



North Central London
Clinical Commissioning Group

'Enhanced Access' to General Practice

Stakeholder briefing

Updated: June 2022

Introduction

- This slide pack provides an update on upcoming national changes to ‘enhanced access’ to general practice. Enhanced access is the additional provision of appointments outside of a GP practice’s core hours of 8am to 6.30pm (e.g. evenings and weekends).
- From October 2022, Primary Care Networks (groups of local GP practices working together) will take over the responsibility for providing enhanced access appointments for the patients in their area.
- A national specification, released by NHS England at the end of March 2022, describes the enhanced access service that must be provided by Primary Care Networks (PCNs).
- There are some differences between the national specification and current provision. In London, while the required service level (number of minutes of care) remains the same, current service opening hours exceed those set out in the national specification. There is also a greater emphasis in the national specification on pre-bookable ‘planned’ care, and less emphasis on same-day care.
- However, we are committed to ensuring that the current level of provision and access that our residents have across the week is not affected as a result of these changes.
- We are working with NHS England and our PCNs to develop plans in line with the national specification. We will be engaging with patients, stakeholders and staff over the coming months.

How is 'enhanced access' currently provided across North Central London (NCL)?

There are currently two forms of 'enhanced access' provision in general practice:

- Extended Access Hubs (weekday evenings 6.30-8pm, and weekends and bank holidays 8am-8pm):
 - The CCG currently commissions a number of extended access GP hubs in each borough, which can be accessed by any registered patient in that borough. Currently the hubs are run at borough level by our GP Federations or other primary care providers.
 - They offer both pre-bookable and on the day appointments, and NHS 111 can also book patients in.
 - There are some differences by borough reflecting different patterns of demand, use and investment.
 - London is the only region to consistently offer Sunday provision.
- Extended Hours access:
 - GP practices receive direct funding to provide 'extended hours' to expand their own practice's core opening hours and provide additional early morning, evening and weekend sessions.
 - The timing of these sessions is determined by the practice and must include emergency, same day and pre-bookable appointments.

Why are things changing?

- When the new GP contract was issued in 2019, it included an intention to deliver a single, combined access offer through the Network Contract Directed Enhanced Service (DES), bringing together: Extended Hours access funding and CCG commissioned Extended Access Hub services under a single national specification. The national aim is to remove variability (across England).
- During the COVID pandemic, the planned start date for this was delayed. In March 2022 NHS England released the national specification for Enhanced Access and confirmed that this transition will take place in October 2022.
- From 1 October 2022, national funding for these two forms of access will be combined and given to Primary Care Networks (PCNs) to provide an enhanced access service for their patients.
- PCNs are groups of practices working together – with each other and with other partners - to deliver nationally set services (we have 32 PCNs in North Central London).
- The national specification describes the enhanced access service that must be provided by PCNs.
- PCNs need to submit plans to show how they will deliver this access for patients by 31 July 2022 (draft plans) and 31 August 2022 (final plans).
- PCNs are required to show that the plans that they develop are based on engagement with patients, are responsive to known patient views, and reflect the patient need in their area.
- The CCG is responsible for assuring the PCN plans and ensuring that they form part of a cohesive Integrated Care System (ICS) approach.

Summary of what's required in the national specification

What's similar to our current provision?:

- **Capacity:** the overall number of hours that need to be provided for patients is similar to what's provided now.
- **Hub locations:** need to be convenient for the PCN's patients to access and, as a minimum, equivalent to the current number of hub sites.
- **Type of appointment:** PCNs will need to provide a mixture of face-to-face and remote (telephone, video, online) appointments and the ability to pre-book appointments in advance, as well as booking on the same day.
- **Staff that people will see:** Appointments will continue to be available with GPs and Practice Nurses in addition to other roles.

Summary of what's required in the national specification

What are the differences?:

- **Hours of operation required:** 6.30-8pm Monday to Friday, 9-5pm Saturday. The national specification does not include any requirement for services to be provided on a Saturday evening 5-8pm, or on Sundays and Bank Holidays. This would be a change for patients in London, even though the overall quantity of provision would be similar to what patients have now.
- **NHS 111:** Removal of the 'ring-fenced' appointments for NHS 111 to book into, but much more focus on PCNs providing more pre-bookable appointments for their patients for more 'planned' care.
- **Telephony and IT** and how these work together between the GP practices within the primary care network may improve. The specification asks PCNs to make sure that all practices and the PCN have the ability to book into/cancel appointments, make referrals/request tests; view/update patients' records. This generally exceeds the digital capabilities of current provision.

Potential implications and how we are managing them

As this is a national specification, it does not fully reflect the approach that we have been taking in London and NCL over the last few years. Some of the risks we are aware of, are sharing with NHS England, and are trying to mitigate include:

- The national specification does not include any requirement for services to be provided on a Saturday evening 5-8pm, or on Sundays and Bank Holidays. This would be a change for patients in London, even though the overall quantity of provision and hours of care they would receive would be similar. This could impact services like 111 or emergency departments over the weekend, or increase demand on individual GP practices on Monday mornings. Removal of the 'ring-fenced' appointments for NHS 111 to book into could also have a similar impact. **The CCG is committed to maintaining provision on Sundays, Bank Holidays, and capacity for 111 direct booking and is currently looking at its commissioning options.**
- Timeframes do not allow for us or PCNs to engage as thoroughly as we would like and full consultation with patients if there are significant changes proposed would be very difficult within the national timeframe.
- A move away from a borough-wide model poses a risk of fragmentation and lack of clarity for patients and system partners about access points for general practice.
- Some workforce challenges – for example, PCNs may need additional staff to extend the working week, at a time when recruitment is particularly challenging.

To address these challenges, we are linking with NHS England and our London colleagues to escalate risks and develop some shared approaches for mitigating them.

We are also supporting our PCNs, along with our LMC and Federation colleagues, to consider the different options available for delivering the specification. We are also working with our Healthwatch colleagues and placing strong emphasis on responding to known patient feedback on access to services alongside supporting PCNs to engage with patient groups where possible.

Timeline and PCN plans

The timeframes for these changes have been set nationally and include:

- National specification for what PCNs need to deliver – 31 March 2022
- PCNs to submit draft proposals for how they will deliver enhanced access for their patients – 31 July 2022
- PCNs and CCG to agree final plans - 31 August 2022
- PCNs to start delivering the new service – 1 October 2022

PCN plans will need to set out a number of things including: how their plans have been informed by engagement, what services will be provided, the mix of appointment types available, where the location for face-to-face appointments will be and any plans they have to sub-contract services. PCNs will also describe how they will communicate with patients and the public about the 'enhanced access' service – how it's accessed, what is available and when – through multiple routes.

The CCG is responsible for assuring the PCN plans and ensuring that they form part of a cohesive Integrated Care System (ICS) approach. It is expected that a national template will be issued for PCNs to use to complete their plans, and commissioners will need to describe the principles and criteria they are using to assure plans locally. Commissioners across London are working together with London region to develop a consistent approach.

How are we approaching the period to October 22?

This work is PCN-driven with support from CCG borough teams, underpinned by overarching NCL support and transparency regarding the approach to assurance. We will hold two NCL-wide workshops (May and June) to support PCNs in their planning, including a focus on consistency of service development, with the sessions anchored around understanding and meeting patient needs.

PCNs

- Develop local enhanced access plans that meet the requirements in the national spec and deliver high quality services to local populations.
- Ensure local patient voices are sought and their feedback is reflected in local plans.
- Take on learning and feedback from existing service providers.
- Two-way collaboration with borough partnerships to ensure engagement and fit with the system.

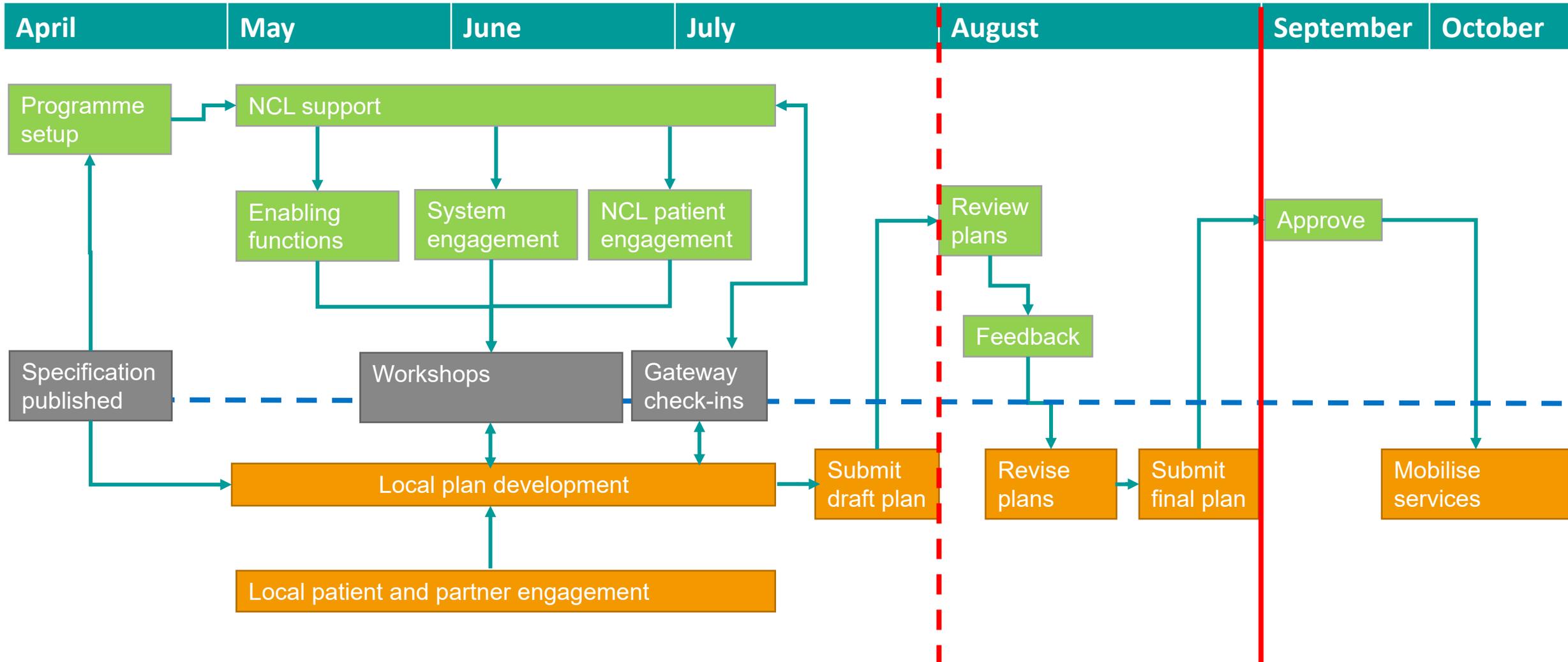
Borough teams and partnerships

- Offer support to PCNs to develop local plans and to situate these in local context.
- Adapt the NCL vision and ambition to local context and geography.
- Take a borough-wide view on PCN plans in the round, and work with the wider system to land these.
- Borough conversations with PCNs and current providers – informed by NCL approach.
- Feeding back issues and risks to NCL team early.

NCL system

- Collaborate with London ICSs and region on transparent criteria and a sign-off process for PCN plans.
- Set ambition for access across NCL informed by patient engagement.
- Support PCNs with setting up the necessary enablers to service delivery.
- Manage strategic risks and issues for the system in collaboration with system partners, including PCNs.
- Alignment and engagement with wider NCL system.

High-level roadmap



Communications and engagement plan

- National timescales mean the window for engagement is very tight, with responsibility shared between PCNs (responsibility to show how patient views have informed their proposed plans) and CCGs (responsibility to consult if PCN plans differ ‘significantly’ from current provision).
- An engagement plan has been developed which outlines our proposed approach, including how we will:
 - **Use known patient feedback**, insights, experiences and current service usage data to inform the development of plans, sharing this with PCNs at an early stage in the process.
 - **Provide support and opportunities for PCNs to engage residents** – e.g. through borough patient groups.
 - **Communicate and engage with a range of other partners and stakeholders** – this will include agreeing who is best placed to engage with each audience e.g. PCNs, borough teams or NCL colleagues. Consideration will also be given to how we can join up with those leading on the NHS 111 service re-procurement, as there are many shared patient groups and stakeholders who we both need to engage over the coming months.
 - **Involve patients or their representatives in our approach to assuring PCN plans**
 - **Consider what additional capacity and support is required for engagement over this period** – either where there are gaps in our existing knowledge or to help PCNs engage on the proposed service models they develop.

Feedback, questions and key contacts

- We hope this slide deck has been a helpful introduction to what's happening with enhanced access. We will be talking to lots of different stakeholders and partners over the coming months.
- In the meantime, if you have any comments or questions, or you would like to come and talk to us about this further, please let us know by emailing: nclccg.communications@nhs.net
- You can also contact the CCG colleagues listed below who would be happy to provide more information:

NCL:

- Becky Kingsnorth, Enhanced Access Programme Lead (rebeccakingsnorth@nhs.net)
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