



Dear Colleague

22 February 2019

THE PRIMARY MEDICAL SERVICES (GP OUT OF HOURS SERVICES) (SCOTLAND) DIRECTIONS 2019

HEALTH BOARD DIRECT PROVISION OF PRIMARY MEDICAL SERVICES (SCOTLAND) DIRECTIONS 2019

HEALTH BOARD PRIMARY MEDICAL SERVICES CONTRACTS (SCOTLAND) DIRECTIONS 2019

Addresses

For Action

Chief Executives NHS Boards
Chief Officers
GP Practices
NHS National Services Scotland

For information

Scottish General Practitioners
Committee
Primary Care Leads NHS Boards

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1. This Circular advises Health Boards that the Directions which provide the legal framework for Out of Hours Services in Scotland have been revised. The Direct and Contract directions have also been revised.

2. The new Directions are the [Primary Medical Services \(GP Out of Hours Services\) \(Scotland\) Directions 2019](#) ("GP OOH Directions"), [Health Board Direct Provision of Primary Medical Services \(Scotland\) Directions 2019](#) and [Health Board Primary Medical Services Contracts \(Scotland\) Directions 2019](#) which come into force from 22 February 2019. The [Direct Provision Directions](#) and the [Contract Directions](#) which were issued on 31 October 2011 under cover of circular [PCA\(M\)\(2011\)15](#) are revoked by this circular.

OOH

3. [The 2018 General Medical Services Contract in Scotland](#) announced changes to arrangements for out of hours services. Instead of the 2004 contract



opt-out arrangement a new opt-in Out of Hours Enhanced Service would be developed for those practices that choose to provide out of hours services.

4. It was agreed that the new out of hours Enhanced Service will have a nationally agreed specification, building on the quality record keeping, anticipatory care planning, key information summary, use of Aداstra and NHS 24.
5. This will contribute to a consistency of approach to the provision of unscheduled care services across Scotland where practice-based service level agreements are in place. There is also an opportunity to develop a nationally agreed quality and person-centred specification which could be used by all NHS Boards to test and benchmark their current local service level agreements.
6. As a first step towards developing a new opt-in Out of Hours Enhanced Service there is no out of hours opt-out deduction under the new contract. Nationally, 6% was deducted from the 2017/18 Global Sum prior to applying the new funding formula. This concluded the opt-out arrangements made under the 2004 GMS contract with an exception for those practices which had not opted out. Those practices are covered by transitional regulatory arrangements which make it easier for them to cease providing Out of Hours services should they decide to do so and ensure they will be paid at an equivalent rate for the services they currently provide.
7. Following the acceptance by GPs of the new contract, the Scottish Government formed the short life working group which created these directions. The new directions are intended to ensure stability of Out of Hours services after these services were removed from the GMS contract.
8. The arrangements in these directions are for new agreements made after 22 February 2019 that boards make with practices, and as such they apply to any agreements that boards may make with practices which historically did not opt out above and beyond those contained in the transitional regulations. Existing arrangements are not affected.
9. People seeking urgent help and advice need to be seen by the right professional, at the right time and in the right place – which might be face to face either physically or remotely, by telephone or video link. Traditionally, clinical advice and assessment has usually been delivered by GPs face to face. In the future, health and care needs will be delivered by the most appropriate member of a multidisciplinary team in person, or remotely - according to need and circumstances. The ongoing commitment and expertise of GPs to Out of Hours services is essential and must be secured¹; it is not affected by the removal of Out of Hours from the GMS contract. Rather the removal of Out of Hours from the GMS contract gives Health Boards a greater flexibility to arrange GP led Out of Hours services with a committed workforce.

Action

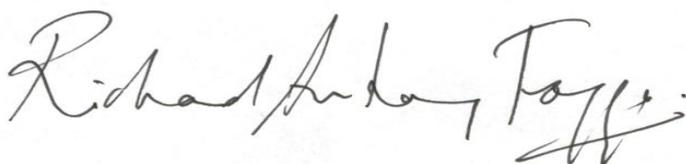
¹ [Pulling Together: transforming urgent care for the people of Scotland](#)

10. The attached Directions place a legal duty on Health Boards to establish GP-led Out of Hours Services as specified for their area.
11. NHS Boards are requested to action these Directions and ensure that their primary medical services contractors are aware of them.
12. The Directions refer to transition periods when the primary medical services contractors in a Health Board area are not required to offer appointments to patients and the Health Board, or Out of Hours providers, for the area is required to provide services. Health Board should consult with the primary medical services contractors in their area before designating transition periods.

Enquiries

13. For any enquiries on this circular please contact Michael Taylor.

Yours sincerely



Richard Foggo, Deputy Director and Head of Primary Care Division