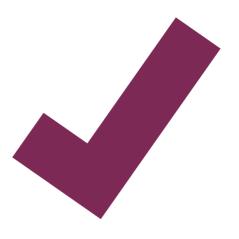


Extended access to general practice

A guide to completing the extended access survey



NHS England INFORMATION READER BOX

Directorate		
Medical	Operations and Information	Specialised Commissioning
Nursing	Trans. & Corp. Ops.	Strategy & Innovation
Finance		

Publications Gateway F	Reference: 08344
Document Purpose	Guidance
Document Name	Extended access to general practice
Author	Improving Access to General Practice Team, NHS England
Publication Date	03 August 2018
Target Audience	GPs, General Practice staff including Practice Managers
Additional Circulation List	
List	
Description	A guide to completing the extended access survey.
Cross Reference	
Superseded Docs	
(if applicable)	
Action Required	To complete the bi annual extended access collection following this
Timin a / Dan Illia a a	guidance
Timing / Deadlines (if applicable)	
Contact Details for	Improving Access to General Practice Team
further information	NHS England
	Quarry House
	Quarry Hill
	LS2 7UE
	https://www.england.nhs.uk/statistics/statistical-work-areas/extended-
	access-general-practice/
Document Statu	us

This is a controlled document. Whilst this document may be printed, the electronic version posted on the intranet is the controlled copy. Any printed copies of this document are not controlled. As a controlled document, this document should not be saved onto local or network drives but should always be accessed from the intranet.

Document number: 3.0	Issue date: dd/mm/yyyy	Version number: 3.0
Status: Approved	Next review date: N/A	Page 2

Extended access to general practice: a guide to completing the extended access survey

Version number: 3.0

Publications Gateway Reference: 08344

First published: 26 September 2016

Updated: 24 February 2017, 1 August 2018

Prepared by: Improving Access to General Practice team, NHS England

This information can be made available in alternative formats, such as easy read or large print, and may be available in alternative languages, upon request. Please contact england.biannual@nhs.net

This is a controlled document. Whilst this document may be printed, the electronic version posted on the intranet is the controlled copy. Any printed copies of this document are not controlled.

As a controlled document, this document should not be saved onto local or network drives but should always be accessed from the intranet.

Promoting equality and addressing health inequalities are at the heart of NHS England's values. Throughout the development of the policies and processes cited in this document, we have:

Given due regard to the need to eliminate discrimination, harassment and victimisation, to advance equality of opportunity, and to foster good relations between people who share a relevant protected characteristic (as cited under the Equality Act 2010) and those who do not share it; and

Given regard to the need to reduce inequalities between patients in access to, and outcomes from healthcare services and to ensure services are provided in an integrated way where this might reduce health inequalities.

Document number: 3.0	Issue date: dd/mm/yyyy	Version number: 3.0
Status: Approved	Next review date: N/A	Page 3

Choose an item.

Contents

Cor	ntents	4
1	Summary	5
2	What is the difference between the GPFV monitoring tool and the bi annual	
exte	ended access data collection?	5
3	Where to submit the information	6
4	What information is required to be submitted in the collection	6
5	Timeline of the survey	8
6	Publication of the data	9
7	Validation	9
8	Definitions	. 10
9	Contacts	. 10
10	Frequently asked questions	. 11

1 Summary

The General Practice Forward View published in April 2016 set out plans to enable clinical commissioning groups (CCGs) to commission and fund additional capacity across England to ensure that, by 2020 everyone has improved access to GP services including sufficient routine appointments at evenings and weekends to meet locally determined demand, alongside effective access to out of hours and urgent care services.

The NHS Operational Planning and Contracting Guidance 2017–2019 set out the funding trajectory for this work as well as a number of core requirements which commissioners will be required to demonstrate they are meeting.

The Refreshed Planning Guidance published in February 2018 now requires CCGs to provide extended access to GP services, including at evenings and weekends, for 100% of their population by 1 October 2018. This must include ensuring access is available during peak times of demand including bank holidays and across the Easter, Christmas and New Year periods.

In 2016 a new data collection process was set up to monitor the availability of these pre-bookable extended access appointments in general practice. Completion of this collection is mandatory for all practices as part of their core contract and was announced as part of the 2016-17 GMS contract¹.

The aim of this guidance document is to provide general practice staff with advice on how to complete their submission to NHS England, and ensure that their provision of extended access accurately reflects what their patients can access.

This submission will be compared to their (practices) CCG GPFV monitoring tool submission on the provision of extended access, to ensure the two submissions are consistent.

2 What is the difference between the GPFV monitoring tool and the bi annual extended access data collection?

Data for the bi annual extended access data collection is collected from general practice as part of their contractual requirements. Since September 2016, the bi annual collection has been run four times, its results are an official statistic and as such are published on the NHS England statistics webpage.

Data for the GPFV monitoring tool is collected from CCGs on a monthly basis and is used to report progress of the approach set out in the NHS Operational Planning and Contracting Guidance and has been collected since August 2017.

At the latest collection, it was noted that there is a variation between the two surveys and therefore NHS England is keen for practices to ensure their bi annual extended access collection reflects the services their CCG have commissioned.

Document number: 3.0	Issue date: dd/mm/yyyy	Version number: 3.0
Status: Approved	Next review date: N/A	Page 5

¹ http://www.nhsemployers.org/gms201617

3 Where to submit the information

Practices will be expected to submit their information through the <u>Primary Care Web Tool (PCWT)</u>² on a bi-annual basis (twice a year). This system enables GP practices to submit data returns through dedicated modules and should be familiar to GP practices as it is already used for the annual practice e-declaration (eDEC) and the K041b Annual complaints data return. The module for the extended access collection is called "Biannual Extended Access".

Requests for paper submissions or responses via email will not be accepted.

In advance of completing your submission, please make sure the relevant staff members have access to the PCWT, in particular the Biannual Extended Access module. You can request this access through your local NHS England office (formerly known as area team). Access **cannot** be granted via the national bi annual mailbox.

New practice managers and/or senior partners should <u>register to use the primary care website</u>³. They should also contact their local NHS England office with notification of their new role and contact details and request access to submit mandatory data returns to NHS England. This will enable account permissions and access to the extended access module to be authorised on time for the collection.

For practice staff that input this data who are leaving their role, it is also advised that you contact your local NHS England office in advance of your move and request to be removed from the system to avoid being sent reminder emails.

4 What information is required to be submitted in the collection

All GP practices are required to submit responses to two sets of questions relating to:

- the extended access provision that the practice offers to their registered population and;
- ii. the extended access provision that the practice's population can utilise through the group (e.g. Network, Alliance, Federation) of which the practice is a member. There is a possibility that this type of extended access arrangement is provided at your own practice or from another location such as a hub site or another practice or a combination of these.

The first set of questions shown in Table 1 asks about the **extended access (hours)** offered at your own GP practice to your registered patient population.

Table 1 – questions about the practice

# Question	#	Question
------------	---	----------

² https://www.primarycare.nhs.uk

³ https://www.primarycare.nhs.uk/register.aspx

Document number: 3.0	Issue date: dd/mm/yyyy	Version number: 3.0
Status: Approved	Next review date: N/A	Page 6

#	Question
1	Do patients have the option of accessing pre-bookable Saturday appointments at your practice?
2	Do patients have the option of accessing pre-bookable Sunday appointments at your practice?
3	Do patients have the option of accessing pre-bookable early morning appointments (before 8.00am) during the week at your practice?
3a	If "YES" to question 3, on which weekdays does your practice provide pre-bookable early morning appointments? (Tick those that apply).
4	Do patients have the option of accessing pre-bookable evening appointments (after 6.30pm) during the week at your practice?
4a	If "YES" to question 4, on which weekdays does your practice provide pre-bookable evening appointments? (Tick those that apply).

The second set of questions is similar to the first set, however, instead of asking about the appointments available within your individual practice, they ask about **what appointments are available to your patient population elsewhere**. For example, if you are a member of a federation, network or group of practices and your patients can access an appointment at a hub site, you would be expected to include this in your answer. Practices are advised to ensure their response to this section matches the offer their CCG has commissioned locally (and will report in their GPFV monitoring tool submission).

Table 2 - questions about the group of which the practice is a member

#	Question
5	What is the name of the group of which your practice is a member,
	for example this could be the name of your federation?
6	Do patients have the option of accessing pre-bookable Saturday
	appointments through your group?
7	Do patients have the option of accessing pre-bookable Sunday
	appointments through your group?
8	Do patients have the option of accessing pre-bookable early
	morning appointments (before 8.00am) during the week through
	your group?
8a	If "YES" to question 8, on which weekdays does your group provide
	pre-bookable early morning appointments? (Tick those that apply).
9	Do patients have the option of accessing pre-bookable evening
	appointments (after 6.30pm) during the week through your group?
9a	If "YES" to question 9, on which weekdays does your group provide
	pre-bookable evening appointments? (Tick those that apply).

Practices are required to answer both sets of questions in order to give a view of what extended access is available to their patients. If your practice is not a member of a group, you should select 'No group' as the answer to question 5. In this instance responses will not be required for questions 6 to 9a inclusive.

Document number: 3.0	Issue date: dd/mm/yyyy	Version number: 3.0
Status: Approved	Next review date: N/A	Page 7

If your practice cannot find your group name in the drop down menu, you should enter the group name in the free text box and continue with the survey. Once the survey is completed, the submission process will be placed on hold whilst the NHS England central team verify the group name.

Once the group name has been verified, the survey will be released back to the practice for submission. The practice that completed the survey will receive an email confirming this has happened and will be required to finalise the submission.

The verification process may involve a member of the Improving Access to General Practice team approving the group name without question, or they may contact the practice to agree the group name. This may require the practice forwarding evidence of the group's formation and/or any contractual documentation.

In addition to the two sets of mandatory questions, there is one final question which is optional. Question 10 gives practices the opportunity to add additional comments, for example feedback on ease of survey completion or suggested improvements.

Table 3 – comments

#	Question
10	Do you have any additional comments?

5 Timeline of the survey

Submission of the extended access survey is mandatory as agreed in the 2016-17 contract negotiation.

The collection will be open for approximately one month every March and September until 2020. The dates of the collections are as below, these have been published since the guidance was launched in 2016 and practices are advised to note them in their calendars. Late submissions will not be accepted and practices will be noted as non-responders in the report.

When completing the survey, practices should provide information about the prebookable appointments that will be offered, or are expected to be offered, at the time of completion of the survey. If that week is exceptional for the practice, for example if the practice is unexpectedly closed, then the practice should complete the survey using the nearest 'normal' week as their survey week.

Practices should not include any short term extended access or extended sessions e.g. for specific patient groups, winter pressures. Answers to this survey should be based on a continuous service provided to all patients.

Table 4 - data collection timetable

Year	Collection window open	Collection window close
2016-17	3 October 2016	31 October 2016
2016-17	1 March 2017	31 March 2017
2017-18	1 September 2017	29 September 2017

Document number: 3.0	Issue date: dd/mm/yyyy	Version number: 3.0
Status: Approved	Next review date: N/A	Page 8

Year	Collection window open	Collection window close
2017-18	1 March 2018	30 March 2018
2018-19	3 September 2018	28 September 2018
2018-19	1 March 2019	29 March 2019
2019-20	2 September 2019	30 September 2019
2019-20	2 March 2020	31 March 2020
2020 -21	1 September 2020	30 September 2020
2020 -21	1 March 2021	31 March 2021

6 Publication of the data

Results of the survey are published on NHS England's <u>website</u>. Information on individual practices and aggregated reports are available to the public. Practices that have not completed their survey in the designated time will be marked as non-responders.

Presentation of information will include:

- A. Data Collected. For each GP practice the publication will show:
 - The response to each question;
 - An extended hour's classification for the practice. Each practice will be placed in a group calculated based on the answers provided, for example "full extended access".
- B. Aggregated reports. Nationally and for each CCG a report will show:
- Number and % practices cross-tabulated by extended access category;
- Number and % registered population cross-tabulated by extended access category;
- Number and % practices who submitted data;
- Number and % practices who are included in the measurements.

A secondary indicator called 'Primary care access' will also use this information. It will be published on MyNHS as part of the CCG Improvement and Assessment Framework (CCG IAF). This will show the proportion of practices in a CCG that provide full extended access.

7 Validation

Data will be extracted from the PCWT on the first working day after the collection window close date. Practices will be able to input or amend their submission up to the collection end date but will not be able to alter the information provided once the collection window has closed.

NHS England local offices (formerly known as area teams) and fully delegated CCGs in your local area will be able to monitor the collection and identify which practices have submitted or not as well as view submitted content. Contracting teams at NHS England local offices and fully delegated CCGs will not check or sign off the data

Document number: 3.0	Issue date: dd/mm/yyyy	Version number: 3.0
Status: Approved	Next review date: N/A	Page 9

prior to the collection end date, therefore practices should ensure the content submitted is accurate and correctly reflects the appointments available to their patient population.

The Biannual Extended Access PCWT module is designed to minimise data quality issues. Most questions are multiple choice with only certain responses available for selection; for example 'Yes' or 'No'. Practices will not be able to submit the survey until all mandatory questions are answered.

8 Definitions

The following definitions are provided to help practices answer the survey questions, which are detailed in section 3 of this document.

Keyword	Definition
Pre-bookable	This defines an appointment that is available for booking by patients in advance. They may do this through a variety of ways including online or by telephone. In advance
	means before the start time of the appointment.
Appointment	This is a scheduled slot with a GP, nurse or other member of general practice staff providing direct patient care.
Extended	Pre-bookable appointments offered to patients either in
access	the early morning, evening or at weekends. These
	appointments could be at an access hub, which may be in
	a different location.
Early morning	Early morning means before 08:00am on weekdays, Monday through to Friday.
Evening	Evening means after 6:30pm on weekdays, Monday through to Friday.
At your practice (Q1-4)	Extended access provided only to the practices' registered patients
Group /	A collaboration of GP practices set up to provide primary
Federation	care services to their practices' combined registered
(Q5-9)	population. An example of this is a federation that uses
	access hubs to provide the appointments.
Provider	Supplier of extended access provision commissioned by a CCG. This may be a private company or a group/federation of practices that have created a legal entity

9 Contacts

If you have any further questions about the extended access collection please contact the national NHS England Improving Access to General Practice team at england.biannual@nhs.net

For any other general enquiries regarding the Primary Care Web Tool please email info.primarycareweb@nhs.net

Document number: 3.0	Issue date: dd/mm/yyyy	Version number: 3.0
Status: Approved	Next review date: N/A	Page 10

For access to Biannual Extended Access module, please contact your local NHS England office (formerly known as area team). Access **cannot** be granted via the national bi annual mailbox.

10 Frequently asked questions

Purpose of the collection

1. We already have to report this information on a monthly basis via the Enhanced Service for extended hours. Do we really have to report the information again?

You may currently submit extended hours information to your CCG / local team; this survey however has been designed to take a snapshot of extended access provision nationally. NHS England has conducted a detailed review of this new collection to ensure burden is kept to a minimum.

2. Will we need to include the number of extended hour's appointments in the return?

The biannual data collection does not collect extended hours appointments, just the days that extended access provision is available to your patients early morning, evenings and weekends, at practice level and group/federation level.

3. What is the definition of pre-bookable appointments?

In the context of this survey, pre-bookable appointments are those that are available for patients to book in advance; this survey only asks about such appointments in the early morning, evenings and weekends.

4. Does the survey not audit the number of same day appointments i.e. those available to book on the day as well as those available before the date of the appointment?

No it does not. The survey collects the practice's and group's provision of extended access each day of the week.

5. Can we include data for an extended hours service we will be providing next month?

The survey is a snapshot of what is currently available; therefore future provision should not be included.

Accessing the survey

6. How do I access the survey?

Practices must respond to the survey twice per year, in March and September. The survey will be open for one month from 1 March and 1 September each year.

Document number: 3.0	Issue date: dd/mm/yyyy	Version number: 3.0
Status: Approved	Next review date: N/A	Page 11

On that date or during the collection month, log on to the <u>primary care web tool</u>. The collection is listed as a separate module.

If you cannot access the primary care web tool then email info.primarycareweb@nhs.net who will direct you to the relevant local office which can grant access to the tool.

If you can access the primary care web tool but not see the bi-annual collection module then email info.primarycareweb@nhs.net who will direct you to the relevant local office which can update your access rights.

7. In our local area, using winter pressures money, our CCG alongside the GP Federation are planning to open a Primary Care Access Hub on a Saturday morning that will be accessible via 111, however this is purely over the winter months and aimed at reducing attendances at our local A&E.

Do we also have to submit data for this service even though it is only a temporary service and is not yet up and running?

The example shown is a temporary service so should not be included in the collection.

8. If there are 10 practices in a group would you expect all the group members to reply to the survey?

Yes, the survey must be completed by all practices in England. We would expect 10 returns, one from each practice, stating their individual practice extended hours service (if any) and the same group name, which will be taken into account when reviewing the submissions.

9. I have just read that this collection is part of the GMS contract. As we are PMS do we have to complete this collection?

All regulations as part of the GMS contract are reproduced in the PMS contract; therefore all PMS practices are required to complete the survey.

10. We have been asked by a few of our practices whether or not they should include appointments offered by a separate provider who are offering prebookable appointments at weekends? These appointments are not based at their practice.

As long as this is not a temporary service then these appointments should be included. Care should be taken as to which section of the survey the practice answers in regard to this service. If:

• Each practice has a separate contract with the provider to provide extended access for their patient's only; then, the practice would complete questions 1-4.

Document number: 3.0	Issue date: dd/mm/yyyy	Version number: 3.0
Status: Approved	Next review date: N/A	Page 12

• If however the practices have grouped together to provide an extended access service to their combined patient population then each practice would complete guestions 5-9.

11. Does the return just require the extended hours DES appointments?

No, the practice should complete the survey for all extended access provision that the practice's patient population can access.

12.We are the medical officers for a local public school. We provide early morning and Saturday appointments for the pupils at the school, but not for our general patient population (the doctors do six clinics a week at the school on top of our standard provision at the surgery). Should I say that we do offer early and Saturday appointments or that we don't?

As the sessions provided at the school are not for the practice's entire population these should not be included in the practice's return.

13. Why are we being asked to report on seven day access when it isn't core contract? Not all of us provide extra sessions on a Saturday but do for later into the evening.

The NHS mandate includes a commitment for NHS England "to ensure everyone has easier and more convenient access to GP services, including appointments at evening and weekends".

The 2017/19 NHS Operational Planning and Contracting Guidance sets out the trajectory for delivering extended access as part of delivery of the General Practice Forward View.

Every six months this survey collects a snapshot of the developing national provision of extended access on evenings and weekends. Please complete the survey as accurately as possible noting when and where you provide extended access.

14. Is this collection different to the Workforce Minimum Dataset?

Yes it is. This survey and the WMDS use the Primary Care Web tool, but they are separate collections and it is mandatory to complete both.

Results of the collection

15.I work with a fully delegated CCG and have shared the information below with colleagues. They would like to know if they will have access to practice returns as they are working on their work force development and the collected information would be helpful for future work.

Yes, CCGs will have access once the survey is completed.

Document number: 3.0	Issue date: dd/mm/yyyy	Version number: 3.0
Status: Approved	Next review date: N/A	Page 13

16.I noted from the published guidance that the reports will be available on the NHS England website but CCGs will be able to access the aggregated reports only?

The first survey report was published on the <u>NHS England Statistics webpage</u> on 1 December 2016. Each subsequent survey will be available on the same page from the end of April, for the March collections, and October, for the September collections.

The survey report will show for each GP practice

- The response to each question;
- An extended hour's classification for the practice. Each practice will be classified by the level of extended access available to its patients based on the answers provided, for example "full extended access".

17.I have a question about the survey which is not covered in these FAQ's?

Please email your question to england.biannual@nhs.net and we will endeavour to respond within 48 hours.

Document number: 3.0	Issue date: dd/mm/yyyy	Version number: 3.0
Status: Approved	Next review date: N/A	Page 14