

Appendix C

Standard 1 – Improving access to general practice

Rationale

Practices are required to open 8am – 6.30pm Monday to Friday however there are significant variations in relation to the clinician availability within these times. GP survey data, 83% of patients were able to get an appointment last time they tried compared to 85% nationally. 71% of patients described their overall experience of making appointments as good compared to 73% nationally. From review of Rotherham Walk-in centre data, approximately 30% of patients should have attended their own GP.

Delivery

Practices will be required to deliver the following:

1. Practices will be offer sufficient capacity to achieve
 - a. Urgent access within 1 working day
 - b. An appointment for patients within 5 days when their condition is routine.
 - c. Follow-up appointments within a working week of when the clinician identified i.e. if a 1 month follow-up, the appointment offered will be no more than 1 month and 5 working days.
2. It is a requirement that there is a minimum of 75 contacts per 1000 patients per week. Contacts may be provided by a GP (or training GP) and/or Nurse Practitioner (who is qualified to diagnose) and may be face to face or by telephone (triage followed by face to face consultation will be deemed as one episode).
3. Practices are required to have reviewed their capacity and demand and to ensure they are resourcing to meet this demand. This includes:
 - provision of capacity in alternative ways e.g. virtual (telephone) and using alternative roles.
 - 10 bookable sessions (am/pm)
 - offer access to both male and female clinicians.
4. Ensure acutely ill children under 12 are assessed by a clinician on the same day
5. Accept deflections from Yorkshire Ambulance Service (YAS).
6. Provide an in hours home visiting service for those patients presenting with an urgent clinical need requiring a home visit who live within the practice boundary but are registered with a practice outside of Rotherham CCG Boundary in accordance with GP choice requirements with associated payments (currently £60 per home visit). It is not anticipated that demands for such visits will exceed one per month.
7. Improve on patient survey measures

CCG support

- The CCG will supply and review, in collaboration with the Practice, appropriate data e.g. comparative, A&E attendance, OOHs data, variation data, Patient Survey and other related outcome data

KEY PERFORMANCE INDICATORS

1. Reduce minor A&E attendances 'in hours'
 - Reduce to peer cluster average
 - Or reduce by 1%
 - Or reduce by 10% (if already more than 1% above peer cluster average)
(Dependent on baseline data for each Practice)

2. Reduce OOH attendances
 - Reduce to peer cluster average
 - Or reduce by 1%
 - Or reduce by 10% (if already more than 1% above peer cluster average)
(Dependent on baseline data for each Practice)

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