



ANGUS HEALTH AND SOCIAL CARE
INTEGRATION JOINT BOARD – 26 OCTOBER 2022
PRIMARY CARE IMPROVEMENT FUND
REPORT BY GAIL SMITH, CHIEF OFFICER

ABSTRACT

The purpose of this report is to provide members with an update on the position in relation to the Primary Care Improvement Fund allocation for 2022-23.

1. RECOMMENDATIONS

It is recommended that the Integration Joint Board: -

- (i) Acknowledge the position in relation to the Primary Care Improvement Fund (PCIF) allocation.
- (ii) Approve the in-year plan for PCIF spend.
- (iii) Support the position in relation to the development of an “Angus Investment Fund for Primary Care. This would be funded from the in-year 2022/23 financial position, and in the first instance, it is recommended that this is set at £0.7m. This represents about 25% of the funds that have reverted to the Scottish Government but would allow some of the previous intentions to be progressed.
- (iv) Support the acceleration of the recruitment of a Project Support Officer (previously approved in report 8/22), a post that is critical to the delivery of the GP Practice Premises Strategy.
- (v) Approve the Direction, as attached (Appendix 1) and instructs the Chief Officer to issue Direction to NHS Tayside.

2. BACKGROUND

The new GP Contract (2018) saw a refocussing of the role of the GP to that of expert Medical Generalist working alongside an extended multi-disciplinary team. 6 key areas were prioritised for service redesign: Pharmacotherapy, Vaccination Transformation, Community Care and Treatment Services, Urgent Care, Additional Professional Roles and Community Link Workers.

In July 2021 Scottish Government issued a further Memorandum of Understanding (MoU2) which recognised that not all of the 6 areas were deliverable by 31 March 2022 and issued a revised timescale for delivery by 31 March 2023 for Urgent Care, Additional Professional Roles and Community Links Workers.

Health & Social Care Partnerships (HSCPs) regularly provide updates to Scottish Government on the progress being made via the Submission of a PCIP tracker. These trackers have evidenced that there is variation in how PCIP is being implemented nationally due to the availability of workforce. Inability to recruit in some areas due to workforce challenges has led to slippage in plans since 2018 as described in report 8/22. This has resulted in the IJB holding a PCIF reserve balance in March 2022 of £2.648m

In February 2022, Angus IJB approved work with Dundee and Perth & Kinross HSCPs to develop regional plans for utilising this reserve reflecting the intention and desired outcomes of

PCIP recognising that the available funding was non-recurring and was agreed jointly with the Local Medical Committee (LMC), report 8/22.

3. CURRENT POSITION

In August 2022 Scottish Government confirmed the annual national allocation for PCIF for 2022/23 of £170m.

Of note, Scottish Government have indicated that, “*Integration Authorities should draw down existing reserve balances in the first instance and therefore 2022-2023 allocations will reflect the reserves held ... the £170m envelope takes into account funds already held by Integration Authorities by means of these existing PCIF reserves.*”

As noted below, this essentially means that the Angus IJB PCIF reserves of £2.648m have been withdrawn by Scottish Government.

Scope of PCIF

In the same guidance Scottish Government confirmed that PCIF should continue to be used to deliver the priority services set out in the Memorandum of Understanding with particular focus on Pharmacotherapy, CTAC and Urgent Care.

Whilst the assumption is that the majority of the PCIF will be spent on MoU MDT staff. From 2022-23 new investment in Primary Care Improvement Fund can be used for a wider range of costs (such as premises, training, digital, fixed term contracts, redesign & change management) as long as they support delivery of MoU MDT and are agreed with the GP Sub Committee. The development of the Angus Plan and associated financial plan for 2022/23, as well as the recurring cost of the plan are summarised in Table 1 below. These figures continue to be refined as learning is gained from the tests of change that are taking place and the models being developed, along with dynamic reviews of skill-mix where recruitment challenges are being experienced. Table 3 details the anticipated funding allocation for 2022/23 and current year cost of the plan, along with indicative recurring costs.

	Planned Spend 2022/23	Indicative Full Year Cost (Recurring)
	£'000	£'00
Assumed SG Allocation	881	3,529
Utilisation of b/f Reserves	2,648	0
Forecast Expenditure:		
VTP	321	321
Pharmacotherapy	683	846
Community Treatment and Care Services	772	748
Urgent Care	0	274
FCP/MSK	391	391
Mental Health	128	128
Link Workers	263	263
Other	128	160
Wider Use of Funds (premises, training, digital, fixed term contracts, redesign and change management)	400	0
Strategic Earmarks/Contingency	400	200
Projected Total Annual Spend	3,486	3,331
Balance	43	198

4. PROPOSALS

There is a requirement to accelerate Primary Care Improvement Plans to ensure that the 2022-2023 allocation is fully utilised. Particular focus will be given to the priority services set out in the Memorandum of Understanding with particular focus on Pharmacotherapy, CTAC and Urgent Care.

A regional list of projects previously agreed, will also be accelerated where they meet the requirements of PCIP and conditions as specified.

To facilitate this it is proposed that an Angus Investment Fund for Primary Care be set up with an initial sum of £0.7m (funded from the in-year 2022-23 financial position) to allow some of the previous intentions to be progressed beyond 2022/23. Of note locally we would wish to be able to ensure that we are able to progress the Project Officer Support role, a role that is critical to the delivery of the GP Practice Premises Strategy.

5. FINANCIAL IMPLICATIONS

As the IJB will be aware from previous Primary Care reports (specifically report 8/22) but also regular Finance reports, the IJB had built up a significant Primary Care Improvement Fund reserve since 2018/19. This was as a result of annual funding being in excess of annual PCIF spend and that in turn was a result of challenges with recruitment, the challenges of progressing significant change during COVID and the constraints of the funding guidance associated with the PCIF until March 2022. The reserves built up by the IJB under the PCIF heading at March 2022 were £2.648m.

Report 8/22 outlined a number of planned commitments against this funding and all were intended to help develop and support local Primary Care services in Angus noting the challenges we face locally.

Unfortunately, in August 2022, the Scottish Government decided to withdraw the PCIF reserves held by IJBs across Scotland. For Angus this means that reserve, intended to support the development of Primary Care, has now been withdrawn. Angus has suffered disproportionately compared to other IJBs in Scotland as the reserve held in under PCIF was proportionately larger than a number of other areas. This reflects the challenges noted above (e.g. recruitment) which were already particularly problematic in Angus and the breadth of local Primary Care remobilisation to support COVID efforts over 2020-2022. While representation have been to the Scottish Government, there seems little likelihood of a change of position at Scottish Government level.

This has a disappointing impact for Primary Care locally and, while the IJB had no legal commitments against this reserve, the removal of this funding represents a series of lost opportunities for local Primary Care while we do have a series of very significant challenges to meet in terms of developing sustainable local Primary Care models.

On that basis, and noting the challenging position Primary Care finds itself in locally, it is suggested that the IJB seeks to recreate a local version of the Primary Care improvement Fund reserve (e.g. a Local Investment Fund, or reserve, for Primary Care) to replace the funds that have now reverted to the Scottish Government. This will allow the IJB to continue to progress some of the initiatives that were previously planned.

Clearly this will be dependent on the IJBs overall financial position, but the creation of a fund of this type would provide the means to support the long-term local sustainability of Primary Care and help deliver the strategic vision for Primary Care.

On that basis, it is recommended that the IJB support the development of an "Angus Investment Fund for Primary Care". This would be funded from the in-year 2022/23 financial position and, in the first instance, it is recommended that this is set at £0.7m. This represents about 25% of the funds that have reverted to the Scottish Government but would allow some of the previous intentions to be progressed.

6. RISK

The withdrawal by the Scottish Government of £2.648m now has the potential to expose local Primary Care services to increased risks as plans that were otherwise anticipated to support Primary Care will now no longer be fully deliverable.

Failure to fully utilise the 2022-2023 PCIF allocation may mean that Integration Authorities will see a further decrease in funding made available to them in subsequent years

7. EQUALITY IMPACT ASSESSMENT

Equality Impact Assessment not required.

8. DIRECTIONS

The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in Section 26 to 28 of the Public Bodies (Joint Working) (Scotland) Act 2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Angus Council and NHS Tayside.

Direction Required to Angus Council, NHS Tayside or Both	Direction to:	
	No Direction Required	
	Angus Council	
	NHS Tayside	x
	Angus Council and NHS Tayside	

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List of Appendices

Appendix 1 Angus Primary Care Improvement Fund Direction