



## Access to Primary Care Resources

#### Contents:

Introduction

General Access Policy and Guidance

Access Inequalities

**Digital Access** 

Telephony and Appointment Booking

**Case Studies** 

## Introduction

These resources have been collated to ensure policy, research and good practice on access to primary care and general practice is easily available to practices and PCNs.

# General Access Policy and Guidance

## NHS England

Next Steps for integrating primary care: Fuller stocktake report by Dr. Claire Fuller, 2022.

The Fuller Stocktake notes that whereas many patients with chronic, long-term conditions require continuity of care, many patients are happy to be seen by any appropriate clinician as long as they can be seen quickly, and that there is a growing appetite for accessing care digitally.

The report puts forward recommendations for integrated urgent care teams in every neighbourhood, and connecting up wider urgent care services such as general

practice, urgent treatment centres, out-of-hours, urgent community response services, home visiting, community pharmacy and NHS111.

See 'Delivering the change our patients and staff want and need: improving sameday access for urgent care' on pages 10-12.

<u>Enhanced Access to General Practice services through the network contract DES – Frequently asked questions, NHS England, 2022.</u>

FAQs for PCNs on the requirements for provision of Enhanced Access, including

- What the Enhanced Access service is and how PCNs should implement it
- Contracting
- Commissioners
- Subcontracting
- Finance
- Digital requirements for enhanced access
- What support is available for PCNs
- Skill mix: what GP cover is required and how ARRS roles can be used

NHS England business plan for 2022/2023: Chapter 5: Improve access to primary care, NHS England, 2022.

NHS England commitments for 2022/23 aiming to improve access to primary care, relating to:

- Improving access to general practice
- The Enhanced Access service delivered by PCNs
- Recruitment and retention of the primary care workforce
- Personalised care
- Community pharmacy
- Community dentistry
- Community services e.g. hospital at home

Supporting general practice, primary care networks and their teams through winter and beyond, NHS England, 2022.

Details of NHS England's updates to policy and specifications to support primary care over winter 2022/23, including:

- An ICB framework for supporting general practice including lines of enquiry to assess where immediate investment support may be required
- Immediate changes to the Network Contract DES
- Reducing bureaucracy and primary/secondary care interface

- System development funding for primary care
- Scoping for any additional capital funding for primary care during 22/23
- Further support for general practice and PCNs during winter 22/23

#### Access improvement support (Time for Care), NHS England

Details of the type of support offered to GP practices by the Time for Care team e.g.:

- Managing demand and capacity
- Reducing waiting times
- Utilising the whole of the multi-disciplinary team
- Improving team wellbeing and morale
- Developing processes for key activities and implementing innovations

## **Care Quality Commission**

CQC Information for providers: GP mythbuster 55: Opening hours, CQC, 2022

What the CQC inspects when they consider access to appointments:

- What 'core hours' means and what must be provided during core hours
- Contractual requirements
- How responsiveness to patient needs is assessed
- Providing alternative access to care when practices are closed

CQC Information for providers: GP mythbuster 77: Access to appointments and staff competence, CQC, 2022

How the CQC assesses access to appointments in terms of how responsive a provider is:

- How practices should determine the number of appointments they provide
- How practices should ensure each patient is seen by the most appropriate person
- How practices should ensure staff competency across the multi-disciplinary team

#### **British Medical Association**

GP access: meeting the reasonable needs of patients, BMA, 2022.

BMA guide for GP practices on

- Contractual obligations in being accessible to patients
- What practices can do if they are challenged by their commissioner

# Access Inequalities

#### Access for migrants, asylum seekers and refugees

<u>CQC Information for Providers: GP mythbuster 36: Registration and treatment of asylum seekers, refugees and other migrants, CQC, 2022.</u>

CQC guidance on what they inspect in respect of 'people whose circumstances may make them vulnerable' which may include asylum seekers, refugees and other vulnerable migrants. Includes:

- What NHS services are free to everyone
- Groups of people who are exempt from all overseas visitor charges
- Responsibilities of GP practices in ensuring these groups can access treatment according to their rights

#### Safe Surgeries, Doctors of the World.

GP practices can sign up to be a Safe Surgery, which involves taking steps to remove barriers faced by many migrants in access to healthcare. This website includes:

- Safe Surgeries Toolkit
- Resources and training
- Translated health information: basic information on rights to healthcare in many languages

#### Access for homeless people

<u>CQC Information for Providers: GP mythbuster 29: Looking after homeless patients</u> in General Practice, CQC, 2022.

CQC guidance on what they inspect in respect of 'people whose circumstances may make them vulnerable' which includes people who are homeless. Includes:

- Inequalities faced by homeless people in access to healthcare
- Expected standards of care
- Examples of good practice
- Duty to refer
- Useful resources for GP practices on homelessness and healthcare

<u>Homelessness and General Practice</u>, Pathway (healthcare for homeless people charity).

- Details of the NHS England Registration Framework relevant to people who are homeless
- Free CPD resources:
  - Homeless Health Elearning from the Healthy London Partnership
  - Homelessness Guidance and Tips for GP Receptionists
- Go to <u>Pathway homepage</u> to access further support and resources on homelessness and healthcare

# **Digital Access**

Securing Excellence in Primary Care (GP) Digital Services: The Primary Care (GP) Digital Services Operating Model 2021-2023, NHS England, 2022.

The Operating Model is a commissioning framework supporting the provision of digital services required for general practices and primary care networks. It includes:

- Defining the digital requirements for general practice
- Standards and guidance on fulfilling these requirements to ensure quality, safety and compatibility
- The responsibilities for fulfilling these requirements
- The CCG agreement that CCGs are required to sign with each practice
- Digital capabilities necessary to enable each practice to fulfil its obligations under the GP Contract
- Funding arrangements for IT in general practice
- Commissioning, procurement and contract management
- Assurance: how NHS England evaluates the effectiveness of the Operating Model
- Addressing the challenges of digital technologies in general practice

<u>Creating a highly usable and accessible GP website for patients</u>, NHS England, 2022.

A guide for practice managers, PCNs, ICSs etc. on improving GP websites. Including:

- Making it easier for patients to achieve the tasks they use the website for
- Keeping it up to date
- NHS templates and design components
- Taking a 'mobile first 'approach

#### Access to Primary Care Resources

- User experience
- User testing
- Accessibility
- Data and analytics
- Tendering processes
- Evaluating suppliers
- Contractual requirements of a GP website

## <u>Digital First Primary Care</u>, NHS England.

The NHS Long Term Plan, published in January 2019, commits to every patient having the right to be offered digital-first primary care by 2023/24. Digital First Primary Care is a programme which supports the transformation of primary care by promoting the implementation, understanding and improvement of digital tools within general practice e.g. online consultation requests and video consultations.

## These pages include:

- NHS England's commitment to a digital-first approach
- Digital requirements of the GP contact
- Procurement
  - o NHS Digital Care Services (DCS) catalogue, including list of suppliers
  - o Digital First online consultation and video consultation framework
  - National Commercial and Procurement Hub, expert procurement advice and support to buy through the DCS catalogue
- Resources: online Consultations toolkit, patient leaflet and evaluation form
- · Contact details for advice

#### Digital Primary Care, NHS Futures Workspace.

A platform for primary care colleagues to come together and share experiences, learning and resources. Includes:

- How to implement digital transformation
- Toolkits e.g. inclusive access toolkit
- · How to procure digital systems
- Digital requirements of the GP contract
- Digital inclusion and inclusive access routes to general practice
- Data
- GP IT Services: digitisation of GP records, GP IT Futures and GP IT Operating Model
- Webinars
- Discussion board and blog

## **Digital Access Inequalities**

<u>Digital primary care: Improving access for all? Rapid evidence review,</u> Charlotte Paddison, Nuffield Trust, 2022.

Brief evidence summary of the impact of increased use of digital technologies in primary care on access. Includes:

- Digital exclusion and inequalities in access
- Tackling inequalities through inclusion, choice and personalisation
- Gaps in the evidence e.g. the impact on people with protected characteristics and how these intersect

Digital exclusion and health inequalities, Good Things Foundation, 2021.

This briefing paper provides an overview of digital exclusion and its relationship to health, social and economic aspects of people's lives. Includes:

- What is digital exclusion?
- Digital exclusion and health, social and economic aspects of people's lives
- Impact of the pandemic
- The groups most affected
- Policy and practical responses
- Ideas for collaborating for change

Access to and delivery of general practice services: a study of patients at practices using digital and online tools, The Health Foundation, 2022.

A study analysing data from 7,558,820 patient-initiated requests for primary care made using the askmyGP online consultation system between 1 March 2019 and 30 September 2021. Online requests were made by patients online, or by practice staff for patients who preferred to use the phone or visit in person.

#### Key findings:

- 10% of patient care requests made to GP practices indicate a preference for a face-to-face consultation
- Online requests were increasing before the pandemic
- The rate of requests has increased during the pandemic, and is not driven by increased ability to access the practice online
- Almost 40% of all requests across these practices, regardless of the access route, were from the top 10% of requesters (frequent attenders)
- Care tended to be delivered according to patient characteristics, clinical/administrative needs, and preference

- More than 83% of all requests made at these practices were responded to within the same working day and the median time to respond was less than 4 working hours
- The use of an online consultation system alongside multimodal care delivery can be effective in managing demand and does not seem to disadvantage non-digital users. although more work is required to look at impacts relating to socioeconomic and health inequalities.

# Telephony and Appointment Booking

<u>Directly bookable appointments – guidance for practices</u>, NHS England, 2022.

Guidance on contractual requirements for online appointment booking. Includes

- Definition of 'directly bookable'
- Types of directly bookable appointments

How to calculate telephone capacity, Primary Care Foundation.

Online tools for calculating the capacity required to ensure good telephone response, including online calculators, free excel add-ins and modelling tools.

<u>Getting Started: Redesigning Appointment Systems</u>, Primary Care Improvement Connect. (Access to Primary Care Improvement Connect required. <u>Request access</u> here).

From the Getting Started Series on Primary Care Improvement Connect, a guide to redesigning appointment systems, including a worksheet and webinar.

## Case Studies

General practice: case studies of GP organisations working at scale to deliver access and continuity, Nuffield Trust, 2022.

A collection of case studies of different types of GP organisation, demonstrating options for improving access while maintaining access for those that need it.

<u>Time for Care programme Case Studies</u>, Primary Care Improvement Connect.

(Access to Primary Care Improvement Connect required. Request access here).

A collection of cases studies of practices and PCNs which have implemented improvements through the Time for Care programme, including many relating to access, appointment booking and improving efficiency.

Ensuring new technology improves primary care access for all, Swan Medical Practice, Birmingham, 2022.

Introduction of an online consultation system and how this helped manage triage, improved communications between practice staff and patients, demand management and 'did not attend' rates.

Improving access, experience and outcomes for patients through population health management, Modality Partnership, Hull. (Access to Primary Care Improvement Connect required. Request access here).

Modality Partnership PCN used population health data, worked with their communities to develop a programme to improve access and reduce health inequalities, including:

- Calling patients to schedule routine recall appointments and ensuring they can access the appointment
- Multi-faceted interventions to improve access to care e.g. focused activity on cancer screening uptake for minority ethnic and non-English speaking patients
- A comprehensive QI approach e.g. focus on comprehensive cancer care from screening to end of life care

<u>Using demand and capacity data to help improve patient choice and access,</u> Malmesbury Primary Care Centre, South West, 2022.

(Access to Primary Care Improvement Connect required. Request access here).

Redesigning the appointment system reduced unmet demand by 70%, improved patient choice and helped relieve pressure on staff.

A more flexible approach to managing patient demand and future peaks in pressure, The Orchard Practice, South East

How the Orchard Practice used the Time for Care programme to manage demand, using a RAG (red, amber and green) rating to categorise work, and implemented a more flexible timetable for telephone appointments.

<u>Simple changes maximise use of appointments and increase efficiency</u>, Dunstan Village Group Practice, North West.

Dunstan Village Group Practice used the Productive General Practice (PGP) Quick Start programme, part of Time for Care, to increase the use of eConsult, better utilise nurse appointments, improve management of reception tasks and create a more organised working environment. Resulted in release of 4 hours of senior receptionist time, and 5 hours of GP time.