Primary Care Directorate
General Practice Policy Division



#### **Addresses**

For Action
Chief Executives NHS Boards
General Medical Practitioners

For information

Chief Officers, Integration Authorities Director of Practitioner Services Division, NHS National Services Scotland **Enquiries to:** 

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29th November 2021

Dear Colleague

GP Practices - Sustainability Payment - 2021-22 & 2022-23

### **Background**

- Prior to last year's Scottish LMC Conference, the Scottish Government and the Scottish GP Committee of the BMA took the opportunity to write a <u>joint letter</u> sent to all GP practices. This emphasised our continued commitment to the 2018 General Medical Services Contract and to reconfirm our commitment to continue to invest in general practice.
- 2. Our experiences and those of the wider system during the pandemic had confirmed to us that the principles and aims contained within the Contract Offer remained the right ones collaborative multi-disciplinary teams working alongside GPs in their role as Expert Medical Generalists to manage patients in their own community. We recognise we still had some way to go to deliver enhanced multi-disciplinary teams. In the joint letter, we set out our intention to make the reforms we have made a permanent part of the support that GP practices receive from NHS Boards and Health & Social Care Partnerships by placing them in regulations.
- Vaccinations that were in the core GMS contract under the Additional Services Schedule, such as childhood vaccinations and immunisations and travel immunisations, would be removed from GMS Contract and PMS Agreement regulations. All historic income from vaccinations would transfer to the Global Sum in 2022-23 including that from the five vaccination Directed Enhanced Services.

4. Whilst our joint policy position remained that general practice should not be the default provider of vaccinations, we understood that practices may still be involved in the delivery of some vaccinations in 2022-23 arrangements. Where this is necessary, it would be covered on a new transitionary service basis to be negotiated by SGPC and the Scottish Government in 2021 and payments would be made to practices providing these services from 2022-23.

- 5. Regulations would be amended so that Health Boards were responsible for providing a Pharmacotherapy service to every general practice for 2022-23. Payments for those practices that still did not benefit from a Pharmacotherapy service by 2022-23 would be made via a Transitionary Service until such time as the service is provided.
- 6. Regulations would also be amended so that Health Boards were responsible for providing a Community Treatment and Care (CTAC) service for 2022-23. Where practices did not benefit from this service, payment will be made on a transitionary service basis until such time the service is provided.
- 7. Scottish Government and SGPC recognised by exception some practices in remote and rural communities where there are no alternatives to ongoing practice delivery identified through a satisfactory options appraisal. The Scottish Government and SGPC would negotiate a separate arrangement including funding for these practices.

#### **Vaccinations**

- 8. Vaccinations that were in the core contract under the Additional Services Schedule were removed from the GMS Contract and PMS Agreement regulations from 18 October 2021. <a href="PCA(M)(2021)10">PCA(M)(2021)10</a> set out that Health Boards were able to serve notices (under regulation 33A of the amended GMS regulations) to practices that would require them to continue to deliver vaccinations that were providing these additional services from October 2021 to April 2022. Funding will continue under the core GP contract from the Enhanced Services allocation until the end of March 2022.
- 9. The five Directed Enhanced Services included in the Vaccination Transformation Programme will continue, either as Directed Enhanced Services or refreshed as Temporary Enhanced Services, until the end of March 2022. Where vaccinations have not already transferred to Health Board provision, practices should continue to participate in the programmes, where appropriate until 1st April 2022 in order to protect their historic income. Practice historic income for the remainder of Phase One will be determined by the arrangements set out in <a href="PCA(M)(2019)03">PCA(M)(2019)03</a>. The 3 years used to calculate historic income will be 2017-18, 2018-19, and 2019-20 unless it is locally agreed to use more suitable years.
- 10. The Scottish Government and SGPC are negotiating arrangements for fees for any practices which may still be involved in residual delivery of vaccinations from April 2022 onwards. Before 1 April 2022 there will also be arrangements for those options appraised remote and rural practices which will continue to provide vaccinations on an indefinite basis as well as practices which should stop providing vaccinations over the course of 2022/23. The vaccination fees for options appraised practices will be consistent with transitionary services. However, there will be additional consideration of the ongoing nature of vaccination provision by options appraised practices. Greater detail on arrangements for options appraised practices will also be published as soon as possible.

# Community Treatment & Care Services and Pharmacotherapy – Sustainability Payment

- 11. Scottish Government will lay regulations before the Scottish Parliament in the new year to give Health Boards responsibility for providing a Pharmacotherapy service to every general practice and provide Community Treatment & Care services from 2022-23, as well as a separate arrangement for remote and rural communities where there are no alternatives to ongoing practice delivery identified through a satisfactory options appraisal.
- 12. The Scottish Government and SGPC recognise that partial implementation of the pharmacotherapy and community treatment and care services, on a national level, means that general practice is facing a difficult winter without all of the support Scottish Government and SGPC had agreed it should have in 2018.
- 13. On this basis, Scottish Government and SGPC have agreed to allocate a sustainability payment to all practices (including 2C practices) covering 2021-22 and 2022-23. This payment brings into effect what was agreed for transitionary services for Pharmacotherapy and Community Treatment & Care services in the 2020 Joint Letter.
- 14. Scottish Government is allocating £15 million for this payment in 2021-22 followed by a further payment of £15 million in 2022-23. This sum is approximately based on £5 per patient in Scotland it will be allocated to practices by the Scottish Workload Formula and Income and Expenses Guarantee. Although the first payment will be made to all practices in December 2021, it is conditional on submission of the attached form. The attached form (annex) requires practices to indicate where this payment will best support the services they provide this winter:
  - Extra internal GP sessions (including face-to-face appointments)
  - Extra non-core hours
  - Additional administrative time and practice manager time
  - Additional practice nurse time
  - Practice organised cover for PLT for reflection, learning and innovation
  - External GP locum sessions
  - Any other purpose connected with the provision of GP services
- 15. This form is not intended to represent a commitment by practices to spend the money in particular ways; we understand that organising external locum cover in particular at present is challenging and we would not seek to limit the ability of practices to respond to emerging circumstances as they see best.
- 16. Practices will receive their whole allocation for 2021-22 in December. Practitioner Services will separately identify practice payments in the monthly statement. Where a practice has not submitted the form by the end of February 2022, Practitioner Services will recover the payment for 2021-22 from the March 2022 payment.
- 17. Funding for the sustainability payment will come from winter funding monies for 2021-22. Funding for the 2022-23 payment will be identified through the 2022-23 Scottish Budget process. Practitioner Services will provide details of the timing of payment for 2022-23 in their monthly newsletter.

#### 2023024 and Beyond

18. Arrangements covering transitionary services for 2023-24 and beyond, if required, will be negotiated by the Scottish Government and SGPC in 2022 and will continue until the implementation of Phase 2 of the new contract. Scottish Government is expecting the full roll out of Pharmacotherapy and CTAC services in 2022-23 so transitionary payments should be very seldom required beyond 31st March 2023.

#### Action

19. NHS Boards are requested to ensure that their primary medical services contractors are aware of this letter.

Signature

Naureen Ahmad

**Deputy Director Primary Care** 

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#### Annex A



## GP Sustainability Payment: GP Declaration Form 2021/22

## **Practice Details**

Name of Practice:	
Practice Address and Contact Details:	
Practice Code:	
Intended Use	
Please indicate how you anticipate making see of this funding. Tick all that apply.	
This is intended to provide an indicative record of your intentions to allow Scottish understand what is most needed to support general practice. Scottish Government circumstances can change very quickly in a GP practice and practices will not be hel provided here. This means that while we will survey GP practices about the use of t expect GP practices to treat these funds any differently from the funds you receive Services: there will be no reconciliations or any requirement to account for how yo	t is cognisant that Id to their intentions :his money, we do not : to provide General Medical
Extra internal GP sessions (inc. F2F appointments) Extra non-core hours Additional administrative time and practice manager time Additional practice nurse time Practice organised cover for PLT for reflection, learning and innovation External GP locum sessions Any other purpose connected with the provision of GP services Please outline any other purpose below:	

## **Authorised Practice Signature**

Authorised Practice signature	Date
I declare that the information I have given on this form is correct and complete and I understand	
that if it is not, action may be taken against me. I acknowledge that my claim will be	
authenticated from appropriate records and that payment will be made to my Practice.	

## For Official Use

Input by	Date
Checked by	Date

 $Please\ return\ completed\ Declaration\ Form\ to\ your\ Health\ Board\ primary\ care\ contract\ manager.$