



AGENDA ITEM NO 10

REPORT NO IJB 35/23

ANGUS HEALTH AND SOCIAL CARE
INTEGRATION JOINT BOARD – 21 JUNE 2023
GP PRACTICE PREMISES STRATEGY
REPORT BY GAIL SMITH, CHIEF OFFICER

ABSTRACT

The purpose of this report is to present the Integration Joint Board with the Angus GP Practice Premises Strategy 2023-2026.

1. RECOMMENDATIONS

It is recommended that the Integration Joint Board: -

- (i) Acknowledge the current priorities and actions within the Angus GP Practice Premises Strategy (Appendix 1).
- (ii) Acknowledge that engagement with GP Practices and their patients has shaped the development of this GP Practice Premises Strategy (surveys and focussed engagement events) however noting that consultation and engagement with Practices, patients and wider public will be an on-going and continuous activity, specifically occurring as situations arise.
- (iii) Scrutinise and approve the Angus GP Practice Premises Strategy.
- (iv) Acknowledge progress will be monitored through the Primary Care Strategic Oversight Group.
- (v) Agrees to direct in terms of Appendix 3 and requests the Chief Officer to issue the Direction to NHS Tayside.

2. BACKGROUND

General Practice is often an individual's first and most frequent point of contact with the NHS, making it an important gateway to a range of essential services. As such its influence on population health and wider health and social care system cannot be overstated. In Scotland, in common with much of the UK, General Practice is facing considerable pressure due to a range of different factors but especially those linked to workforce; recruitment and retention challenges along with rising demand. It is well documented that premises issues impact adversely on GP recruitment and thereby have a consequential impact on practice sustainability.

It is vital to ensure the strength and resilience of General practice locally to effectively deliver the health care required by our communities. Fit for purpose premises are essential to the provision of high quality, safe and resilient services to the population of Angus.

A premises strategy for Angus GP Practice estates has been in development and was previously submitted in draft format to the IJB in October 2022 (IJB 69/22).

This document assesses the current state of General Practice premises in Angus, describes present and anticipated challenges and identifies the key priorities necessary to support sustainable and resilient General Practice while considering the specific needs of the local population.

Deliberately focussed on General Practice premises; it is intended to be an enabling strategy to support and inform discussions regarding capacity and estates strategies for core primary care medical services. It should be viewed as one component part of a wider Angus Health and Social Care strategy for premises as well as part of an emerging strategy for Primary Care.

Many of the changes described within it may take many years to develop and may arise as a consequence of changes that will emerge organically such as retirements, business mergers etc. They may also arise (and yet be unknown) due to changes that occur in areas such as service delivery models, government policy, advancement in digital technologies etc.

Whilst this document has been shaped by engagement with Angus GP Practices and their patients, as well as a review of appropriate national and local policy guidance it is important to note that engagement and consultation will be a continuous and ongoing requirement as issues arise and come to the fore.

NHS Tayside as the lead Organisation in premises matters has a key role to play. Establishing a shared understanding of the priorities, responsibilities, risks as well as where there are co-dependencies is crucial for the successful delivery of this Premises Strategy.

3. CURRENT POSITION

Our ultimate objective is to deliver a sustainable Primary Care service to the population of Angus, supported by an infrastructure that aligns with the vision of Angus Health and Social Care Partnership of **“a healthier Angus served by integrated, multidisciplinary and co-located teams”**

There are 15 practices in Angus, split into 4 cluster areas.

13 of 14 practices are within purpose-built accommodation, Ravenswood is the exception, based within converted residential accommodation.

Tenure is varied with 8 practices in GP leased buildings, 3 in practice owned buildings, 3 in Board owned accommodation and 1 Board leased (Academy with the assignation of lease, completed in May 2022).

The GP Practice Premises Survey provides detail on the current state of the buildings in terms of age, condition and adequacy of the space. Most Practices highlight a need for further room for expansion to accommodate the wider and integrated multi-disciplinary team.

The document also describes the relevant demographic, health and housing trends, providing valuable information on where and how services should be configured and delivered now and for the future.

The document identifies a number of key actions and priorities broken down for each cluster area of how we will move from our current position to where we want to be

4. PROPOSALS

To shape the future of GP premises in Angus and meet the demand for efficient, sustainable and accessible facilities that support the delivery of care to the population, strategic objectives have been identified in collaboration with stakeholders.

Four guiding principles have been identified that will shape and inform our decisions and actions:

- Sustainability
- Focused investment
- Accessibility
- Quality

Within these categories the following are described as key actions to be progressed:

- Develop an accelerated and systematic/proactive approach and process for Lease Assignment (well before the renewal date arises).
- Support practices/GPs that own their buildings and who may run into recruitment difficulties thereby minimising the risk of practice failure and potential harmful impacts on other neighbouring practices.
- Transition (over time) to a model whereby GP practices within the towns of Angus are situated together in a shared/single site, promoting co-location and collaboration among healthcare providers.
- Improve the quality of Primary Care premises in Angus by identifying opportunities for both investment and disinvestment and work with NHS Tayside and others to realise these. This will include identifying and where appropriate disposing of buildings that are surplus, no longer required and/or that do not meet required standards. In these instances, it will be necessary to consider how services will be delivered in alternative ways.
- Commit to facilitating the development of premises that are designed to accommodate the integrated multi-disciplinary team.
- Ensure that primary care services operate from a planned network of accessible buildings, strategically placed to ensure maximum utility for the communities they serve by configuration of premises to reflect the changing needs of the population.

These are the guiding principles and intentions that shape our future view of GP practice premises requirements within Angus. However, these cannot be achieved by Angus HSCP alone.

As the lead Organisation in premises matters NHS Tayside has a key role to play in the delivery of this GP Practice Premises Strategy. Establishing a shared understanding of the priorities, responsibilities, risks as well as where there are co-dependencies is crucial. Angus HSCP commit to working with NHS Tayside to deliver this premises strategy.

5. FINANCIAL IMPLICATIONS

The existing annual or revenue funding for Primary Care premises is currently contained within the IJB's share of overall GMS funding. Further, the Capital funds to support developments in Primary Care would routinely be sourced via NHS Tayside's capital planning cycle. Generally, the issue of financial responsibilities for the provision of premises is at the interface of the responsibilities of NHS Tayside and Angus IJB as demonstrated by the Integration Scheme.

The strategy outlined in the attached appendix describes a series of changes that would require investment (be that Capital, one off or annual revenue) and will have a series of financial implications over the duration of its implementation. Due to their nature, should any annual/revenue implications arise, these will have to be built into NHS Tayside's and the IJBs long term strategic financial planning as appropriate. It is clear however that beyond the responsibilities of NHS Tayside's with regard to premises provision, the IJB may need to consider making some one-off commitments to support the delivery of the local aspects of this strategy where that is intended to support GP sustainability, in that context it is important to note the IJB retains a "Property Reserve" within its overall reserves plans. While there are already a number of impending calls on that funding, that reserve may be able to facilitate some of the one-off costs (costs that may emanate from this Primary Care Premises Strategic Plan).

At March 2023 Angus IJB has a GP Premises and Transformation ear marked reserve funding to support Angus GP Practice Strategy delivering on sustainability, digital infrastructure and provide good value for money.

6. RISK

Delivery of the Angus GP Practice Premises Strategy is dependent upon NHS Tayside who as the contractually responsible body who must also commit to the priorities and actions described. Recent premises projects have evidenced some of the challenges involved as prioritisations are not always aligned.

Risk Description	Angus does not have sufficient availability of primary care premises to deliver safe, effective, person centred care across all four localities of Angus.
Risk Category	Clinical, Operational, Financial, Governance and Reputational
Inherent Risk Level	Likelihood 5 x Impact 5 = Risk Scoring 25 (which is a Very High Risk Level)
Mitigating Actions	Development and implementation of Angus GP Premises Strategy
Residual Risk Level	Likelihood 4 x Impact 4 = Risk Scoring 16 (which is a High Risk Level)
Planned Risk Level	Likelihood 3 x Impact 3 = Risk Scoring 9 (which is a Medium Risk Level)
Approval recommendation	Given our developed understanding of the situation and in line with the IJBs risk appetite, the risk is deemed to be Moderate

7. EQUALITY IMPACT ASSESSMENT

An Equality Impact Assessment is required in relation to the GP Premises Strategy (Appendix 2) was completed with the previous submission.

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 GP Premises Strategy 2023-2026
 Appendix 2 Premises Strategy EQIA
 Appendix 3 Direction to NHS Tayside