GMS Access Improvement

Organisation	Hywel Dda UHB	Date of Report	9/5/2024	Report Prepared By	Tracey Huggins

In 2019 the GMS Access Standards put us on a path to improving access to GP services and ensuring consistency across Wales. The Standards aim to inform people what to expect when they need help or advice and what options are available to them. Achievement has increased year on year over the past 3 years and from 1 April 2023 maintaining these Phase 1 standards will become part of the core GMS contract.

We have continued to build on this approach: in April 2022, the GMS Access Commitment introduced a second phase of standards to ensure practices take a forward-looking and planned approach to managing patient need and take account of patient feedback in developing an action plan for improvement. The Access Commitment GP requires practices to adopt a blended model of access, offering a mix of remote, face-to-face, urgent, on-the-day and pre-bookable appointments, as determined by an assessment of clinical need.

Participation in the GMS Access Commitment is not mandatory for practices but carries up to 100 Quality and Improvement Framework points for achievement. Health Boards are responsible for verifying achievement and providing assurance to Welsh Government on progress with delivery of the Access Commitment. This template provides a structure for this assurance report.

Reporting Schedule: Progress is to be reported annually. This form is to be submitted on:

- 15 April 2024 (covering the period 1 April 2023 to 31 March 2024)

Completed form to be returned to: hss.performance@gov.wales

Progress with delivery of GMS Access Commitment: Phase 2 Access Standards:

Section 1: achievement of practice requirements			
Practice Requirement		**Number of practices within the HB achieving this standard**	**Comments/ Further action taken**
Service Delivery & Communication			
1.	All existing patient facing staff to undertake the national care navigation training package and all new patient facing staff complete the national care navigation training package	48	100% compliance

Section 1: achievement of practice requirements			
Practice Requirement		**Number of practices within the HB achieving this standard**	**Comments/ Further action taken**
	within 3 months of start date. Practices will supply names of new starters and date of training undertaken.		
2.	Appointments are available for advanced booking each day with declaration confirming that every patient contact is supported throughout the day. (Patients will be offered an appropriate consultation, whether urgently or through advanced booking consistent with the patient's assessed clinical need, without the need for the patients to contact the practice again).	48	100% compliance
3.	To maintain a planned and forward-looking approach to consultations, practices to undertake a regular assessment of their scheduling appointment system to ensure a mix of remote, face to face, urgent, on the day and pre-bookable.	48	100% compliance
Patient Engagement			
4.	Practices must regularly maintain an automated and standardised public facing dashboard and make this available via a range of communication methods to meet the needs of their patients. (An Infographic will be made available via the PCIP for practices to use).	48	100% compliance

Section 1: achievement of practice requirements			
Practice Requirement		**Number of practices within the HB achieving this standard**	**Comments/ Further action taken**
5.	Practices to undertake the national patient experience survey which should include 25 completed questionnaires per 1000 registered patients from a range of practice population and captured through a range of methods.	48	100% compliance
Digital			
6.	Practices undertake care navigation on digital requests in a similar and equitable fashion to telephone requests.	48	100% compliance
Section 2: Practice Reflective Reports – high-level summary of key findings and common themes under each of following sections:			
1.	Equality Impact Assessment	47 of the 48 (98% compliance) completed the Equality Impact Assessment. 1 Practice failed to submit any evidence on the Primary Care Information Portal even though the Practice had conducted the National Patient Experience Survey in the required time frame in 2023. Common themes for this element included an understanding by the Practice of their patient demographics and local population health needs. The Equality Impact Assessment provided an opportunity for the 47 Practices to discuss patient engagement, lessons learned and how they are promoting equality.	
2.	Patient Engagement	All Practices reported positive and robust levels of patient engagement. Patients are keen to engage directly when present in the Practice and likewise online or via social media. Practices reported on and discussed patient complaints and ensured systems are in place to respond and act upon recommendations and outcomes. Likewise, most Practices reported positive comments and included compliments about both the administrative and clinical teams. All 48 Practices display up to date access infographics both online and in the Practice and welcome questions and feedback as a result.	

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3.	National Patient Experience Survey	All 48 Practices conducted the National Patient Experience Survey in October and November 2023 and 47 Practices reported back. Practices were required to survey 25 per 1000 patients registered and all of them were able to achieve this request with many Practices reporting a higher return rate than the previous year. Patients were approached by the Practice in several ways including hardcopies in the Practice, text messages including a link, My Surgery App, Practice websites and Practice social media feeds. Many Practices reported a higher overall satisfaction level score than the previous year. Common themes included difficulties getting through to the Practice on the phone, especially at 8am, a request for more face-to-face appointments and more pre-bookable appointments.	
4.	Patient Survey Action Plan	44 of the 48 Practices documented an action plan as a result. 2 Practices reported that no new actions were necessary or could be identified. Common themes from the action plans included increasing pre-bookable and face to face appointments, increasing administrative support on the phone lines at known busy times and to review the telephone message to see if it can be shortened (with many stating they will now remove the Covid message). Many commented that they intended to repeat the survey, even if it is not required in the future, and that they found the experience beneficial for both patients and practice staff.	
5.	Digital Requests	Practices reported a range of systems utilised for digital requests including email, text messages, NHS App, My Surgery App, Practice websites, AskmyGP, eConsult and Accurx. The reflective reports did not highlight any concerns with patients accessing these systems and this could indicate satisfaction with digital requests in Practice. All 48 Practices have ensured their practice administrative staff have completed the Care Navigation Training. This supports Practices in directing patients appropriately and to utilise these digital systems effectively.	

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6.	Telephone System Intelligence	Common themes identified for this section include the occurrence of bottlenecks at certain times of the day (first thing in the morning) and on certain days (for example on a Monday or the day after a bank holiday). Practices reported that interrogation of the telephone system intelligence supported them in planning administrative and clinical cover.	