

Primary Care Improvement Plan: Recommendations and Delivery Progress During 2020/21

Key Recommendations for PCIP 2020/22	Progress of Delivery During 2020/21
Pharmacotherapy	
<ul style="list-style-type: none"> • Workforce Recruitment: • Task Transfer <ul style="list-style-type: none"> – Carry out audit to create baseline across all GP Practices and steps required to be taken within the service to support each GP Practice with task transfer. • Consistency in roles/approach <ul style="list-style-type: none"> – Create policies and procedure to maximise on all systems and processes where high quality safe prescribing can be guaranteed, reducing acute numbers and allowing a planned approach to medicine management in each practice. • Adjust skill mix to enable task completion in a timely manner • Continuously evaluate service for readiness of transfer in 03/21 • Rollout Serial Prescribing and Dispensing • Establish a Pharmacotherapy/ Education and Training leadership structure along with a refreshed management structure 	<ul style="list-style-type: none"> • A funded team of 123 staff (103.6wte) is now in place. • Aim for all GP Practices to have access to level one pharmacotherapy services by March 2022 as committed. • Reviewing skill mix within the Pharmacotherapy service to increase the utilisation of Pharmacy Technicians and Pharmacy Support Staff. • Developing a hub model to support remote and rural practices utilising remote access to GP practices. • Optimising prescribing systems to manage demand. • Development of collaborative working with community pharmacies. • Implementing serial prescribing across all practices. • The Pharmacotherapy Team have refined the service delivery model over the last three years as well as share and utilise best practice nationally to ensure safe, effective, and quality service provision. This is has resulted in a change of skill mix with a change in the ratio of pharmacists, pharmacy technicians and the introduction of pharmacy support workers. • The development of the Pharmacotherapy Service has created a career pathway for pharmacists and technicians from trainee level up to senior management posts with a key focus on education and training to ensure retention of staff.
Primary Care Nurse	
<ul style="list-style-type: none"> • Workforce Requirement/ Proposed model <ul style="list-style-type: none"> – To continue to recruit to the required nurses and build CTAC teams alongside the recovery of general practice • Test Primary Care Nurse Model • Further refine CTAC model and detailed service specification with HSCP Leads • Pre-school Programme <ul style="list-style-type: none"> – Implement new model (including flu) - January 2020. • Travel vaccinations and travel health advice <ul style="list-style-type: none"> – Develop hub and spoke model with current travel health clinic within Ayrshire - 2019/20-2020/21. • Influenza Programme <ul style="list-style-type: none"> – Agreement to deliver via nurse bank/primary care nurse development roles - October 2020 • At risk and age group programmes <ul style="list-style-type: none"> – All other adult age group vaccinations to be delivered via Community Treatment and Care Service – September 2020 	<ul style="list-style-type: none"> • 38 newly qualified nurses recruited in September 2020 increasing total Primary Care Nurses to 47wte within the CTAC team. All were allocated to GP practices across Ayrshire HSCPs to initially support the extended flu vaccination delivery programme prior to supporting CTAC nursing interventions within General Practice. • 3 x CTAC Clinical Team Leaders were also appointed early 2021 within each HSCP. • Feedback from practice meetings identified the list of CTAC nursing interventions was too limited. This has been reviewed and extended subject to a rapid test of change to evidence the benefit to the staff and service. • Work was undertaken to explore TUPE options for current practice staff impacted by the implementation of the CTAC service. Staff who were identified as eligible for TUPE are progressing through the TUPE process with NHS Ayrshire and Arran HR - anticipated that these staff will transfer to the Board before the end of 2021.

	<ul style="list-style-type: none"> • Remaining CTAC recruitment will be undertaken during 2021 to achieve the original committed 60 Primary Care Nurses and 30 HCSWs to deliver the CTAC service fully. This will bring the service to 90wte in total as set out in PCIP 2. • VTP was stood down due to pandemic in 2020 and to align with Board-wide vaccine delivery arrangements. This is now being progressed under the oversight of the Director of Public Health via the Vaccination Transformation Programme Board as part of the Board wide vaccination delivery arrangements. Although plans didn't progress through the programme to transfer flu vaccine delivery in 2020/21, General Practice was supported with innovative delivery arrangements for the flu vaccine for all over 65's and at risk groups as well as the Covid-19 vaccine to over 80's, housebound patients, and all shielding cohorts.
Urgent Care	
<ul style="list-style-type: none"> • Assess MDT resource to assess and treat urgent care • Maintain/Promote Eyecare Ayrshire • Maintain Pharmacy First and continue to promote • Maximise uptake of Community Pharmacy as first port of call for common clinical conditions by utilisation of Minor Ailment Service • Undertake social media / communication campaign for right care, right person, linking to national work as appropriate 	<ul style="list-style-type: none"> • Due to changes with the General Ophthalmic Contract and national funding, Eyecare Ayrshire is now fully funded by Scottish Government. • In July 2020 Pharmacy First Plus launched which is an extension of the previous Pharmacy First service. During the pandemic the public utilised pharmacy services for a wide range of conditions and it is hoped this will continue to expand. • E-Consult rolled out to practices to support remote triage and assessment. To date, 21 of 53 practices are using the platform, with 16 preparing to use. • There is also now an opportunity to revisit the urgent care area of the contract aligned to the wider Re-design of Urgent Care (RUC) Programme. • NHS Ayrshire and Arran were an Early Implementer Test of Change Board for the Re-Design of Urgent Programme and began implementing the full specification of the redesign programme from 3 November 2020, with the Redesign of Urgent Care Programme being rolled out nationally from 1 December 2020. • Phase 2 of the RUC Programme focussed on community pathways such as MSK, Community Optometry, Community Pharmacy and GP referrals. • Communication is promoted through national media toolkits adapted for local use linking to Right Care, Right Place messaging.
MDTs in General Practice	
<ul style="list-style-type: none"> • MHPs in General Practice - Additional Resource Required • MSK Physiotherapist in General Practice - Additional resource phasing out from core MSK service– 2020/21 • Community Link Workers - Recruit to additional 3wte posts 	<ul style="list-style-type: none"> • During 2020/21 there were no major changes to service delivery other than staff working remotely. Both MHP and MSK service reported remote working arrangements allowed increased amount of support to GP practices as well as allowing staff to support more than one practice at a time. Through the next stage of planning this will create opportunities to give more practices better access, but also a balance is required from remote to face to face.

	<ul style="list-style-type: none">• HSPCs have been working in collaboration with their mental health services to ensure the mental health practitioner model/patient pathway aligns with and enhances current core services available. 49 of 53 GP practices have access to a Mental Health Practitioner.• In February 2020 1wte MSK Physiotherapist was recruited from core service funding. A number of physiotherapists were redeployed to specialist areas throughout the pandemic and only now returning to the service. 35 GP practices have access to an Advanced MSK Physiotherapist.• Community Link Workers / Connectors work with practices to provide social prescribing to patients linking into Third Sector organisations if appropriate. All recruitment has completed with 48 GP practices having access to this service.
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