



**REPORT TO:** HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD – 17<sup>th</sup> APRIL 2024

**REPORT ON:** TAYSIDE PRIMARY CARE STRATEGY - UPDATE

**REPORT BY:** CHIEF OFFICER

**REPORT NO:** DIJB13-2024

## **1.0 PURPOSE OF REPORT**

1.1 To update Dundee Integration Joint Board on the work to produce a Tayside Primary Care Strategy and seek agreement that ongoing work to produce this strategy is adopted into the NHS Tayside Strategy which is progressing a system-wide approach, taking account of national and local priorities.

## **2.0 RECOMMENDATIONS**

It is recommended that the Integration Joint Board (IJB):

- 2.1 Notes the work undertaken to revise the Tayside Primary Care Strategy Plan on a Page.
- 2.2 Agree that further work required to produce a Tayside Primary Care Strategy is adopted into the system-wide approach to develop an NHS Tayside Strategy.

## **3.0 FINANCIAL IMPLICATIONS**

3.1 There are no financial implications arising directly from this report however financial implications will continue to be considered as the strategy develops.

## **4.0 MAIN TEXT**

### **4.1 Background**

4.1.1 An update was provided to the IJB in October 2023 on the development of the Tayside Primary Care Strategy (IJB 58/23) (Article IV of the minute of meeting of 25<sup>th</sup> October 2023 refers). This had been jointly commissioned by the Chief Officer of Angus Health and Social Care Partnership and NHS Tayside Medical Director to support the delivery of excellent, high quality, accessible and sustainable primary care services for the population of Tayside.

4.1.2 IJB members agreed that a final version of the Tayside Primary Care Strategy be brought to the IJB for approval in February 2024.

### **4.2 Current Position:**

4.2.1 Progress has been made to further develop the Tayside Primary Care Strategy Plan on a Page, illustrated in Appendix 1.

4.2.2 Discussions are underway to produce an NHS Tayside Strategy. This will be system-wide strategy identifying collective actions, including Primary Care. In an effort to avoid duplication

it is proposed that the Tayside Primary Care Strategy is adopted into the NHS Tayside Strategy. Timeframe to be confirmed.

4.2.3 Work remains ongoing to ensure the delivery of excellent, high quality, accessible and sustainable primary care services for the population of Tayside

#### 4.3 Communication and Engagement:

4.3.1 The Tayside Primary Care Strategy Plan on a Page was presented to the NHS Tayside GP Sub Committee meeting for discussion on 15 January 2023. No amendments were requested.

### 5.0 POLICY IMPLICATIONS

5.1 This report has been subject to the Pre-IIA Screening Tool and does not make any recommendations for change to strategy, policy, procedures, services or funding and so has not been subject to an Integrated Impact Assessment. An appropriate senior manager has reviewed and agreed with this assessment.

### 6.0 RISK ASSESSMENT

<b>Risk 1 Description</b>	<p>As a result of an inability to:</p> <ul style="list-style-type: none"> <li>Reliably recruit, train, and retain workforce,</li> <li>Have appropriate premises to deliver clinical and support services, and</li> <li>Have in place adequate digital systems to support clinical care and communication between teams, patients and across the services.</li> </ul> <p>There is a risk we will be unable to deliver safe, effective, high quality, person centred primary care services. This will result in inadequate care, reputational damage, and failure to meet legal requirements. This risk encompasses all Primary Care Services:</p> <ul style="list-style-type: none"> <li>Dental</li> <li>Optometry</li> <li>General Practice</li> <li>Community Pharmacy</li> </ul>
<b>Risk Category</b>	Quality of Care
<b>Inherent Risk Level</b>	Likelihood 4 x Consequence 5 = 20 (Extreme Risk Level)
<b>Mitigating Actions</b> (including timescales and resources )	<ul style="list-style-type: none"> <li>Embedding of Primary Care Strategy</li> <li>Clear understanding of Lead Partner role</li> <li>Robust engagement activities</li> <li>Collaboration across all three HSCPs and NHS Tayside</li> </ul>
<b>Residual Risk Level</b>	Likelihood 4 x Consequence 4 = Risk Level 16 (Extreme Risk Level)
<b>Planned Risk Level</b>	Likelihood 4 x Consequence 3 = Risk Level 12 (High Risk Level)
<b>Approval recommendation</b>	Given the mitigating actions being applied and the national focus provided to the sustainability of primary care the risk level is deemed acceptable

### 7.0 CONSULTATIONS

7.1 The Chief Officer and the Clerk were consulted in the preparation of this report.

## 8.0 DIRECTIONS

The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in sections 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 Dundee City Council and NHS Tayside.

Direction Required to Dundee City Council, NHS Tayside or Both	Direction to:	
	1. No Direction Required	X
	2. Dundee City Council	
	3. NHS Tayside	
	4. Dundee City Council and NHS Tayside	

## 9.0 BACKGROUND PAPERS

9.1 None

Dave Berry  
Acting Chief Officer

DATE: 21 April 2024

Jillian Galloway, Chief Officer, Angus HSCP  
David Shaw, Medical Director, Primary Care

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# Tayside Primary Care Strategy 2024 - 2029

Delivering the best Primary Care Services across Tayside

What do we mean by Primary Care?



**Our Vision**  
To deliver excellent, high quality, preventative Primary Care in a sustainable way, improving the health and wellbeing of the population of Tayside.

- Reasons for change**
- Demand for appointments is increasing, particularly for people with multiple complex problems; we need to make sure Primary Care meets the needs of everyone in Tayside, now and in the future.
  - There are lots of different teams who work in Primary Care and we need to make sure they work in a more integrated way to improve care for the whole population.
  - Primary Care has a key role to play as part of an ambitious and joined-up approach to prevention so that people can stay well for longer.

- Our priorities**
- **Prevention and proactive care**  
Support the population of Tayside to avoid and reduce health problems illnesses before they develop so people have improved life expectancy and quality of life.
  - **Reduce inequalities and unequal health outcomes**  
We need to focus on 'getting it right for everyone', with mental health given equal priority to physical health.
  - **Deliver care closer to home**  
We will focus on providing care in the right place, by the right person at the right time.



**Guiding Principles**

This strategy has been developed with the following principles at its heart:

- Person-centred** - people who use our services are at the centre of everything we do.
- Empowerment** - providing individuals with the opportunity to take greater responsibility for their own health and wellbeing.
- Partnership** - working collaboratively with the population of Tayside and the Primary Care workforce to ensure an integrated team-based approach.
- Excellence** - promoting excellence in service delivery and building on evidence-based practice.
- Safety** - ensuring that the care that we provide is of the highest possible standards.
- Deliver best practice** - ensuring that all services are evidence based, efficient and cost effective.
- Equity** - consistency in service delivery ensuring equity of access and treatment for those in need of care and support.
- Outcome focused** - aimed to achieve the priorities that individuals identify as important.

**Values underpinning everything we do:**  
Caring, compassionate, person-centred, honest and respectful.

- How we will know we have made a difference**
- People will know how and when to access routine, planned, urgent care and emergency care and we will see an increase in the appropriate use of these services.
  - Increase in the number of people who have a positive experience of using Primary Care services.
  - Care and support will be provided by integrated teams which are designed to support the needs of their local population.
  - Improved capacity and capability to accelerate prevention activities resulting in an increase in the number of people who are able to look after and improve their own health and wellbeing and live in good health for longer.
  - Earlier identification of factors that put people at risk of developing a long-term condition or complex needs.
  - People have access to a range of approaches, that care for and support mental health and wellbeing issues.
  - We will have recruited and retained an empowered workforce with the skills to continuously improve the services they provide.

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