

## Vision for Primary Care – a discussion document

### NHS England – South Yorkshire & Bassetlaw Area Team

#### Introduction

Primary Care is defined as the first contact of a patient with a healthcare provider, usually a GP, dentist, pharmacist or optician, in a given episode of illness. As such, it has a key role to play in improving health outcomes and reducing health inequalities. We know that good primary care has a positive impact across the whole of the health and social care system. Evidence shows that strong and effective primary care services are vital for health economies and for delivering high quality, best value health services and healthy populations. NHS England holds the core contracts with each of the four primary care groups (dentistry, pharmacy, optometry and GP practice), and our aim, as a single commissioner of primary care, is to deliver excellence in commissioning NHS primary care services including improvements in quality and patient satisfaction, and reductions in inequalities of access and outcomes.

NHS England is currently in the process of developing a national strategic framework for primary care, which will then be implemented locally within local primary care strategies. In contribution to (and also in preparation for) this national framework (due out in October), the South Yorkshire and Bassetlaw Area team is seeking views on what the vision for primary care locally should be, across the four main categories of dentistry, GP practice, pharmacy and optometry, to enable us to feed into the national work, and also to start planning local solutions for the future.

#### Principles of the NHS Constitution, and the Primary Care context

Seven key principles guide the NHS in all that it does. They are listed here, together with a narrative that links them to the issues we need to consider within the primary care setting.

1. The NHS provides a comprehensive service, available to all  
Primary care has to serve a widely diverse population, and organise itself to meet a plethora of not just health needs but social, economic, and cultural characteristics, many of which are often found within one provider's own locality. As the "front door" to many other healthcare services, primary care has to make sure it is not just available but most importantly accessible to all communities and cultures.
2. Access to NHS services is based on clinical need, not an individual's ability to pay  
Primary care providers need to balance this principle with their own business models, as they often provide services to fee-paying patients alongside NHS patients. Transparency of process on all levels is key to achieving this balance.
3. The NHS aspires to the highest standard of professionalism and excellence  
We need to make the best use of mechanisms available to us to ensure that best practice and excellence is promoted across the primary care provider

community. There is a wealth of opportunity for providers to learn from each other for the benefit of patients, and we need to harness this.

4. NHS services must reflect the needs and preferences of patients, their families and carers.

Primary care providers are often the best placed providers in the system to know the whole family rather than just the patient. This unique knowledge is key to providing integrated, holistic care, and all primary care providers need to consider how they can maximise it, and use it to best advantage of the patient.

5. The NHS works across organisational boundaries and in partnership with other organisations in the interest of patients, local communities and the wider population

For many patients, their primary care provider is their first port of call. However their needs will often be wide-ranging, and therefore the primary care provider needs to have smooth, effective relationships in place with all the possible partners in health and social care, to ensure the patient's needs are met. This principle has been re-emphasised in the recent government commitment to Integrated Care<sup>1</sup>.

6. The NHS is committed to providing best value for taxpayers' money and the most effective, fair and sustainable use of finite resources.

The sustainability of primary care is an increasingly pertinent issue, in the face of growing demand, a finite workforce, and the financial challenges in the NHS. Primary care provision needs to be organised and configured in the most efficient and effective way, to preserve local access and continue to provide safe and high quality services. Innovative thinking needs to be embraced in order to achieve this goal.

7. The NHS is accountable to the public, communities and patients that it serves.

NHS England, as the commissioner of primary care, is committed to open-ness and transparency, and will be putting in place processes for the public to more easily access information on the performance of all providers, including primary care providers.

## **Medical Primary Care – Government Pledges**

There are also a number of government pledges to patients within the NHS Constitution that advise them of their rights. All of these are relevant to primary care, as it sits at the heart of the healthcare system; however there are a handful of pledges that relate directly to GP Practices' responsibilities to the patient, as follows:

- You have the right to choose your GP practice, and to be accepted by that practice unless there are reasonable grounds to refuse, in which case you will be informed of those reasons.
- You have the right to express a preference for using a particular doctor within your GP practice, and for the practice to try to comply.

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<sup>1</sup> <https://www.gov.uk/government/publications/integrated-care>

- You have the right to access to a primary care professional within 24 hours or a primary care doctor within 48 hours.

While these pledges are only relevant to GP practices, the culture of raised expectation is being created and this often applies equally in the patient's eyes to dentistry, pharmacy and optometry. Patient waiting times are a big element of every provider's business; as is patient choice, which again directly affects the sustainability of each of the four elements of primary care.

### **The vision for primary care – a summary**

From all of the above, it is clear that NHS primary care needs to be

- Accessible
- Integrated
- High Quality
- Person-Centred
- Sustainable

The aspirations within the above principles and pledges are ambitious, and there are many challenges currently affecting NHS dentistry, pharmacy, optometry and GP practice. It is clear that there needs to be a strategic programme of change in place to move us towards the desired end state.

### **Discussion points**

Members of Rotherham Health & Well-Being Board are asked for views on the following points:

- Are there other ways in which the NHS Constitution values and pledges affect primary care that are not listed above?
- Are there any additional values not listed that should be part of a dedicated primary care strategic framework?
- How well do you feel the local primary care community is working currently? What are the issues we need to address within our local primary care strategy to deliver the vision set out above?

### **Next Steps**

Over the summer NHS England will engage with key stakeholders nationally and in some communities to get a local perspective. We will use the intelligence gathered to feed into the development of the national strategic framework for primary care. We will also be using it to start shaping the programme of work required locally to make primary care the best it can be for the future. Upon publication of the national strategic framework, anticipated to be in the autumn, we will then be able to formalise a local primary care strategy, based on the national vision, which takes into account all the local issues that need addressing.

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