

OSC Paper on Outcome Standards - Access

Purpose

The purpose of this paper is to consider the GP Outcome standards as listed below:

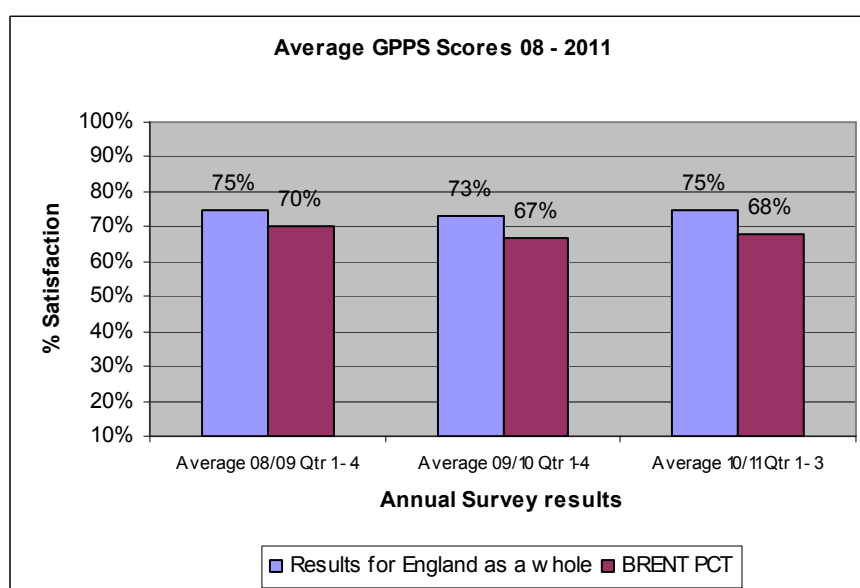
- Satisfaction with overall care received
- Ability to see a specific GP or Practice Nurse if required
- Advanced appointments
- Satisfaction with opening hours
- Ease of getting through on the phone

Introduction

The GP Outcome Standards listed above are measured and compared nationally by the National GP Patient Survey (GPPS). The GPPS is sent out to randomly chosen registered patients across England. The results for NHS Brent in 2009/10 were poor compared with other London PCTs and England overall. NHS Brent considered ways of improving GP Access for the patients of Brent and an intensive programme of support was developed Access, Choice and Experience (ACE) programme to improve these five key areas in all 71 Brent practices.

This report will consider the contents, format and outcomes of the ACE programme so far and its impact on the GPPS scores. It will also identify the improvements in GP Practices that have occurred as a result of implementing the ACE Programme. The full impact of the ACE Programme is not expected until Qtr 4 2010/11 (results available in June 2011).

Below are the results for NHS Brent compared to England for 2008/09 – Qtr3 2010/11 for 'Over all Satisfaction' (Average of the five outcomes). There had been a noticeable drop in GPPS scores from 2008/09 to 2009/10 and NHS Brent developed the ACE programme to support practice and consortium wide improvement.



The ACE Programme

GPs and practice managers attended the ACE Programme Launch in January 2011. The event showed where NHS Brent was situated in relation to the GPPS scores for Access and where individual practices were situated in relation to each other using the five GP Outcomes as a measure of access. The programme has been delivered by both the ACE team and the GP Consortia. The programme team have developed close links with the consortia leads and used this as a method for continuing to drive the changes.

The programme was developed to help practices improve in the 5 GP Outcome areas:

- Able to get an appointment quickly
- Able to book ahead
- Able to get through on the phone
- Able to see preferred GP
- Satisfaction with opening times

Below are the ACE Programme activities and outcomes for each of these areas.

Able to get an Appointment quickly

	Qtr3 09/10 ¹	Qtr3 10/11 ²
England	80%	79%
NHS Brent	74%	73%

A Demand and Capacity survey was undertaken by 68 of the 71 practices. The demand study measured those patients that were unable to get an appointment within 48hrs due to a lack of capacity. Also looked at was the ratio of 'Book on the day' appointments compared to the 'Book ahead appointments'. It was found those that had good results for 'able to get an appointment quickly' in general had a ratio of 2:1, book on the day to book ahead appointments. The information collated was pulled into a pack and fed back to practices with a view to practices reviewing their appointment systems and making changes where possible. In October 2010 Brent practices were offering 0.7 'book on the day' appointments for every 'book ahead' appointment. In March 2011, Brent practices are now offering 0.9 'book on the day' appointments for every 'book ahead'.

The programme used a standard measure of the number of appointments that should be available per week of 72 appointments per 1,000 patients per week³. In October 2010, NHS Brent was offering 62 Appointments per 1,000 patients per week. Following a recent capacity study (March 2011) NHS Brent practices we are now offering an average of 79 appointments per 1,000 patients per week.

Able to book ahead

	Qtr3 09/10	Qtr3 10/11
England	71%	71%
NHS Brent	63%	65%

The data collected from practices at the start of the programme showed that 63% of practices were offering patients the ability to book a minimum of 4 weeks ahead. This has now increased to 87%. The practices that do not offer 4 weeks are currently offering 2 weeks. This increase in the ability to book ahead is due to the implementation of Text appointment reminders for patients. Many practices felt that offering patients the ability to book up to 4 weeks ahead was not a sensible as many patients forget their appointment and the Did Not Attend (DNA) rate would increase. By implementing a text reminder service, we were able to encourage practices to extend their appointment. It is also expected that DNAs will reduce due to the reminder service. There is already evidence of this. In a particular practice that had a 7.8% DNA rate equating to £1,575 per month of lost clinical time, within 4 months of implementing the text reminder service DNAs have reduced to 2.4%. This equates to a saving of £1,080 per month. The practice expects this to reduce further as more patients mobile telephone numbers are collected.

Able to get through on the phone

	Qtr3 09/10	Qtr3 10/11
England	68%	69%
NHS Brent	61%	63%

NHS Brent's average score in the GPPS for ease of getting through on the phone in Qtr 3 2009/10 was 61%. The ACE Programme has assisted a number of practices in increasing the number of lines or changing their telephone supplier. The number of telephone lines patients can call in was reviewed and compared this to the number of staff on duty at peak times. A number of practices have rearranged members of staff to ensure that lines are covered. Also some practices have implemented telephone software that allows patients to cancel or book appointments when the lines are busy. The GPPS results for quarter 3 2010/11 have increased to 63%.

To try and alleviate the number of calls and visits to practices and in response to the GPPS where 23% of patients expressed an interest in using on-line services to book and cancel appointments or to order repeat scripts, the ACE Programme has implemented online booking of appointments and repeat prescriptions for 69% of the EMIS LV Practices. For practices using Vision, 60% of practices will have on line booking within two months.

Able to see preferred GP

	Qtr3 09/10	Qtr3 10/11
England	75%	74%
NHS Brent	66%	64%

NHS Brent scored 66% in 2009/10 for 'able to see a preferred GP' and in Qtr 3 for 2010/11 this has fallen to 64% against a national average of 74%. NHS Brent, like a number of London GP Practices, has a high proportion of single handed practices, the ACE programme recommends to practices that they should inform their patients when either a male or female GP is available and that single handed practices should be able to offer this choice on given days for book ahead / routine slots when using locums. Explaining to patients the appointment system and the fact that many GPs work part time is a big part of the education of patients with regards to seeing their preferred GP.

Satisfaction with opening Hours

	Qtr3 09/10	Qtr3 10/11
England	81%	81%
NHS Brent	75%	75%

In October 2010, the average weekly opening hours for a Brent practice was 42hrs per week. Following some close working with Cluster leads this has now increased to an average of 45 hours per week.

Practices have been asked to consider the availability of practice staff during core hours and whether patients have access to practice staff both face to face and by the telephone. 70% of practices are available face to face during core hours (45hours per week) and 68% are also available by phone. Many single handed practices close over the lunch period and it has proved difficult to encourage change in these practices. The Ace programme and GP commissioning leads are still working with these practices to try to implement change and improve access for the patients. 91% of practices in Brent are offering Extended Hours either early mornings, or late evenings and some are offering Saturday mornings

Choice

Choose and Book utilisation	
March 2010	23%
March 2011	41%

The Ace programme is also responsible for improving the GP practice utilisation of Choose and Book for hospital outpatients. There are 67 practices regularly using Choose and book to refer patients to the acute service. Brent has also able to refer all two week cancer referrals via choose and Book and all antenatal referrals.

Satisfaction with overall care received at surgery.

	Qtr3 09/10 ¹	Qtr3 10/11 ²
England	90%	90%
NHS Brent	82%	82%

Patient satisfaction with 'overall care received at the surgery' has remained unchanged both in Brent and nationally. We hope that the following measures delivered through the Ace programme will improve patient satisfaction captured through the survey in Qtr 4:

- text reminders
- on-line booking
- better patient information: practice websites, Life Channel information screens, Road shows, opening hours and on call number
- longer Opening Hours, increased appointment availability
- customer services training for all Brent Practice staff

For a summary of ACE Programme outcomes please see appendix 1. Appendix 2 compares the scores by practice and consortium for Qtr3 2009/10 and Qtr3 2010/11. Appendix 3 identifies the difference in scores between 2008 and Qtr 3 2010/11.

ACE Programme – Marketing Campaign January 2011 – March 2011

To ensure the residents of Brent are aware of the changes and improvements being made by the GPs in Brent, a marketing campaign was run across the borough. This included poster advertisements and road shows in local supermarkets promoting the survey and the ACE Programme. A leaflet explaining the work that had been taking place was placed in the Brent magazine for circulation to every household in Brent. This was timed to coincide with the mailing of GPPS Qtr4 to selected patients to encourage patients to return the questionnaire and be aware of practice improvements.

The ACE Team have also attended Practice and Cluster Patient Participation Groups to inform patients of the changes and to give them an opportunity to discuss access and experience of primary care at their particular surgeries.

Practices were encouraged to inform patients of the specific changes they had made by using posters and running in house surveys to achieve real time feedback.

The Ace programme has held a number of workshops to assist practices in making changes to their procedures and processes. All practice staff including GPs were invited to attend training specifically designed for primary care on customer services. 90% of practice staff attended.

Conclusion

Overall the ACE programme can demonstrate that it has supported practices to understand their access better and agree and implement an improvement plan. The approach used by the ACE programme has been welcomed by practices and consortia. NHS Brent and Clinical Directors are considering how this approach could be replicated for other areas in need of improvement e.g., screening uptake.

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23rd March 2011

Appendix One

Detailed Breakdown of Access Programme Oct 2009 - March 2011

NHS Brent	Baseline Practices	Oct-10	Mar-11
ACE Programme Activities			
Signed up to programme	0	70	70
Demand Study started baseline	0	68	68
Capacity Study done baseline	0	68	68
Data Analysed	0	37	67
Data presented back to practice	0	31	65
DNA rates	18	43	64
A&E reports	0	71	71
Telephone report	0	12	22
Extended Hours	58	58	65
Agreed Development Plans	0	2	68
Mirror workshop	0	66	66
Capacity study done post ACE programme	0	0	64
Data Analysed post ACE Programme	0	0	64
Utilising Choose and Book	53	57	69
Practices with appointments per week recorded	0	68	70
Average number of appts per 1000 pts per week	57	57	79
Able to book 4 weeks in advance	30	30	62
Able to answer telephone in 5 rings	59	59	TBC
Open 45hrs + per week - access to receptionist face to face & phone	42	52	60
SMS messaging	3	35	58
Practice website	18	18	33
On-line Booking appointment / scripts	1	15	43
Life Channel / Info screens	3	49	61
Real Time patient experience	0	33	46
Patient Participation Group	33	33	54
Patient Participation Group Access & GPPS Presentation	0	0	12
Customer service training	0	29	71
Standard telephone message	36	36	50
OOH Voice mail message quality 1	10	10	51
OOH Poster visible	0	23	69
NHS Choices updated by practice	32	32	56

