



ihub

Primary Care Improvement Portfolio

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Primary Care Improvement Portfolio

Improvement Hub

Enabling health and
social care improvement

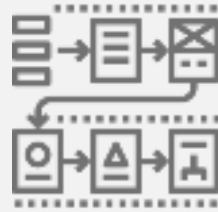


Our Aim



To deliver **targeted improvement support** to optimise care and service redesign **across primary care** in Scotland

THE 2018 GENERAL MEDICAL SERVICES CONTRACT IN SCOTLAND



HSCPs Strategic Plans and Primary
Care Improvement Plans

- 'Convene Co-producers'
- COs
- CQLs
- PC Leads
- AHPs, etc



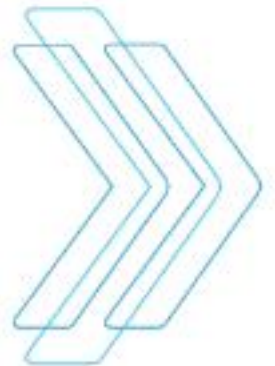
TheKingsFund> Ideas that change
health care

Leading across health and social care in Scotland

Learning from chief
officers' experiences,
planning next steps

Alex Baylis
Allison Trimble

June 2018



Memorandum of Understanding between Scottish
Government, British Medical Association,
Integration Authorities and NHS Boards

Identifying Priorities

Themes



Creating the **conditions** for
successful cluster working



Supporting implementation of
new models of care



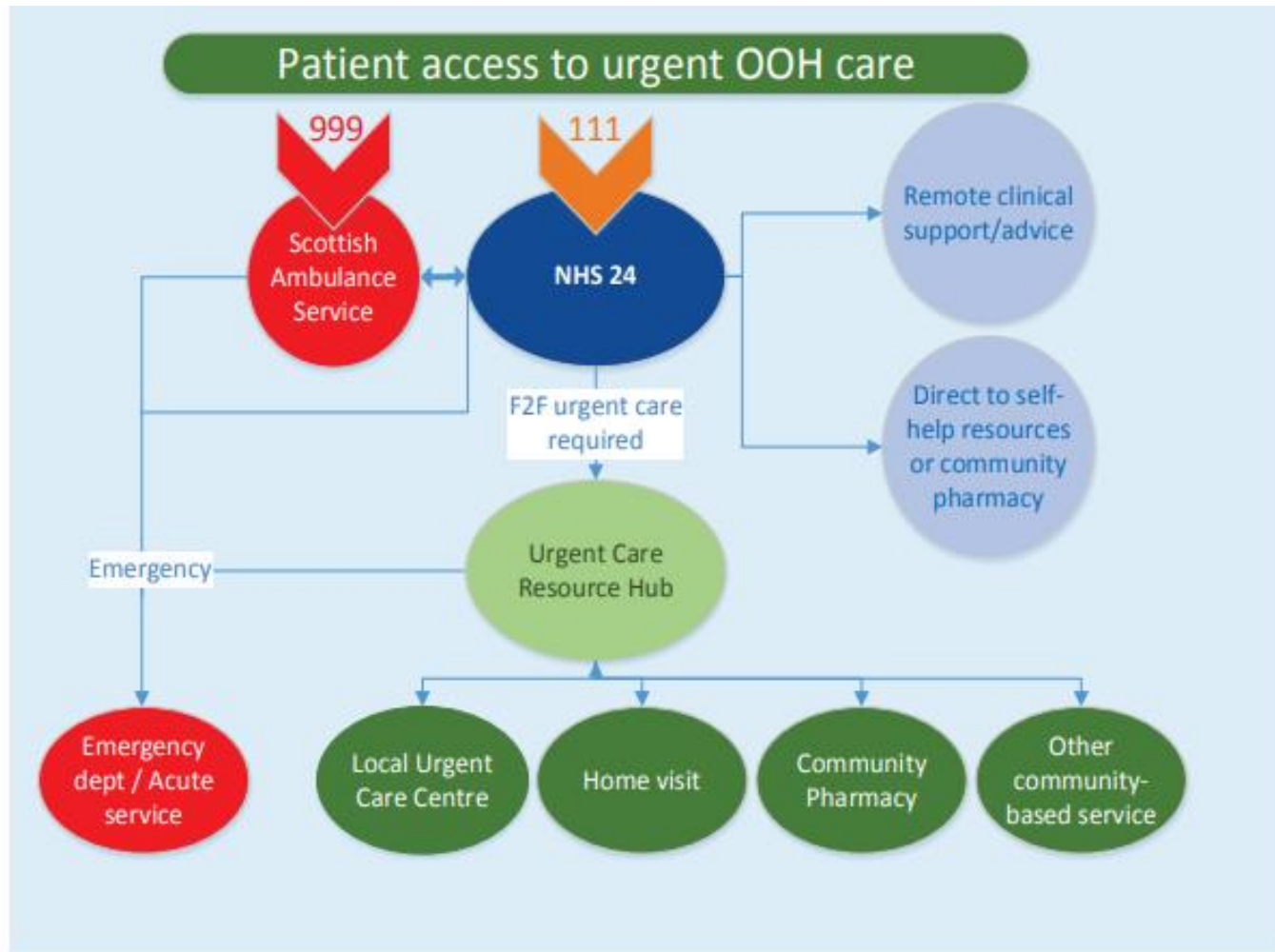
Capturing and sharing **evidence and
data** to accelerate improvement

Can clusters be a vehicle to deliver QI in OOHs?

If clusters are to be a mechanisms to provide peer led quality improvement activity across OOHs, how should they be formed:

- membership of the Cluster Team (MDT, CQLs, etc.)
- levers be to support clusters to engage in Quality Improvement activity? (appraisal, time and resource, etc.)

Pulling Together



**Pulling together:
transforming
urgent care for the
people of
Scotland,
November 2015**

Figure 1 - A new model of out of hours care

Can clusters be a vehicle to deliver QI and Service Redeisgn in OOHs?

- What are the **intrinsic functions** of OOH Clusters QI (eg learning network, local solutions, priorities based on population health needs, use of data for improvement)
- What are the **extrinsic functions** of OOH Clusters in relation to QI (collaboration across agencies (SAS, NHS 24), influence strategic priorities within HSCP (might be linked to influencing CTACs to become in and out of hours urgent care hubs, etc,))