



We are writing to update you on developments relating to negotiations of the new GMS contract and how that fits with our shared vision for wider primary care transformation. We attach a summary document that explains that vision and next steps in more detail.

General practice is at the heart of our vision for primary care with Scotland's GPs as the *expert clinical generalists in our communities* providing clear leadership in response to the increasingly complex care needs of Scotland's population.

The core values of general practice – generalist care; care for the whole person, mind and body, throughout the whole lifecycle; continuity of care – have never been more important. Effective, sustainable and accessible general practice is needed by everyone – so we all start well, live well, age well and indeed die well.

As we seek to meet the challenges of more complex care in the community, general practice and the role of Scotland's GPs will need to be strengthened. The GP practice patient list and consultation will remain at the heart of GP provision but GPs will be supported by, and be the clinical leaders of, an expanded team of health professionals who can help patients to access the right treatment, by the right professional at the right time.

On 15 October the First Minister made a landmark announcement, committing to increase annual investment in primary care by £500 million by 2021/22. This will see the share of NHS frontline spending dedicated to primary care increase to 11%. This increased investment will help deliver our shared vision for general practice in the short and long term.

In the short term, we accept that general practice is facing unprecedented challenges: increased workload; increased risk relating to staff and premises; and recruitment and retention.

The Scottish Government and Scottish General Practitioners Committee are committed to working together to meet these challenges. We have already agreed to remove QOF, introduce a single performers list, provide occupational health support, fairer parental leave, increase pharmacy support for general practice and sort out the supply of emergency oxygen.

Immediate next steps will be to agree a practical way forward on premises, on workload and sustainability, and support for clusters.

The future of general practice cannot be delivered through the GMS contract alone. We will need to work with a wider range of partners to transform how primary care services are configured and delivered including significant investment in primary care workforce and infrastructure. These changes will take time but the first steps are underway with more from April 2017.



We will continue to negotiate changes to the GMS contract in line with our shared vision. We would expect to see further changes in 2017 (commencing October 2017) and continue to negotiate how to modernise the contract, improve access to general practice and improve the attractiveness of general practice as a career.

The nature of the changes require careful planning in line with the planned increase of both funding and staff resources, and ensuring stability. This does not fit well with a “big bang” approach but represents a measured step-wise approach to changing the GP contract and primary care.

We have agreed that to support the vision of the GP as expert clinical generalist in a new GMS contract we will require to undertake two important pieces of work:

(1) we have agreed a full review of all aspects of GP pay and expenses will take place in 2017, and inform options from 2018. To allow this work to take place we are therefore extending the current pay stability agreement to April 2018.

(2) We have also agreed to work with Health Boards and new Health and Social Care Partnerships to review current GMS services with a view, where appropriate, to transfer responsibility for those services to the wider healthcare system. We hope to see first steps taken in 2017, with further changes in the years ahead.

We believe that collaboration toward a shared vision is in the best interests of general practice and the people of Scotland. Changes will still require to be negotiated and these negotiations will take place against the background of that collaborative vision.

We are grateful to everyone working in general practice. General practice in Scotland has a proud and distinctive history. We are committed to see that proud history continue.

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