



Review of new general medical services contract

Summary impact report (12 month)

The report findings and recommendations

1. The Auditor General's report *Review of the new General Medical Services contract* was published on 3 July 2008. The report examined the implementation of the new General Medical Services contract, which was introduced on 1 April 2004. The report looked at how much the new contract cost and the impact it had on patients, GPs and the wider NHS.
2. The report concluded that the contract was not well planned and cost more than expected. There is evidence of improvement for some patients, such as better monitoring of patients with certain long-term conditions like diabetes, but it will take time to secure wider patient benefits from the new contract.
3. The report made 14 recommendations which encouraged the Scottish Government, NHS boards and GPs to work together and build on the initial improvements that the new contract has brought.

Media interest

4. The report generated media interest upon publication, including radio interviews and many press articles (41 items in total). Three months after publication, the report had 1388 downloads from our website and a year after publication it had 2589 downloads.

Parliamentary scrutiny

5. The report was presented to the Scottish Parliament Audit Committee on 10 September 2008. The committee then wrote to Dr Kevin Woods to find out how the Scottish Government planned to take forward Audit Scotland's recommendations. The Audit Committee considered Dr Wood's response on 12 November 2008 and the Convenor concluded that the Scottish Government accepted a number of the recommendations and had begun to take action to address some of the concerns the report raised.

Longer term impact

6. The report's findings and recommendations are listed in Appendix 1, and charted against Audit Scotland's impact criteria. We have evaluated, where possible, changes following publication of the report. We highlight where Audit Scotland would need to do further work to assess the report's impact and the areas it could cover in future studies. A study looking at Pay Modernisation, which will include an update on the position with GP and consultant contracts, is scheduled to begin in 2010.

Appendix 1. Summary of report impact, and analysis by Audit Scotland's framework for measuring impact

HOLDING TO ACCOUNT AND HELPING TO IMPROVE

| | Assurance and accountability | Planning and management | Economy and efficiency | Quality and effectiveness |
|--|------------------------------|-------------------------|------------------------|---------------------------|
| General Impact | | | | |
| Media interest generated by the report's publication | • | | | |
| Action taken by the Scottish Parliament Audit Committee | • | | | |
| Audit Scotland recommendations for the Scottish Government | | | | |
| The Scottish Government should collect robust data before implementing major schemes so that it can base decisions on accurate information. | • | • | • | |
| The Scottish Government should ensure that funding allocation letters to NHS boards are issued before the financial year begins. | | • | • | |
| The Scottish Government should ensure that the nGMS contract is used to improve primary care services in deprived and remote areas. | | • | | • |
| The Scottish Government should review the impact of the nGMS contract on referrals and prescribing rates in clinical areas covered by the QOF to inform the future development of the nGMS contract. | • | • | • | • |
| The Scottish Government should collect monitoring data on the effect of recent changes on the workload of NHS 24 and the Scottish Ambulance Service. | • | • | • | • |
| The Scottish Government should measure anticipated benefits of the nGMS contract. | • | • | • | • |
| The Scottish Government should continue to improve the contribution of QOF to patient care and to achieve value for money by moving from a focus on processes to a greater focus on outcomes. | • | • | • | • |

| | Assurance and accountability | Planning and management | Economy and efficiency | Quality and effectiveness |
|--|------------------------------|-------------------------|------------------------|---------------------------|
| | | | | |
| The Scottish Government should monitor demand for emergency care, with the Scottish Ambulance Service and NHS 24, and consider the impact of extended GP practice opening hours on these services. | • | • | • | • |
| Recommendations for NHS boards | | | | |
| NHS boards should monitor the effectiveness of CHPs in taking over responsibility for general medical services. | • | • | | |
| NHS boards should continue to monitor levels of GP exception reporting to ensure that specific groups of people are not excluded inappropriately. | • | • | • | |
| Audit Scotland joint recommendations for the Scottish Government and NHS boards | | | | |
| The Scottish Government and NHS boards should ensure that all relevant groups are involved in planning for major service changes. | • | • | | |
| The Scottish Government and NHS boards should monitor the investment by NHS boards in enhanced services to make sure that they achieve value for money and meet local needs. | • | • | • | |
| The Scottish Government and NHS boards should collect comprehensive data on GP and GP practice staff numbers to support workforce planning at a national and local level. | | • | | • |
| The Scottish Government and NHS boards should ensure that people living in care homes have access to high quality GP services. | • | • | | • |