

Greater Glasgow and Clyde NHS Board

Board Meeting

Tuesday 15th October 2013

Board Paper No. 2013/48

Director of Corporate Planning and Policy

DEVELOPING PRIMARY CARE: 17C CONTRACTS

Recommendation:

The Board is asked to:

- note work in progress to work with GPs to develop proposals to improve primary care.

1. BACKGROUND AND PURPOSE

1.1 Across a range of our planning for clinical services, including the Clinical Services Review, planning for older people and for longer term conditions, there are major challenges for the way services are provided by GPs. We have been debating for some time how we can respond to the major challenges we face to enable GPs to focus on the priorities we share but which are not well reflected or incentivised by the national GMS contract. These priorities include:

- dealing with the challenge of increasing numbers of patients with multiple long term conditions requiring complex care;
- responding better to the impact of poverty and the different needs of patients living in our most deprived areas;
- providing more proactive care to vulnerable children and families;
- improving care for older people, including anticipatory care planning and review;
- relating the distribution of resources to deprivation and need;
- supporting general practices to cope with increasing pressures and demand;
- managing the demand for acute hospital care.

1.2 We are limited in our local capacity to agree change to the UK wide GMS contract to the areas where we have the flexibility to negotiate local service agreements. Almost all of our GP practices are currently on GMS 17j contracts which specify, in line with the national GMS contract, the essential services, additional services and a rigid structure which dictates payments to be made to the practice.

1.3 Within the national contract there is the option to negotiate 17c contracts. The alternative of a 17c contract enables the practice and the NHS Board to agree what is provided and what the payment amounts and requirements are. A 17c contract can include or vary any part of the national contract. For example, shifting the use of a number of QoF points to enable payments to be made for a different output than is in the national contract for 17j practices.

2. SESSION WITH GPS

2.1 We ran an open meeting for all practices across NHS Greater Glasgow and Clyde at the beginning of October to invite GPs to engage with us to discuss the potential of 17c contracts. Around 50 practices attended and a number of others expressed interest. The principles we proposed to open the session were that we would:

- guarantee the practice income at the current level, subject only to any national changes which would increase or decrease it;
- reduce the bureaucracy and administration required to feed the current payment systems;
- negotiate individual contract elements which would reflect the practice's particular circumstances in line with an overall framework;
- consider how we could frame our use of locally enhanced services to contribute to this model;
- guarantee practices a right of return to the standard GMS contract.

2.2 The session heard from two of our GPs about their frustrations and challenges in trying to provide the best care for older people, patients with multi morbidities and patients in our most deprived communities. We also heard from two practices in Grampian about the benefits they have found in working on 17c contracts. We identified in discussion groups a whole series of positive ideas on how GPs could change the way they work if there was a more flexible contractual arrangement. Many GPs present expressed real concerns about the challenges and pressures they faced.

3. CONCLUSION

3.1 It is clear that there are major issues with the current contract and many GPs are willing to positively engage with us to consider the 17c alternative. We will follow up the initial session with proposals to practices for further work with them and keep the Board up to date as this work develops.

Publication The content of this Paper may be published following the meeting

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