ENHANCED SERVICE SPECIFICATION

IMPROVING PATIENT ONLINE ACCESS

Introduction

1. This enhanced service has been designed by the NHS Commissioning Board (NHS CB) to facilitate improvements in the electronic interaction of registered patients with GP services (patient online access).

2. This enhanced service will facilitate patient online access through non-recurring annual rewards to GP practices for the successful preparation, establishment, adoption and exploitation of the electronic services to deliver online patient access during the period 2013/14 to at least 2014/15.

Aims

3. The aim of this enhanced service in 2013/14 is to establish patient online access to GP practice information systems as follows:

a) enabling and utilising electronic communications for booking of appointments;

b) enabling and utilising electronic communications for repeat prescriptions; and,

c) registering patients (issuing passwords and using verification practices) to enable patient online access.

4. The NHS CB intends to develop and adapt this enhanced service in 2014/15 to take into account the Government’s commitment for implementing secure online communication and viewing medical records (including test results and letters) and to further incentivise expansion of the services adopted in 2013/14.

5. The intended benefits for patients will be greater convenience, safety, efficiency and capacity for self-care.

Background

6. Following changes to the GP contract for 2013/14, the Secretary of State for Health has directed the NHS CB to offer GP practices the opportunity to carry out enhanced services that will improve patients’ online access to GP services.

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1 Reference to ‘GP practice’ in this specification refers to a provider of essential primary medical services to a registered list of patients under a General Medical Services, Personal Medical Services or Alternative Provider Medical Services contract.
7. The Government’s mandate to the NHS CB includes the aim of achieving a significant increase in the use of technology to help people manage their health and care. In particular, it is expected that by March 2015 everyone will be able to book GP appointments and order repeat prescriptions online and everyone who wishes will be able to get online access to their own health records held by their GP.

8. Establishing and improving patient online access to GP services is intended to benefit not only patients but also GP practices. The main changes needed for all parties to benefit will be in practice workflows, business processes and attitudes and behaviours, all of which will in themselves support the delivery of more efficient and effective services.

**Process**

9. The NHS CB will invite GP practices to participate in this enhanced service, with a view to encouraging practices to sign up by 30 June 2013. GP practices may choose to participate after this date, with the agreement of the NHS CB, but no later than 31 December 2013.

10. The NHS CB will record GP practices’ participation on the Calculating Quality Reporting Service (CQRS).

11. CQRS is replacing manual systems for calculating and reporting quality and outcomes for many GP services, including some enhanced services, where achievement data can be obtained from GP clinical systems or other sources. CQRS is more efficient and cost effective as it automates the returns process, saving time for GP practices and the NHS CB.

**Specification**

12. The requirements for GP practices participating in this enhanced service are as follows:

a) The GP practice puts in place arrangements necessary to make available the following electronic services for registered patients’ electronic interaction with the general practice’s information architecture:

i. electronic communication for booking (and cancelling) appointments; and,

ii. electronic communication for ordering repeat prescriptions.

b) The arrangements at ‘a’ shall include:

i. the GP practice proactively offering access to those services to registered patients;
ii. the GP practice providing the necessary information so that registered patients can avail themselves of such services with clear expectations; and,

iii. the GP practice registering patients who wish to avail themselves of such services by issuing passwords and verifying identity, as recommended by guidance from the Royal College of General Practitioners (RCGP).

Payments

13. The payment for participating GP practices will comprise three components, each representing a third of the investment available for this enhanced service in the 2013/14 financial year:

Component 1: A single payment of £0.14 per registered patient, which represents a payment of £985 for an average-sized GP practice (registered population 6,911) based on satisfactory evidence of enabling and utilisation of online booking; and,

Component 2: A further single payment of £0.14 per registered patient, which represents a payment of £985 for an average-sized GP practice (registered population 6,911) based on satisfactory evidence of enabling and utilisation of online repeat prescribing; and,

Component 3: A flat rate payment of £985 to each GP practice based on satisfactory evidence of a proportion of registered patients being issued with passwords for accessing services online.

Validation

14. The NHS CB intends to monitor and calculate payments under this enhanced service using CQRS wherever possible. This will minimise the reporting requirements for GP practices. CQRS will allow the payments referred to under paragraph 13 to be calculated using data extracted by the Health and Social Care Information Centre (HSCIC) from clinical system suppliers.

15. The evidence that the NHS CB is seeking to validate payments is defined in the table below and will be obtained from existing planned HSCIC data extraction from clinical system suppliers.

<table>
<thead>
<tr>
<th>Payment</th>
<th>Evidence</th>
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<tbody>
<tr>
<td>Component 1 - enabling and utilisation of online booking of appointments</td>
<td>HSCIC data confirms usage of online booking for appointments by the GP practice’s registered patients in at least one quarter of the financial year 2013/14.</td>
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Component 2 - enabling and utilisation of online requests for repeat prescribing

HSCIC data confirms online requests for repeat prescribing by the GP practice’s registered patients in at least one quarter of the financial year 2013/14.

Component 3 - proportion of registered patients being issued with passwords for accessing services online

Self declared field on CQRS confirming passwords issued to at least 5% of patients on the GP practice’s list by 31 March 2014, confirmed by standard, practice-available reports. This information may be verified as part of any annual GP practice visit.

16. Payments will be due to the GP practice once achievement has been confirmed. CQRS will support calculation of the relevant payments due under this enhanced service from 1 October 2013.

17. The NHS CB may, in circumstances it considers appropriate and reasonable, choose to make a payment on a pro-rata basis where in its opinion a GP practice has sought to achieve a component but been unable to do so due to circumstances beyond its reasonable control.

18. Administrative provisions relating to payments under this enhanced service are set out in the Annex.
Annex

Administrative provisions relating to payments under the improving patient online access enhanced service

1. Payments under the improving patient online access enhanced service are to be treated for accounting and superannuation purposes as gross income of the GP practice in the financial year.

2. The amount calculated as payment for the financial year falls due on the last day of the month following the month during which evidence of achievement has been confirmed (see paragraph 15 of the enhanced service specification).

3. Payments under the improving patient online access enhanced service, or any part thereof, will be made only if the GP practice satisfies the following conditions:
   a) the GP practice must make available to the NHS CB any information which the NHS CB needs, and the GP practice either has or could be reasonably expected to obtain, in order to establish whether the contractor has fulfilled its obligation under the enhanced service arrangements;
   b) the GP practice must make any returns required of it (whether computerised or otherwise) to the Exeter Registration System or CQRS, and do so promptly and fully; and,
   c) all information supplied pursuant to or in accordance with this paragraph must be accurate.

4. If the GP practice does not satisfy any of the above conditions, the NHS CB may, in appropriate circumstances, withhold payment of any, or any part of, a payment under this enhanced service that is otherwise payable.

Provisions relating to GP practices that terminate or withdraw from the enhanced service prior to 31 March 2014 (subject to the provisions below for termination attributable to a GP practice split or merger)

5. Where a GP practice has entered into an improving patient online access enhanced service but its primary medical care contract subsequently terminates or the GP practice withdraws from the enhanced service prior to 31 March 2014, the GP practice is entitled to a payment in respect of its participation, calculated in accordance with the provisions set out below. Any payment calculated will fall due on the last day of the month following the month during which the GP practice provides the information required.
6. In order to qualify for payment in respect of participation under the enhanced service, the GP practice must provide the NHS CB with evidence of achievement required under paragraph 15 of the enhanced service specification before payment will be made. This evidence should be provided in writing, within 28 days following the termination of the contract or the withdrawal from the enhanced services agreement.

7. The payment due to GP practices that terminate or withdraw from the enhanced service agreement prior to 31 March 2014 will be calculated as per the provisions of paragraph 13 of the enhanced service specification.

Provisions relating to GP practices who merge or split

8. Where two or more GP practices merge or are formed following a contractual split of a GP practice and as a result the registered population is combined or divided between new GP practice(s), the new GP practice(s) may enter into a new or varied agreement for improving patient online access under the enhanced service.

9. The enhanced service agreements with the GP practices that formed following a contractual merger, or the GP practice prior to contractual split, will be treated as having terminated and the entitlement of those GP practice(s) to any payment will be assessed on the basis of the provisions in paragraph 5 of this annex.

10. The entitlement to any payment(s) of the GP practice(s) formed following a contractual merger or split entering into the new or varied agreement for a improving patient online access will be assessed and any new arrangements that may be agreed in writing with the NHS CB will commence at the time the GP practice starts to provide such new arrangements.

11. Where that new or varied agreement is entered into and the new arrangements commence within 28 days of the new GP practice(s) being formed, the new arrangements are deemed to have commenced on the date of the new GP practice(s) being formed. Payment will be assessed in line with the enhanced service specification – subject to the provisions of paragraph 12 of this annex.

12. The NHS CB is not obliged to make a payment, or any part thereof, if payment has been already made or is payable to the previous GP practice(s) for participating in the enhanced service during that financial year.

Provisions relating to non-standard splits and mergers

13. Where the GP practice participating in the enhanced service is subject to a split or a merger and:
a) the application of the provisions set out above in respect of splits or mergers would, in the reasonable opinion of the NHS CB, lead to an inequitable result; or,

b) the circumstances of the split or merger are such that the provisions set out in this section cannot be applied,

the NHS CB may, in consultation with the GP practice or GP practices concerned, agree to such payments as in the NHS CB’s opinion are reasonable in all circumstances.

[ENDS]