



AGENDA ITEM NO 13

REPORT NO IJB 9/25

ANGUS INTEGRATION JOINT BOARD

26 FEBRUARY 2025

MINOR INJURY AND ILLNESS SERVICE

REPORT BY JILLIAN GALLOWAY, CHIEF OFFICER

1. ABSTRACT

This report seeks the approval of the Angus Integration Joint Board (IJB) for the strategic vision for Minor Injury and Illness service provision in Angus **Appendix 1**. Developed collaboratively with a diverse range of stakeholders through a series of engagement events, the vision addresses the evolving healthcare needs for the local population. It prioritises optimising resources, integrating services, and ensuring equitable access to high-quality care tailored to Angus communities. By focusing on a patient-centred and sustainable approach, the strategy aims to improve health outcomes, support workforce resilience and enhance the delivery of care closer to home.

2. ALIGNMENT TO THE STRATEGIC PLAN

This report contributes to the following strategic enablers in the AIJB Strategic Commissioning Plan: -

- **Priority 1:** Prevention and Proactive Care – By enhancing pathways for Minor injuries and Illnesses, the vision supports early intervention and reduces reliance on emergency care.
- **Priority 2:** Care Closer to Home – The proposed service model ensures local accessibility, reducing travel and fostering community-based care.

3. RECOMMENDATIONS

It is recommended that the Angus Integration Joint Board:

- (i) Approves the proposed strategic vision for Minor Injury and Illness services in Angus;
- (ii) Endorses the continuation of stakeholder engagement activities to refine and adapt the service model in alignment with community needs; and
- (iii) Recognise the development of a comprehensive programme of work and; request the Chief Officer bring back a further paper to the IJB detailing plans for the provision of Minor Injury and Illness care in Angus in June 2025.

4. BACKGROUND

Historically, Emergency Departments (EDs) have been the default destination for urgent and unscheduled care. However, many minor injuries and illnesses can be addressed more effectively in alternative care settings, such as GP practices, Minor Injury and Illness Units (MIU), and pharmacies.

In Angus, MIUs have long provided care for minor injuries and illnesses, offering a more appropriate and accessible setting. Over time, changes in demand patterns have led to reduced activity in some minor injuries and illness units, prompting a re-evaluation of services. Efforts have focused on optimising resources, introducing new pathways, and adapting services to meet the specific needs of local populations.

The introduction of Community Treatment and Care (CTAC) services under the 2018 General Medical Services (GMS) contract has further enhanced planned care delivery. Tests of change at sites with co-located Minor Injury and Illness and CTAC services have demonstrated opportunities to improve patient care, streamline pathways, and ensure workforce sustainability. These changes highlight the importance of equitable, needs-based service delivery that maximises resource efficiency and maintains high-quality care.

5. CURRENT POSITION

The strategic vision has been informed by comprehensive engagement and analysis. For more details, please see **Appendix 2: Preliminary Statement of Engagement**.

Key developments include:

- **Stakeholder Feedback:** Representatives from Emergency Department (ED), GP practices, GP Out-Of-Hours service, and Scottish Ambulance Service expressed strong support for a dynamic service model aligned with evolving healthcare needs.
- **Staff Insights:** MIU and CTAC staff highlighted opportunities to enhance collaboration, streamline patient pathways, and support professional development.
- **Tests of Change:** Pilots in Forfar and Montrose revealed valuable insights. For instance, reduced activity in certain Minor injury and Illness Units raised questions about sustainability, emphasising the need to reallocate resources to areas of higher demand. Feedback from these pilots demonstrated the feasibility of collaborative models that manage cases efficiently and improve patient outcomes.

Beyond staff and stakeholders engagement, the proposed strategic vision was also discussed with in key local forums. It was explored at the Angus Clinical Partnership Group (CPG), where representatives from various services and GP practices had the opportunity to provide feedback. Additionally, the proposal was reviewed at the Angus Urgent & Unscheduled Care Steering Group meeting.

These findings have shaped a strategy focused on flexible, integrated services that balance accessibility, sustainability, and equity across Angus communities.

6. PROPOSALS

It is proposed that AHSCP

- Launch a comprehensive public engagement program to ensure alignment with community needs.
- Develop an implementation framework with measurable milestones and ongoing performance monitoring.

7. FINANCIAL IMPLICATION

There are no direct financial implications associated with this report. However, the development of the future Minor Injury and Illness service strategic vision will be financially assessed to ensure all associated costs are identified and managed effectively within available resources. The service is expected to be re-modelled within 2022/23 underlying spend levels (adjusted for inflation), with an updated report being brought back to the IJB for approval in due course.

8. RISK MANAGEMENT

This report aligns with the priorities of the Angus IJB Strategic Commissioning Plan:

- Priority 1: Prevention and Proactive Care
- Priority 2: Care Closer to Home

Risk Description	Failure to deliver on the priorities within the Strategic Commissioning Plan, which aim to improve the health and well-being outcomes of the population of Angus within available resources.
Risk Category	Quality (of Care) /Clinical
Inherent Risk Level	Level Likelihood 5 x Impact 4= Risk Scoring x 25 (High risk level).
Mitigating Actions	<ul style="list-style-type: none"> • Ongoing dialogue with NHS Tayside, Angus Council, Scottish Government and via national forums. Identify and progress actions within the Strategic Delivery Plan to ensure services improve the experience for service users, improve the experience for staff, lead to better health outcomes and lower the cost of care. • Strategic Planning Group – overseeing the delivery of the Strategic Commissioning Plan • Strategic Delivery Group and Performance Steering Group – overseeing the delivery of all priorities ensuring they are on target and make a positive impact on national indicators and local performance indicators • Improve urgent, unscheduled and planned care pathways. • Engagement with the public and stakeholders – Ensuring transparency, gathering feedback, and fostering support for the strategic vision to align with community needs and expectations.
Residual Risk Level	Likelihood 5x Impact 4 = Risk Scoring 20 (High level)
Planned Risk Level	Likelihood 3 x Impact 4 = Risk Scoring 12 (Moderate level)
Approval recommendation	While the overall risk of failing to meet the ambitions outlined in the Strategic Commissioning Plan remains high, the approval of the strategic vision for the service provides a clear and achievable pathway to improving urgent and unscheduled care. Approval will enable the structured implementation of service enhancements, ensuring alignment with the plan's priorities and driving meaningful improvements in patient outcomes and system efficiency.

9. PUBLIC HEALTH IMPLICATIONS

A Health impact screening assessment will be completed as part of this ongoing work. The strategic vision promotes equitable access to timely, high-quality care for minor injuries and illnesses, directly addressing health inequalities. It reduces reliance on acute care pathways, fosters a more sustainable healthcare system, and supports prevention and proactive care initiatives. Enhanced local access ensures better outcomes for underserved communities, including rural areas.

10. CLIMATE SUSTAINABILITY IMPLICATIONS

The strategic vision supports climate sustainability by prioritising care closer to home, thereby reducing patient and staff travel.

Optimised resource allocation and digital solutions, such as reduced reliance on paper-based processes, contribute to environmentally friendly practices. These efforts align with the Angus Health and Social Care Partnership's commitment to minimising carbon emissions and energy consumption.

11. EQUALITY IMPACT ASSESSMENT, CHILDREN'S RIGHTS AND FAIRER SCOTLAND DUTY

A screening assessment has confirmed the need for a full combined impact assessment, which is currently underway. This assessment will ensure the strategy aligns with equality, children's rights, and fairer Scotland objectives. The final assessment will be presented to the IJB in April 2025.

12. COMMUNICATION AND ENGAGEMENT (IF APPLICABLE)

A comprehensive communication and engagement program is central to the strategic vision's further development and implementation. Key activities include:

- Public engagement events to ensure inclusivity and gather diverse perspectives.
- Further collaboration with professional stakeholders – Including Minor Injury and Illness staff, CTAC staff, GPs, and NHS Tayside representatives.
- Distribution of accessible materials, such as an easy-read version of the strategic vision document and public surveys.
- Strategic promotion via social media and established networks to maximise reach and transparency.

Engagement feedback has been integral to shaping the strategy and will continue to influence its refinement and implementation.

13. DIRECTIONS

The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in Section 26 to 28 of the Public Bodies (Joint Working) (Scotland) Act 2014. This mechanism takes the form of binding directions from Angus Integration Joint Board to one or both of Angus Council and NHS Tayside.

Direction Required to Angus Council, NHS Tayside or Both	Direction to:	
	No Direction Required	x
	Angus Council	
	NHS Tayside	
	Angus Council and NHS Tayside	

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- List of Appendices:
 Appendix 1: Plan on a Page
 Appendix 2: Preliminary Statement of Engagement