In progress	April 2022	June 2022	
Exploration of alignment with VTP activities.	In progress	June 2022	August 2022	

13. URGENT CARE				
Current Programme:	Rev Date: 31/07/2022	Rev: 3	Current Status:	Update RED
Current Plan	Progress	Due date	Est. / actual date	
Re-establish Urgent Care activities	In progress	April 2022	June 2022	
Refresh worksteam group membership and set date	Complete	June 2022	June 2022	