

Primary Care Improvement Plan

Key Messages

March 2020

Why are there changes in Primary Care?

Primary Care refers to services that provide a first point of contact for patients. It includes GPs, community pharmacy, dentists, and optometrists, and it can also refer to some community based services such as district nursing.

In recent years, it has been difficult to recruit GPs, and those GPs in post have seen their workload become increasingly heavy. Some of the demands on their time could be better met by other health professionals, such as pharmacists, optometrists or advanced nurse practitioners. Sometimes they are seeing patients who could be better helped by others, such as voluntary sector organisations.

Across Scotland, changes are being made to ensure that GPs are able to focus on the role for which they trained, and that patients continue to receive safe and effective care.

Here in Glasgow, patients may notice changes in their own practices. For example, they may see a different health professional depending on their symptoms. This frees up GPs to see more complex cases, and also means that patients see the person most able to help them.

What is happening?

A Primary Care Improvement Plan (PCIP) has been developed to guide us in making the changes that are needed. It is a three year plan and describes how we will recruit the necessary additional staff and develop multi-disciplinary teams within general practice. Members of this wider primary care multi-disciplinary team will see patients when it is safe, appropriate, and improves patient care. Examples of the staff whom patients may encounter at their practice, and the conditions they may treat include:

Health Care Professional	Condition / intervention
General Practice Nurse	Long term condition management. Sexual & reproductive health. Cervical Smear Tests. Minor Illness such as chest infections, sore throats, rashes, urinary tract infections, back pain and ear pain.
Advanced Nurse Practitioner	Minor illnesses such as chest infections, musculoskeletal pain, sore throats, skin conditions, abdominal pain, diarrhoea & vomiting, ear pain, chest pain and dizziness. They may make home visits
Advanced Practice Physiotherapist	Joint, ligament, tendon and muscle problems. Back pain. Able to refer to hospital specialists when appropriate.
Pharmacist	Review, prescribe and monitor medication for acute conditions/ in patients recently discharged from hospital/ on multiple medicines/ with long-term conditions. Support medicines safety and advice.



In addition, a number of practices will have a Community Link Worker as part of their practice team, who supports patients to improve their health and wellbeing, and connect with local community groups and organisations.

Responsibility for vaccinations will over time move from general practice to the HSCP; and all practices will have access to treatment room and phlebotomy services.

When is this happening?

The plan runs from 2018 – 21 and patients may have seen changes in their practice already – If you work with practices, you may also have noticed changes.

However, the plan is very complex, and requires significant numbers of new staff and appropriate accommodation for them. As a result, this is not a "big bang" change – some practices will see new staff coming into post before others. For example, some practices already have Advanced Practice Physiotherapists in place; in others, patients have access to the new phlebotomy service.

Who will be affected?

Patients may notice that when they phone their practices, they are asked to provide a little information about why they wish to see a GP. This enables staff, who are properly trained, to ensure that they are given an appointment with the person best able to help them.

Some HSCP staff working in or with general practice may see their roles develop in different ways, and may also see their teams becoming much larger, and the way that they interact with practices may change over time. We are all working to ensure that we have good multi-disciplinary team working so that we can support patients – and each other - in the most effective way.

Practice staff may also see their roles evolve, whether they have an administrative or a clinical focus. Some of the changes that are coming will have a direct impact on GP workload; some will be less direct, and some practice staff may take on different tasks to enable GPs to focus on their complex patients.

Where can I read more about this?

There is more information about these changes on the Primary Care pages on the HSCP website: https://glasgowcity.hscp.scot/primary-care

Further information

If you require any further information please contact your locality Primary Care Development Officer:

Margaret Black

Primary Care Development Officer, North West Locality **Phone** 0141 314 6236

Caroline Fee

Primary Care Development Officer, South Locality

Phone 0141 427 8358

Susan Middleton

Primary Care Development Officer, North East Locality

Phone 0141 277 7468

Ann Forsyth

PCIP Programme Manager,

Phone 0141 287 8705 or Mobile 07766 085 911