

Appendix 1

The Task Group has identified the following access and treatment standards based on the experience of patients, which should be used as a minimum:

- i. Reception and telephone access for all patient needs during opening hours
Contractually all GP practices are required to provide access during core hours of operation Mon-Fri: 8am to 6.30pm except Bank Holidays
- ii. Agreed arrangements for evening and weekend access communicated to patients
Practice telephone messages have been audited and provide clarity on accessing services outside core hours
- iii. Reception telephone answered within a maximum time frame or call back facility available (subject to the move to cloud based telephony systems)
Recent installation of cloud based telephony has enabled practices to better assess call volumes and allocate staff accordingly.
- iv. Appointment and prescription requests addressed within a maximum time frame – regardless of whether request is made via telephone, online or in person
Prescriptions issued within 72 hours of request is a standard requirement in general practice. Practices will be focusing on same day assessment models from June 2023.
- v. Patients make one call only to make an appointment during core hours (subject to the move to cloud based telephony systems)
Practices are able to directly book patients into Enhanced Access Hubs
- vi. Appropriately trained clinicians should be involved in all stages of the triage process
On-going training and development in place to support upskilling of staff
- vii. Patients updated on all further action taken in respect of requests, appointments and/or treatments where these are carried out by the practice
Patient empowerment will form basis of action plan for 2023. Access to patient notes and two way communicating through IT systems aimed at ensuring patients are kept informed
- viii. Referrals to secondary care are clinically appropriate and in accordance with any agreed clinical pathways and referral protocols – patients are updated at each stage of the referral
As above – where information is available patients will be able to access own notes.
- ix. For rapid access - conversation with registered clinician within fixed period in advance; emergency and urgent needs triaged within four hours. Practices clearly set out the process for routine, rapid and emergency access by agreement with NHS 111 and PPGs – this should be made clear on practice websites
Emergency and urgent needs triaged by 111 – who are able to book patients into patients own GP practice
- x. Flexible appointment types should be offered and booked in line with clinical need and patient's preference, including face-to-face, telephone, remote/digital and home visits – the range of appointment types should be made clear on practice websites
Practices on average offer two thirds face to face appointment, with one third remote. NHS E publish monthly statistics on mode of consultation.
- xi. Bookings available to patients up to four weeks in advance for routine care and patients are made aware of process for cancelling and rebooking routine care appointments
Advanced booking in place and patients are also able to book appointments online or within Access Hubs in advance.
- xii. Registration at any GP practice, where this is possible with no requirement for address, immigration status, identification or NHS number – with digital and face-to-face registration options for new patients

Patients are able to register without need for documentation, the NHS App 'Register with a GP Service' (<https://www.nhs.uk/nhs-services/gps/how-to-register-with-a-gp-surgery/>) further simplifies the registration process.

- xiii. *Patients have their digital literacy and access to digital devices recorded on their patient file and taken into account when treatment is given
In development – Snowmed code awaited*
- xiv. *Consent for digital communication and services and recorded in patient file
Recorded informally currently at practiced level*
- xv. *Guidance on online consultation service and digital communication on practice website in easy to use language
Speech to text recently introduced for Patches on line consultation platform. Further ease of use of digital platforms planned for 2023.*
- xvi. *Patients to be able to communicate with GP practice via online consultation system and secure online messaging
In place through EMIS and Patches on line systems*
- xvii. *Each practice works towards developing consultant nurse practitioner and prescriber skills
Recruitment issues and suitable trained staff for nursing roles previously highlighted.*
- xviii. *Non-clinical staff should be available at each GP practice e.g. social prescribers – availability made clear on practice websites
Staff employed at practice are recorded on GP websites*
- xix. *Treatment plans for all patient care agreed with and shared with patients
High risk and those patients requiring Care plans receive care planning*
- xx. *Prescription medicines issued where clinically effective and cost-effective, ensuring patients are engaged in the process at each stage by their clinical team
The Prescribing team work closely with GP practices to support effective and cost efficient prescribing*
- xxi. *Newly registered patients should receive information on GP practice and NHS England complaints procedures, as well as local complaints and advocacy services
Greener agenda supports the publication of complaints and advocacy services on line through GP and NHS E websites*