



## Y PWYLLGOR ANSAWDD, DIOGELWCH A PHROFIAD QUALITY, SAFETY AND EXPERIENCE COMMITTEE

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	01 October 2022
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	General Medical Services Access
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Jill Paterson, Director Primary Care, Community and Long Term Care
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Rhian Bond, Assistant Director of Primary Care

**Pwrpas yr Adroddiad (dewiswch fel yn addas)**

**Purpose of the Report (select as appropriate)**

Er Sicrwydd/For Assurance

### ADRODDIAD SCAA

#### SBAR REPORT

##### Sefyllfa / Situation

Improving access to General Medical Services (GMS) continues to remain a key priority for Welsh Government. Access Measures and Standards for the GMS contractual year 2021-22 have now been finalised through the Primary Care Information Portal.

This paper sets out a summary of the Access Standards end of year submissions made by GP Practices for 2021-22, summarises the position of current opening times and references the recent Access Survey undertaken by the Community Health Council.

The paper also sets out the changes to the Access standards as per the outcome of the GMS Contract negotiations. It is important to note that whilst Access remains a key priority, the Access standards are contained within the Quality Assurance and Improvement Framework (QAIF) which is not mandatory.

##### Cefndir / Background

#### **Access Standards**

The Access Commitment was introduced from 1 April 2022 as part of the GMS Contract negotiations to demonstrate to the public what they can expect in terms of access from GP Practices.

1. A more planned and forward-looking approach, where contact is supported throughout the day to resolve the issues around the '8am bottleneck' and repeated attempts at contacting and/or obtaining a consultation or other help and support. The release of all appointments at 8am (or other narrow window of time) is no longer acceptable.
2. All practices must provide a telephony service (preferably Voice over Internet Protocol solutions or sufficient incoming and outgoing lines) that fully meets the needs of patients.

- All practices must offer a digital means of access in addition to telephone and in-person. The digital platform is for non-urgent access and only necessary for use during core hours

It is important to note that the above form part of the high-level narrative supporting the Access commitment but that there are no minimum standards agreed in which Health Boards can assess Practices against.

In addition to the Access standards in QAIF, the Framework also includes a Quality Improvement project on demand and capacity data. This is a self-assessment with no data quality checks in place. Health Boards will have access to Cluster level data, but the Cluster will have individual Practice information made available to them.

**Process**

The nationally agreed contractual process for Access Standards 2021-22 Quarter 4 has been followed and a year-end submission screen was made available to all Practices within the Primary Care Information Portal (PCIP) for 31st March 2022 (Q4 year-end).

GP Practices had the ability to upload relevant evidence in relation to each standard by 29 April 2022 and the initial/preliminary results (points attained and associated payment) was made available for individual GP Practices and Local Health Boards (LHBs) to view. It is important to note that this is a voluntary self-assessment system and therefore there is no data quality undertaken to verify the information provided by Practices in line with the “light touch” spirit of the contractual agreement.

Following receipt of initial evidence submissions, Practices and LHB liaison was undertaken to agree any subsequent adjustments. During this period GP Practices uploaded additional evidence to the PCIP that was subsequently reviewed by the Primary Care Team.

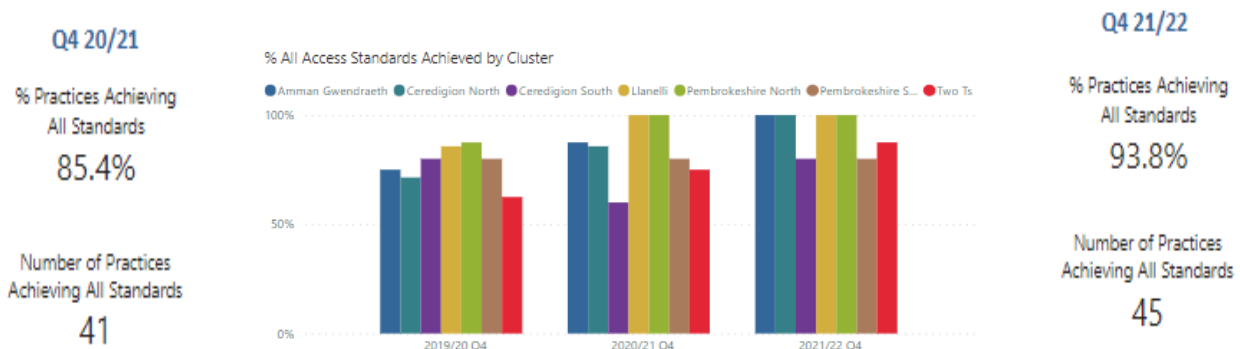
The Quarter 4 year-end submission screen within the PCIP was locked at 5pm on 8 June 2022 with the final results being

These results were submitted on 15 June 2022 to NWSSP (Contractor Services) to make Access Standards 2021-22 payment to General Practices.

**Asesiad / Assessment**

**Access Standards**

For GMS contractual year 2021-22, 93.8% of (45) Practices achieved all standards and the bonus, compared to 85.4% of (41) Practices in 2020-21. The breakdown by Cluster can be seen below.



Of the three Practices who did not achieve maximum points, one Practice in South Ceredigion did not achieve Group 1 / Standard 1, which is appropriate telephony and call handling systems being in place to support the needs of callers and avoids the need for people to call back multiple times (systems must also provide analysis data to the Practice). Three questions were asked in relation to this Standard, only one was unmet by the Practice, being:

Standard 1	
Question	Answer
Does your phone system have a recording function for incoming and outgoing lines?	<input type="text" value="Yes"/>
Does your phone system have the ability to stack calls?	<input type="text" value="No"/>
Are you able to interrogate your telephone system to analyse data on calls?	<input type="text" value="Yes"/>

Two Practices, one in South Pembrokeshire and one in Teifi Taf did not meet Group 1 / Standard 5, which is “people are able to request a non-urgent consultation, including the option of a call back via email, subject to the necessary national governance arrangements being in place”. Two questions were asked in relation to this Standard, both Practices unmet the question below:

Standard 5	
Question	Answer
Can you confirm if your practice offers an email facility for patients to request non-urgent appointments or a call back?	<input type="text" value="No"/>
Does the practice have the necessary governance arrangements in place for this process?	<input type="text" value="No"/>

Within the agreed submission process, there was a two-week window where the Primary Care Team were required to review all the end of year submissions. The Primary Care Service Managers liaised with Practices where additional evidence was required to demonstrate the standard had been met. If this evidence was not available and/or forthcoming, then the standard was unmet.

Practices who submitted 100% of evidence required at first attempt – no additional work required	28
Practices where additional evidence was required	20

Where standards have not been met by the three Practices, they will be supported Practices to meet these Standards for 2022-23. This will be achieved by Primary Care Services Mangers meeting with the Practices in the first instance to identify any barriers to delivery, agreeing an action plan and monitoring progress against this plan.

### Open and Appointment Times

The analysis below provides an overview of all main site Practices.

Ref	Description	%	Yes	No
<b>Open Times</b>				
A	% open all day for daily core hours, (08:00 to 18:30, Monday to Friday)	35%	17	31
B	% open within one hour of daily core hours - no lunch closure	83%	40	8
C	% of hours Open per week $\geq 47.5$	85%	41	7

D	% open after 9:00am any day	0%	0	48
E	% open after 8:00am any day	40%	19	29
F	% closed before 5:30pm any day	8%	4	44
G	% closed before 6:30pm any day	50%	24	24
H	% closed at Lunchtime any day	8%	44	4
<b>Appointment Times</b>				
I	% offering appointments at any time between 17:00 and 18:30 at least two week days	100%	48	0
J	% offering appointments before 08:30 at least two week mornings	25%	12	36
K	% offering appointments before 8:30am	29%	14	34
L	% offering appointments before 9:00am	81%	39	9
M	% offering appointments after 5pm	100%	48	0
N	% offering appointments after 5:30pm	83%	40	8
O	% offering appointments after 6pm	52%	25	23
P	% offering appointments after 6:30pm	8%	4	44
Q	Average appointment Hours per week	38:26		

Due to the Access standards being part of the QAIF rather than being part of the core contractual terms there is limited scope for Health Boards to contractually manage issues about concerns. Where there is evidence that the provision of essential services is not being met, then in line with The National Health Service (General Medical Contracts) (Wales) Regulations 2004 there is scope to serve a Practice a Remedial Notice which sets out the terms of the identified contractual breach along with the actions required in a defined timescale that need to be undertaken by the Practice to remedy the situation. Under the Regulations there is a minimum timescale of 28 days from the issuing of the Remedial Notice to when the Practice is required to make the necessary changes to bring them back into contractual compliance.

### Community Health Council (CHC) Access Survey

The CHC undertook a survey of patients between September 2021 and March 2022; it is important to note that during this time Practices were reporting higher than average staff sickness rates due to the Omicron wave and therefore working practises were not always as Practices would want them to be.

Analysis and summary reports were provided for each County with the main issues identified summarised in the tale below, which have been discussed at each Cluster meeting, alongside a Health Board action plan. The key actions can be summarised as follows:

- Recommendation shared with Locality Leads for discussion with Practices during Cluster meetings
- Request to Head of Workforce Education & Development for support with identifying suitable training courses to address some of the staff/patient communication and relationship issues that the survey highlights.
- All Practices have been offered Care Navigation training in line with the GMS contract negotiations for 2022/23. Three Practices in North Ceredigion and one in Amman Gwendraeth did not participate.
- Recommendation on leaving messages to be shared with Locality Leads for further discussion with regards to clinical governance.

### CHC Access Survey: Summary of Concerns by County

County	Issues identified
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Carmarthenshire	<ul style="list-style-type: none"> <li>• Choice to be provided on means of access e.g. telephone, F2F, video consult etc</li> <li>• To give an estimated time for patients waiting for a call back</li> <li>• Customer service training for receptionists</li> <li>• All Practices to use E-Consult</li> <li>• All Practices should offer advance booking for appointments</li> </ul>
Ceredigion	<ul style="list-style-type: none"> <li>• Pre-bookable follow up appointments should be made available when GP/Nurse requests</li> <li>• Customer service training for receptionists to include why they ask patients for detailed information</li> <li>• To give an estimated time for patients waiting for a call back</li> <li>• Equity of access across all Practices</li> <li>• Investment to be made for easy to navigate website that allows booking appointments and accessing results</li> <li>• Message and call back system to stop patients waiting for calls to be answered</li> <li>• More face to face appointments rather than telephone calls</li> <li>• All staff should listen and acknowledge patient concerns</li> </ul>
Pembrokeshire	<ul style="list-style-type: none"> <li>• Available routine bookable face to face appointments in all Practices</li> <li>• Customer service training for receptionists to include why they ask patients for detailed information</li> <li>• Receptionists shouldn't sign post patients to A&amp;E when there are no appointments left unless in a life threatening emergency</li> <li>• Equity of access across all Practices</li> <li>• Investment to be made for easy to navigate website that allows booking appointments and accessing results</li> <li>• Ability to have video consultations and be able to pre-book them in advance</li> <li>• Pre-bookable follow up appointments should be made available when GP/Nurse requests</li> </ul>

Through the Access Forum which is a requirement of the Health Board under the Access Guidance in the General Medical Services contract, the Health Board meets with members of the CHC and the Local Medical Committee on a quarterly basis. The Access Forum has taken the action to follow up on the issues identified by the Community Health Council, and as part of this work it was agreed to look at setting guidance for Practices on the principles of providing good access to patients.

At the Primary Care Quality Panel on 26 September 2022, a commitment was also given to establish which, if any Practices continue to have their doors shut as a result of undertaking risk assessments of access into waiting areas etc.

### Concerns

During 2021/22 there were 18 concerns raised by patients with the Health Board around access to General Medical Services, five did not identify the GP Practice that they were raising a concern against.

County	Cluster	No. Concerns
Carmarthenshire	Amman Gwendraeth	

	Llanelli	1
	Teifi Taf (2Ts)	1
Pembrokeshire	North Pembs	1
	South Pembs	9
Ceredigion	North Ceredigion	
	South Ceredigion	1

### Argymhelliad / Recommendation

- Members are asked to note the current position related to GMS Access and the work undertaken to continue to ensure that Access remains a key priority.

### **Amcanion: (rhaid cwblhau)**

#### **Objectives: (must be completed)**

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	N/A
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	N/A
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	All Health & Care Standards Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Cynllunio Planning Objectives	1A NHS Delivery Framework targets
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019</a>	

### **Effaith: (rhaid cwblhau)**

#### **Impact: (must be completed)**

<b>Ariannol / Gwerth am Arian: Financial / Service:</b>	Yes
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<b>Ansawdd / Gofal Claf: Quality / Patient Care:</b>	Yes
<b>Gweithlu: Workforce:</b>	N/A
<b>Risg: Risk:</b>	Yes
<b>Cyfreithiol: Legal:</b>	N/A
<b>Enw Da: Reputational:</b>	Yes
<b>Gyfrinachedd: Privacy:</b>	N/A
<b>Cydraddoldeb: Equality:</b>	N/A