

Annex 4

Specification for a directed enhanced service in England: access to primary care

Introduction

1. It is the Government's continuing priority to improve patient access to primary medical care in England.
2. PCTs will have a duty in 2006/07 to work with local practices (and other providers) to develop and implement plans to secure improvements in access. This DES focuses on four key dimensions of access to general practice for patients:
 - (i) opportunity to consult a GP within 2 working days
 - (ii) opportunity to book appointments more than 48 hours in advance
 - (iii) ease of telephone access to the practice
 - (iv) opportunity to be seen by a practitioner of preference
3. This specification is for 2006/07 and will be reviewed for 2007/08. The maximum investment for 2006/07 will be the value of 50 QOF points associated with access and the value of the 2005/06 access DES. This equates to £108 million for England.
4. Payments to participating general practices will comprise two components:
 - **Component one:** This will represent one third of the total investment available equivalent to £0.69 per registered patient. Half of this will be awarded to practices upon agreement of a written practice plan demonstrating how the practice will work towards delivery of access areas in respect of the first three dimensions – i.e. within two working days, advance booking and ease of telephone access. The other half will be awarded for upon receipt by the PCT of the practice's written commitment to continue participation in the monthly Primary Care Access Survey (PCAS). For 2006/07 the PCAS survey will be developed to include a number of improvements including randomised survey date and third available appointment. If the practice does not subsequently participate in PCAS then the appropriate amount of the component one payment will be repayable by the practice.
 - **Component two:** This will be paid at the end of the year based on the results of a national patient experience survey which will be conducted in quarter four seeking feedback from patients on all four access dimensions. This will represent two thirds of the total

investment available as shown below.

5. From 2007 onwards the focus will continue on improving access to general practice. However, this current DES will be reviewed in the light of experience, developing policies and the appropriateness of the award thresholds.

The Survey

6. The Department of Health is developing a new national patient experience survey to help understand how well Government priorities in primary care are being implemented across England. Initially, this survey will focus on access to general practice and the offer of choice of secondary care provider (the subject of a separate enhanced service).
7. Currently, the QOF provides for a practice survey to be carried out that has a focus on patient access. The ultimate intention is to incorporate this survey into the national patient experience survey. However, given the timescale for 2006/07, the QOF patient questionnaire will remain in place for a further year.

Validation and Payment

8. The budget for component two will be weighted as follows:

Target Area	Weighting	Budget	£ per head
48 Hour	30%	£21.6m	£0.41
Advance Booking	30%	£21.6m	£0.41
Telephone Access	30%	£21.6m	£0.41
Preferred GP	10%	£7.2m	£0.14

(n.b. £ per head based on total population of 52.5m)

9. The proposed threshold targets and associated rewards as a percentage of the above are attached at Appendix A. These are based on a number of principles including:
 - The financial reward for achieving the minimum satisfaction levels for each target recognises the up-front work which practices may need to undertake to start providing these levels of service
 - The maximum reward of 100% for each target is payable at a satisfaction level below 100% to allow for the principle of continuous improvement in future years

10. The minimum and higher satisfaction levels for reward payments are as follows:

	Minimum satisfaction level at which reward becomes payable	% of maximum possible reward payable for minimum satisfaction level	Satisfaction level at which 100% of reward becomes payable
Within 2 working days	50%	50	90%
Advance Booking	40%	40	90%
Telephone Access	30%	50	80%
Practitioner of Choice	20%	40	80%

11. Appendix A attached provides details of the % financial reward payable to practices for patient satisfaction levels between the minimum and maximum.
13. Payments to practices will be based upon practice list size in line with the £ per head figures shown above.
12. In line with the principle of continuous improvement agreed across other areas of the nGMS contract, the above performance thresholds will be realigned annually to incentivise continued improvement year-on-year.
13. Payments will be made manually by PCOs based on the survey results as soon as they are received. For planning purposes, PCTs should note that this may be during the first quarter of the following financial year.

Satisfaction Rate%	16	18	20	22	24	26	28	30	32	34	36	38	40	42	44	46	48	50	52	54	56	58	60
48 Hr	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	50	52.5	55.0	57.5	60.0	62.5
Advance Booking	0	0	0	0	0	0	0	0	0	0	0	0	40	42.4	44.8	47.2	49.6	52.0	54.4	56.8	59.2	61.6	64.0
Telephone Access	0	0	0	0	0	0	0	50	52	54	56	58	60	62	64	66	68	70	72	74	76	78	80
Preferred GP	0	0	40	42	44	46	48	50	52	54	56	58	60	62	64	66	68	70	72	74	76	78	80

Satisfaction Rate	62	64	66	68	70	72	74	76	78	80	82	84	86	88	90	92	94	96	98	100	
48 Hr	65.0	67.5	70.0	72.5	75.0	77.5	80.0	82.5	85.0	87.5	90.0	92.5	95.0	97.5	100	100	100	100	100	100	100
Advance Booking	66.4	68.8	71.2	73.6	76.0	78.4	80.8	83.2	85.6	88.0	90.4	92.8	95.2	97.6	100	100	100	100	100	100	100
Telephone Access	82	84	86	88	90	92	94	96	98	100	100	100	100	100	100	100	100	100	100	100	100
Preferred GP	82	84	86	88	90	92	94	96	98	100	100	100	100	100	100	100	100	100	100	100	100