

# Primary Care Transformation

The National General  
Practice Improvement  
Programme

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# The primary care transformation team

## Who we are

- We are clinically led and are a team with deep roots and experience in general practice.
- We're built on good foundations. The previous national Accelerate improvement programme and Time for Care programmes provided 'hands-on' support to practices:
  - 99% of practices rated the support provided by the Accelerate programme as 'good' or 'excellent'\*
  - 91% of practices would recommend the programme to peers\*

## What we do

- We are evidence led.
- We find, evaluate, codify and share good practice.
- We support practices, PCNs and ICSs with guidance and training to improve and to realise the biggest benefit in the shortest time.
- We support collaboration, active learning and whole system improvement.
- We generate evidence to support the development of highly usable and accessible digital tools to support general practice transformation.

# The current 'model' of general practice

## For patients the current 'model' is:

- **Confusing**; things have changed and I'm not sure how it works now
- **Frustrating**; the 8am rush, told to call back tomorrow
- **Worrying**; will I get an appointment when I need one
- **Unfair**: first come first served allocation of appointments
- *Reflected in declining patient satisfaction with access*

## For practices and staff the current 'model'

- Carries a sustainability risk in the face of increasing demand-capacity gap and risk of staff burnout.
- Carries an increased clinical risk from higher volumes and more complex patient needs.
- Means we're not able to see all demand and plan workload as effectively as we'd like.
- Means we're often not able to understand patient needs fully at the point of request.
- Means we're often not able to prioritise easily in a 'first come first served' approach
- These challenges are unequally distributed (eg. practices in deprived areas feeling them more intensely).

# The 'modern model of general practice' supports practices to be fairer, safer and more sustainable

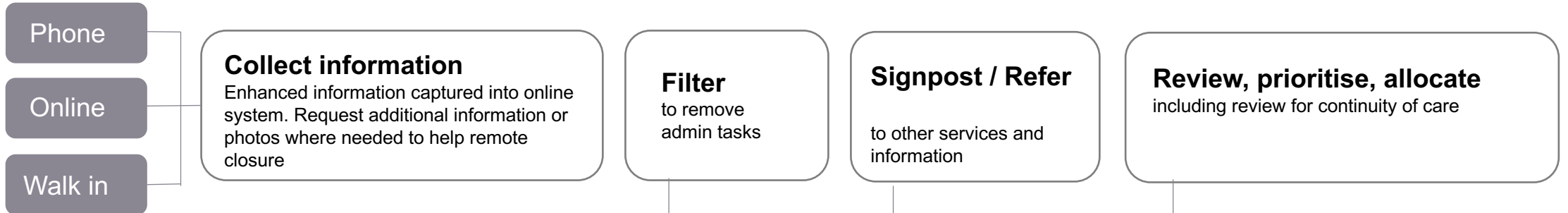
## Objectives

See and understand all expressed demand and plan

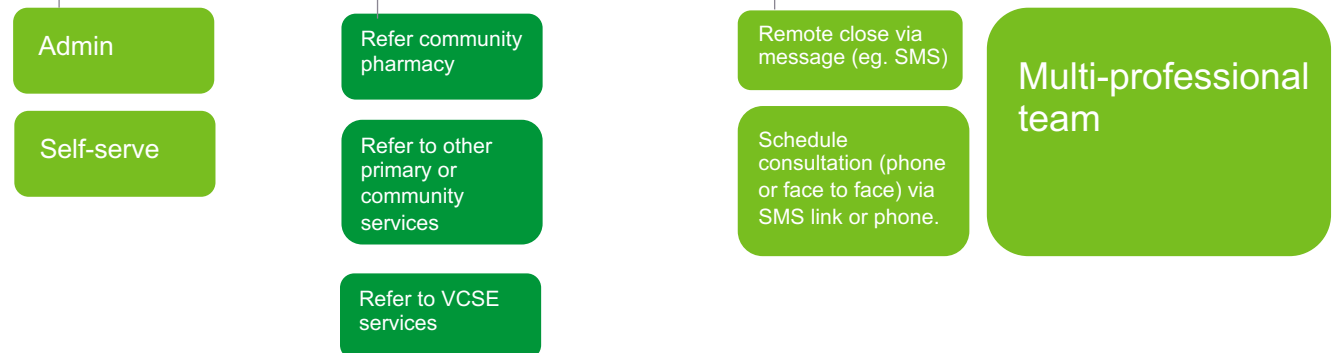
Reduce avoidable appointments and support safer more equitable allocation of capacity

Make full use of a multi-professional team and improve the working environment

## Process



## Intervention



# Value created from 'new model'

## Releasing GP time by identifying 'avoidable GP appointments'

- Opportunity identified with 16% of appointments being potentially avoidable.
- In the first phase they have managed to release on average 2.5% of GP appointments and 3.1% of nursing time were identified as avoidable and released

Elite Programme, analysis of 56,900 appointments).

## Referral to pharmacy (CPCS)

- April 2022 – Feb 2023, 450,192 GP CPCS referrals were completed
- 4,534 practices have made at least one completed referral.
- Only 6% of referrals escalated back to general practice.

## Reducing consultation frequency through improved continuity of care

- The duration between appointments is longer when patients see the Doctor they have seen most frequently over the last 2 years.
- Estimated 5.2% reduction on consultation numbers.
- The benefit is largest for older patients, those with multiple chronic conditions and mental health conditions.

## Patient experience improved with modern general practice model

- 72% of patient contact in 'digital first' practices studied was started online.
- Patient preference for a face-to-face consultation was 12%.
- Practice resolved requests by telephone (50%), by message (35%), 15% face to face.
- Patient satisfaction is 6 percentage points higher than national average.

## Upgrading to cloud based telephony

- 90% would recommend the change
- 60% agreed the number of complaints (about getting through) have reduced
- 70% agreed it made it easier to manage their workload

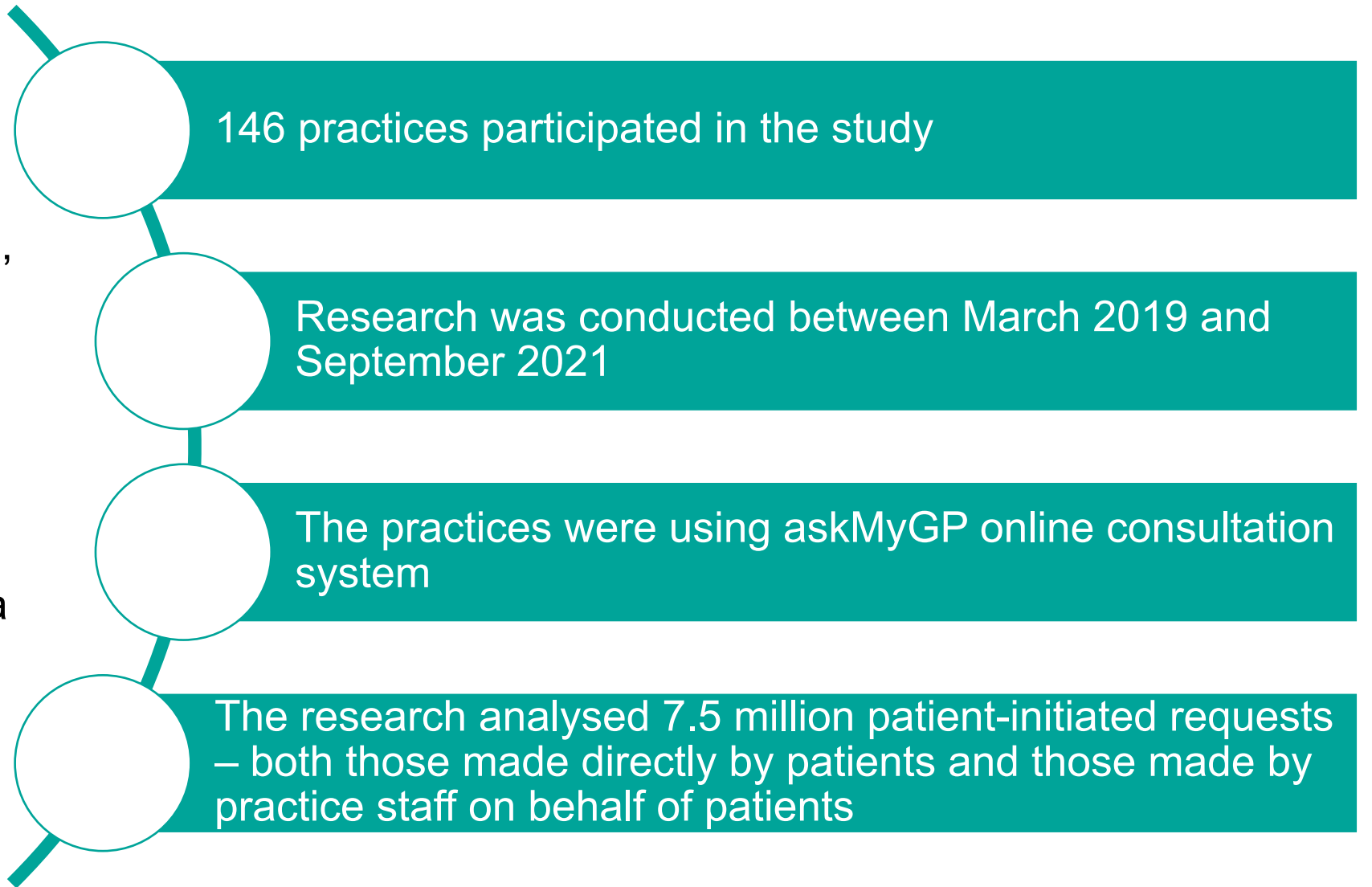
NHS Cloud based telephony pilots with 122 practices serving 1.1 million patients.

### Sources:

- <https://www.health.org.uk/publications/access-to-and-delivery-of-general-practice-services>
- [Continuity of Care Increases Physician Productivity in Primary Care by Harshita Kajaria-Montag, Michael Freeman, Stefan Scholtes :: SSRN](#)
- Pilot of ELITE Programme using data to identify avoidable GP appointments – internal NHS study
- [Access to and delivery of general practice servicesA study of patients at practices using digital and online tools](#). Improvement Analytics Unit
- NHS Cloud based telephony pilots with 122 practices serving 1.1 million patients. Internal NHS study.

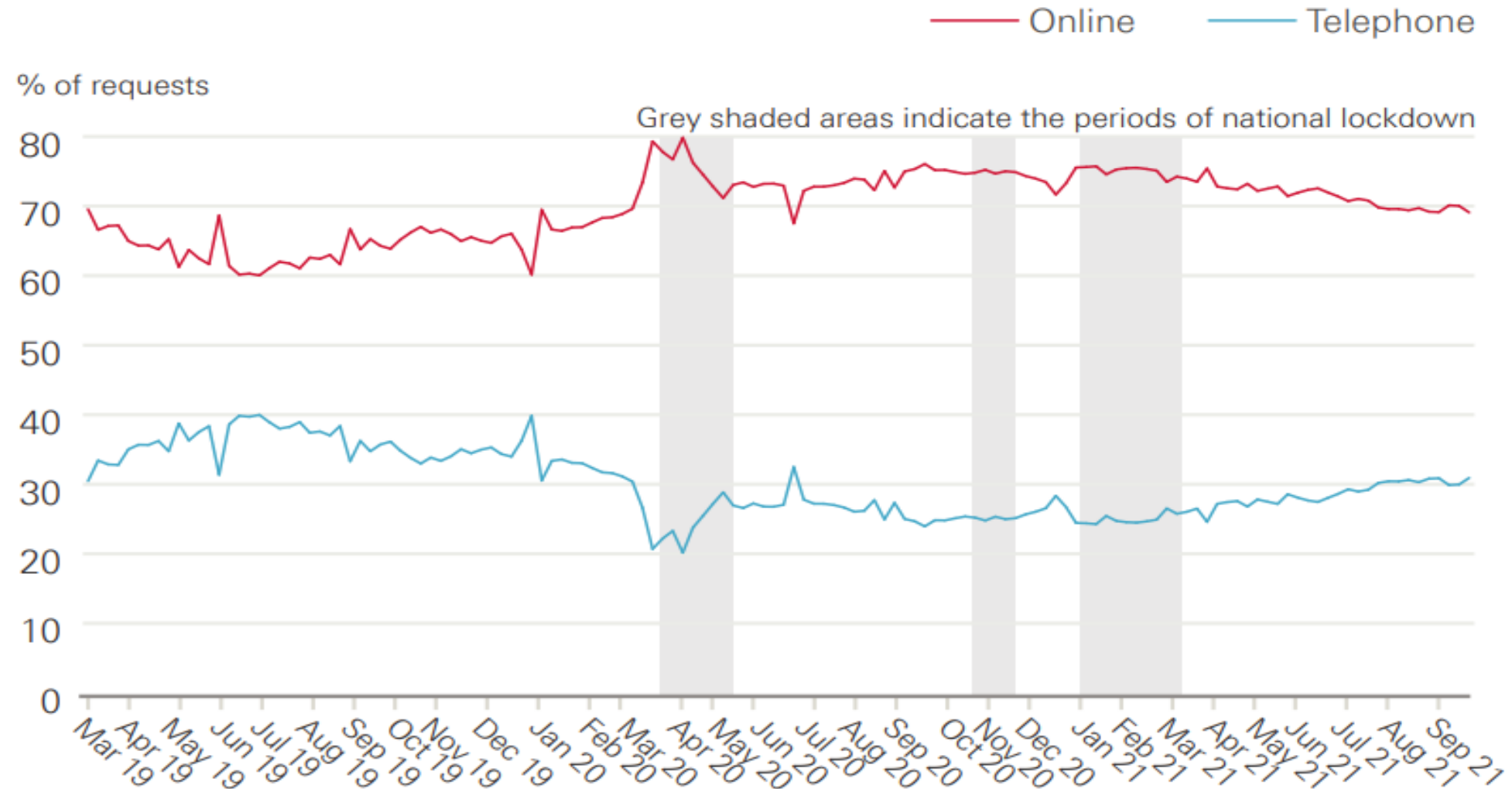
# Evaluation: impact and opportunity of new models in general practice

Based on the move to a more digitally enabled model of general practice, The Improvement Analytics Unit (IAU), in partnership with NHS England and NHS Improvement, has published a study that looked at the impacts of a modern general practice access model



# More requests were initiated online than by telephone/ in person at these practices

**Figure 5: Proportion of requests by access mode**





**Figure 2: Request rates per patient person-year stratified by age**

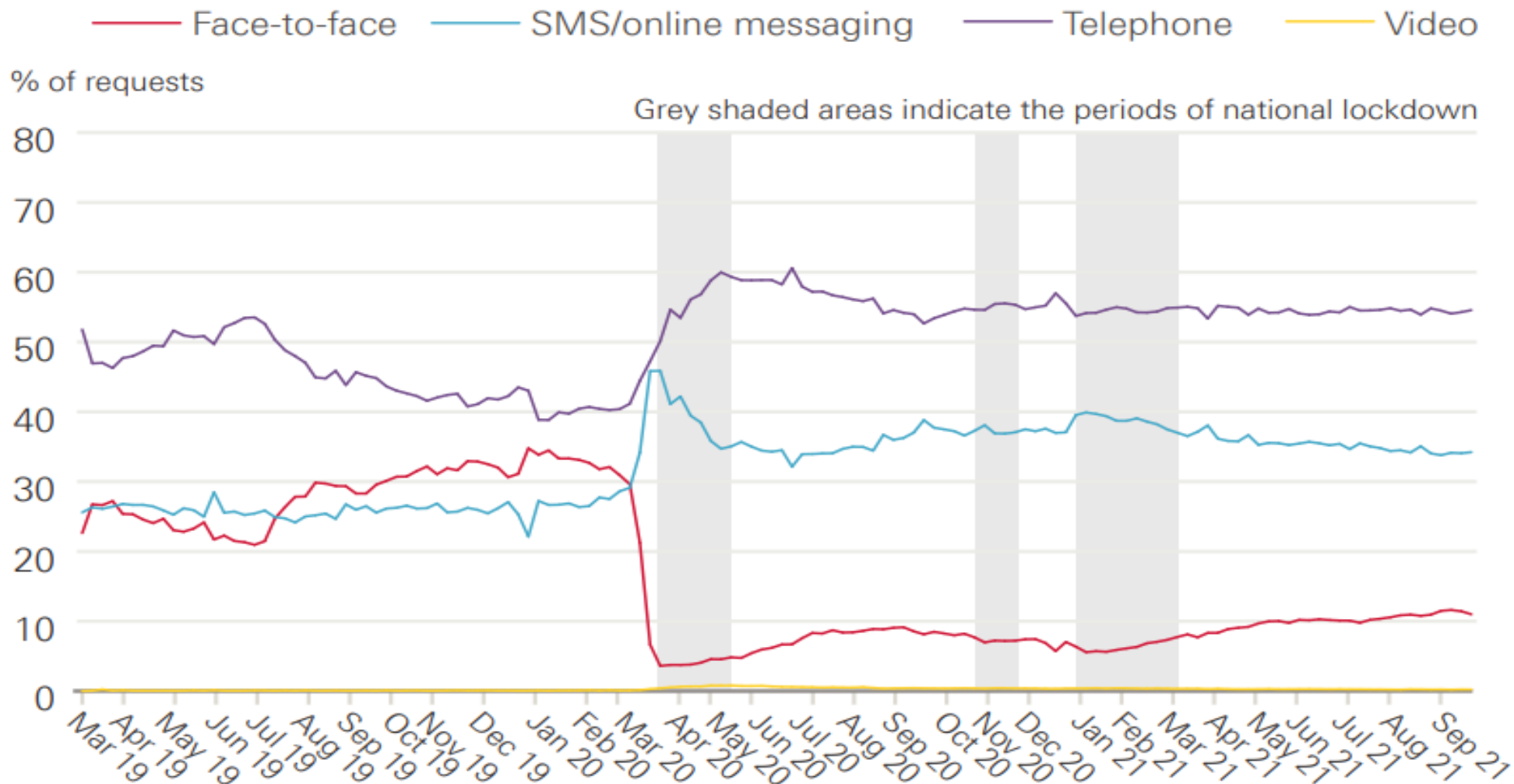


Benefits for both digital and non-digital users



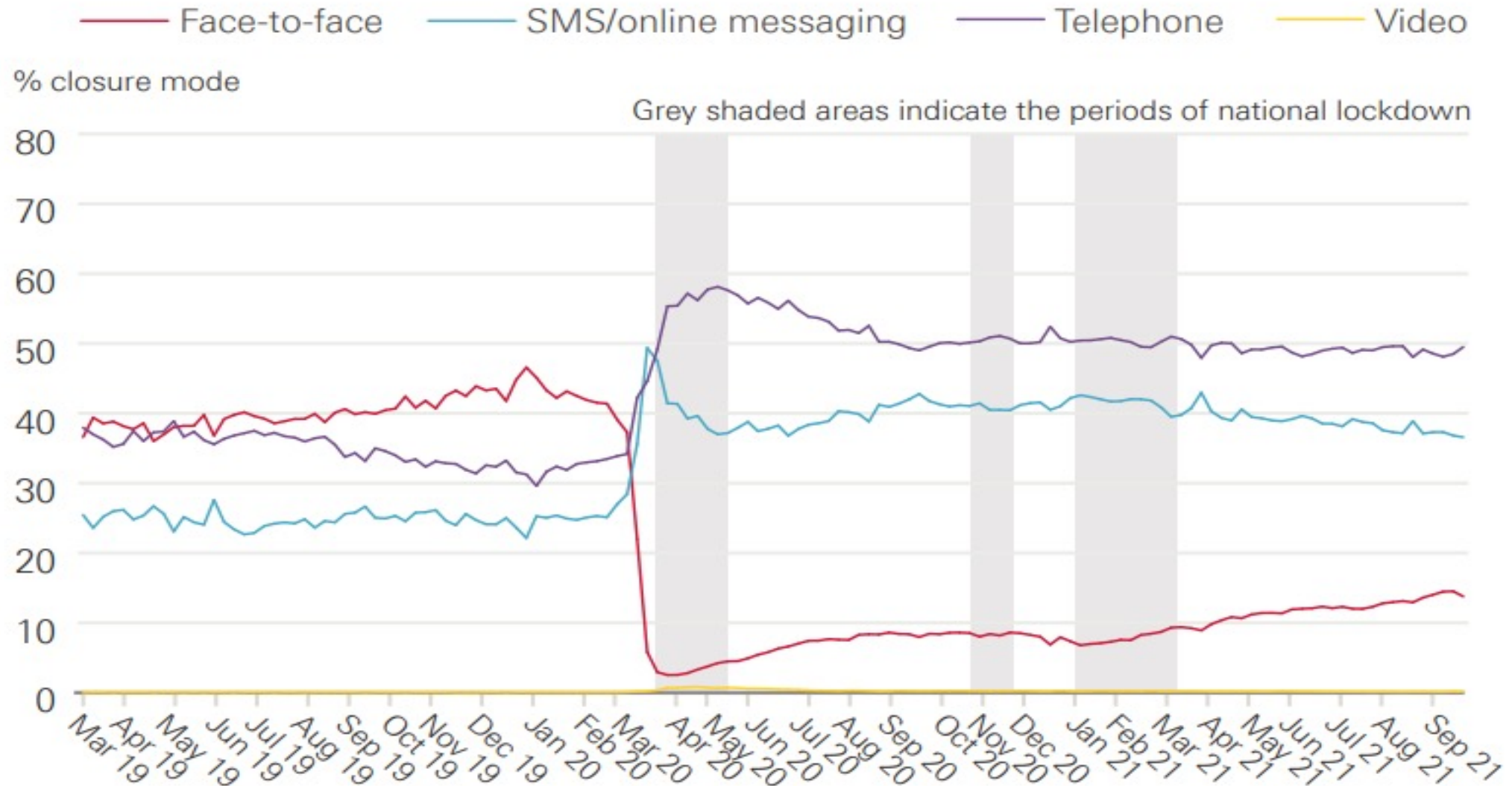
# Only a minority of patients at these practices requested face to face care

**Figure 6: Proportion of requests by requested consultation delivery mode**



# Practices tailored how care was delivered according to patient characteristics, needs and preference

**Figure 7: Proportion of requests by actual consultation delivery mode**



# More than 83% of requests were responded to within the same day and the median time to respond was less than four working hours

Figure 11: Median working hours for practice response stratified by age (years)

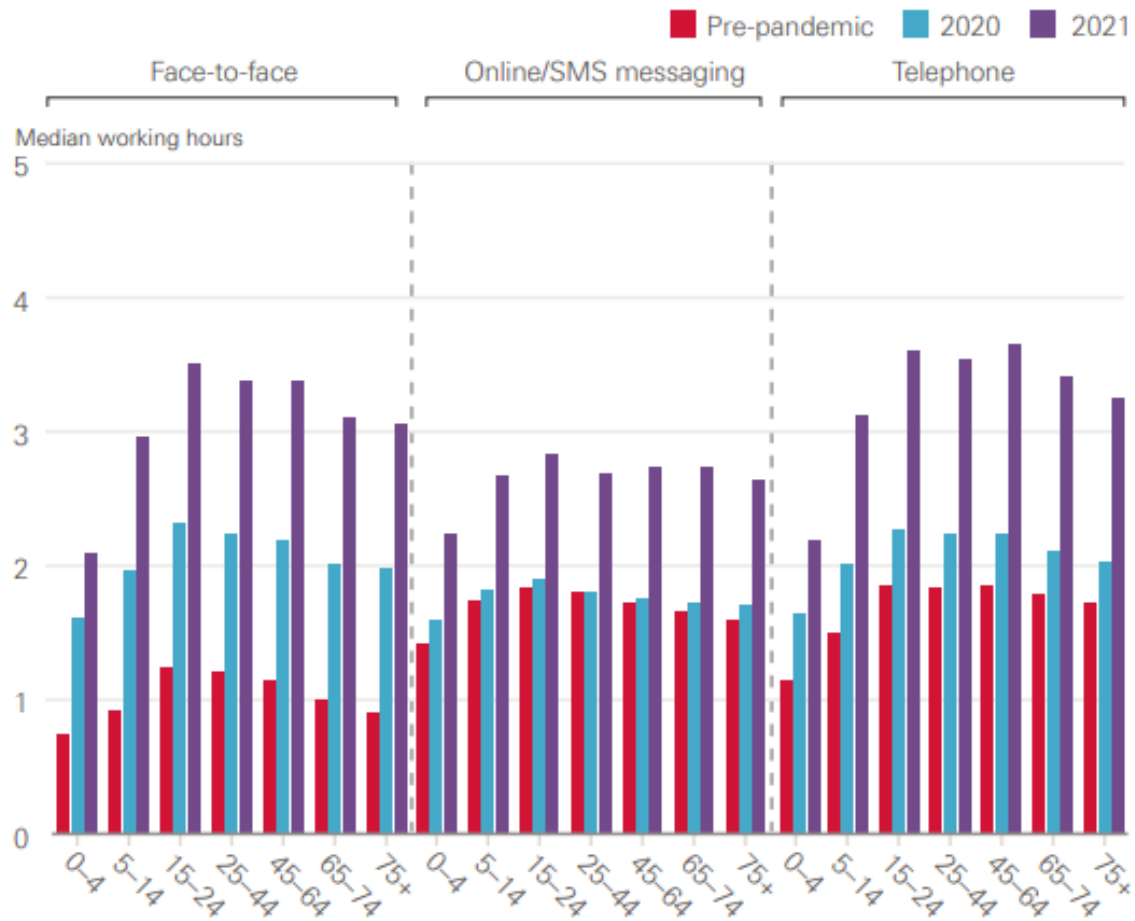
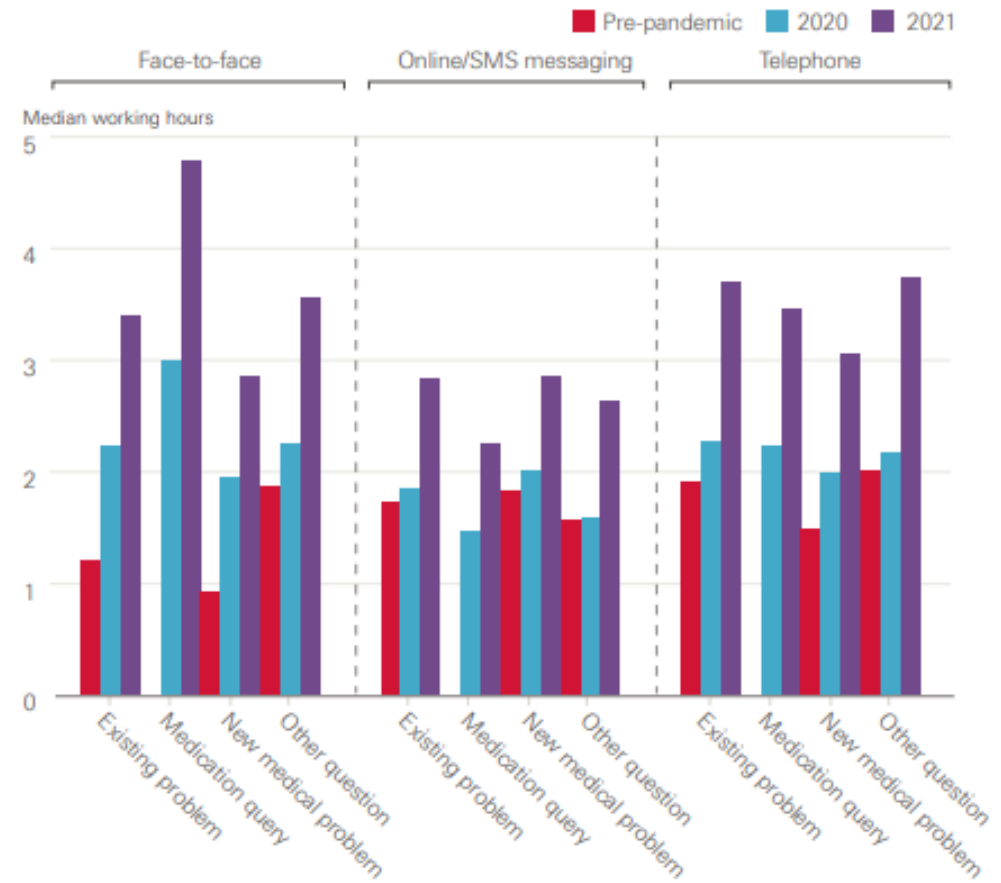
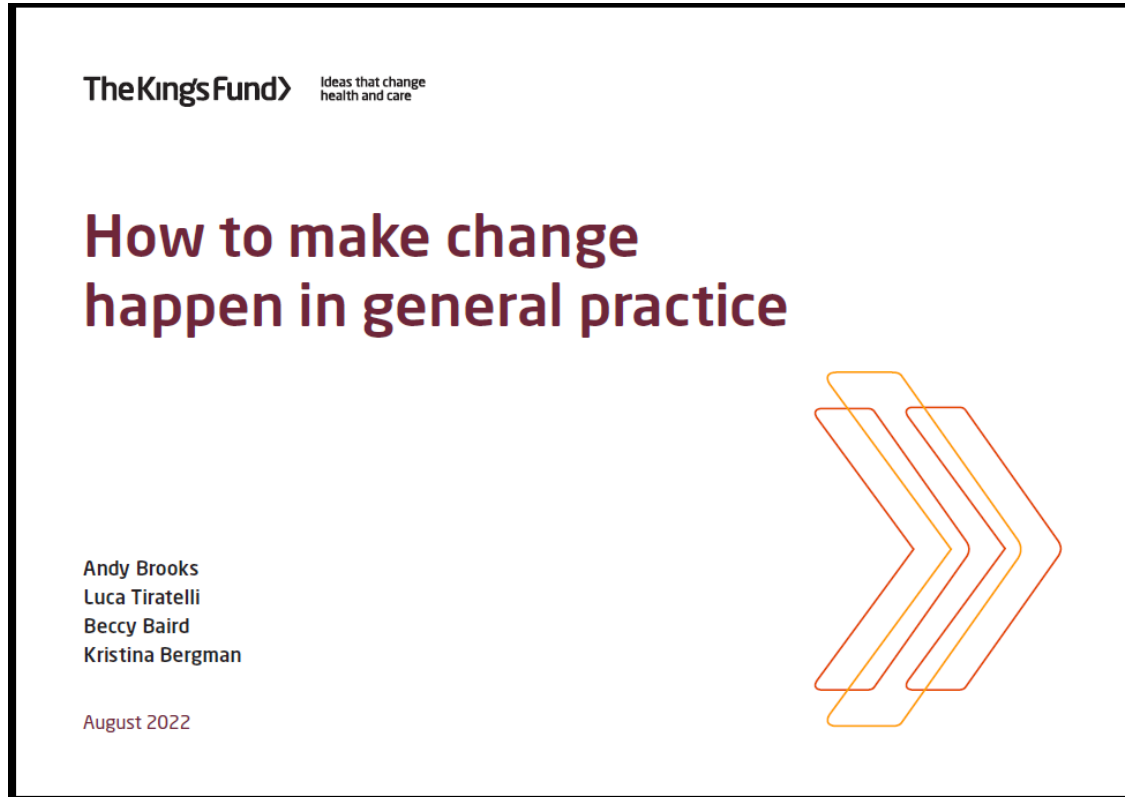


Figure 12: Median working hours for practice response stratified by query type



# The Kings Fund: levers for change



1. Changes work best when they are driven from the bottom up

2. Financial incentives and targets can distort priorities

3. The 'soft' stuff is important

4. People need capacity and capability to make change happen

# General Practice Improvement Programme

Over the next two years the General Practice Improvement Programme will provide:

- 1. Support for improvement**
  - 5 topic areas
  - 3 levels of support for practices or PCNs (universal, intermediate and intensive support)
- 2. Support for capability building** in practice teams to sustain change
  - Fundamentals of change management
  - GP QI leadership programme
  - PCN and Digital and Transformation leads training
- 3. Support for shared learning** supporting ICBs to create local peer networks to share challenges and learning alongside a national peer community

# Improvement support for practices and PCNs to move to a model of modern general practice

## Tiered Support

- **Universal:** webinars, drops in and online content
- **Intermediate (practice):** 13 weeks of support with a facilitator
- **Intermediate (PCN):** 12 half-day in person facilitated sessions over a flexible time period
- **Intensive (practice):** 26 weeks of support with a facilitator
- ICSs nominate practices and PCNs for intensive and intermediate support based on an assessment of need
- Nominated practices will need to have access to data from their telephony system

## Content

1. Understanding demand and capacity
2. Enhancing care navigation and triage
3. Implementing high quality telephony journeys
4. Implementing high quality online access journeys
5. Workload management

*All units have measurement baked in at the start*

## Outcomes

- Improving staff experience
- Improving patient experience
- Improving continuity of care
- Reduction in avoidable appointments and failure demand

## Improvement Indicators

- Patient satisfaction
- Staff experience measure
- Avoidable appointments audit including where continuity of care needs not met where needed
- Online consultation submission rate
- Reducing telephone wait times and abandoned calls
- Use of CPCS

# Skills training & learning communities

We offer fully funded care navigation, quality improvement and leadership development training for practice and PCN staff



## Care navigation training

Free virtual training is available to upskill and support practice and PCN staff. Two offers are available, one for those new to care navigation and one for those with some experience who can drive and sustain care navigation locally.

## Fundamentals of change and improvement

This accredited programme focuses on introducing and practically applying improvement tools and techniques, and building capability to tackle a range of local challenges

## Digital and transformation leads

This development programme incl. core teaching modules, 1-1 coaching and working alongside improvement team 'learning by doing'

- Developing practical skills for leading change
- Making effective use of data and technology as enablers of transformation
- Building effective relationships for working collaboratively, stakeholder engagement and facilitation skills

## General practice improvement leads programme

This accredited programme focuses on practical skills for leading change, supporting new perspectives, building skills in using QI tools and techniques for service redesign.

ICBs to nominate practice and PCN QI ambassadors and then support individuals to lead QI locally

## Local and national communities of practice

Access to a national Primary Care Improvement Community alongside supporting ICBs to develop local communities of practice to share learning and challenges

Please inform your ICB if you are interested in these programmes (or signal as part of PCN access improvement plans)



# Why should my practice or PCN take part?

- Focuses on key practice needs; managing demand, improving patient experience of access, developing teams and job satisfaction.
- Creates headspace, capability and a culture for practice staff to innovate and take action.
- Flexible offer to meet different needs of different practices.
- Shared learning offers practices faster proven routes to improvement and quicks wins.
- The cost of transformation is supported.
- Offers access to primary care improvement experts.
- Built on good foundations – the previous national Accelerate improvement programme and Time for Care programmes provided ‘hands-on’ support to practices which was well received.
- Prioritised support to practices with the greatest sustainability challenges, particularly those in areas of high deprivation and with highest demand-capacity pressures.

# Incentives and Funding

There are different types of funding available to ICBs, PCNs and practices that can support general practice to make changes in line with the objectives of the Delivery Plan for Recovering Access to Primary Care

## Funding summary

**IIF National Capacity and Access Support Payment:** total £172.2m. Paid to PCNs, proportionally to their Adjusted Population, in 12 equal payments over the 23/24 financial year. Equating to an average of ~£11,500/PCN/month

**IIF Local Capacity and Access Improvement Payment:** part or all of a total of £73.8m, paid to PCNs based on commissioner assessment of a PCN's improvement in three key areas over the course of 2023/24. The maximum a PCN could earn is £1.185 multiplied by the PCN's Adjusted Population as of 1<sup>st</sup> January 2023. This equates to ~£56,000/PCN/year.

**Primary Care Service/System Development Funding:** provided to ICBs to deliver transformation and other programmes

**Transition Cover and Transformation Support Funding** (average of £13.5k/ practice): is available to practices via their ICBs to provide additional capacity to help smooth the transition to a new model. The funding is to be used when the practice is approaching the point of 'going live' with the new model, for example, to clear appointment books. The funding could be used, for example, to pay for sessional GPs, support from experienced peers or for additional sessions from current practice staff (clinical or non-clinical).

## Nationally funded support, tools and communications

**The general practice improvement programme support is nationally funded** so there is no cost to practices to receive the support. Participating in the GPIIP will support practices to make the changes and move towards a modern general practice access model and the point of 'go live' more easily and realise the benefits more quickly

Participation in the general practice improvement programme will also help practices achieve their **QOF Quality Improvement demand and capacity and well-being modules**

### Funding for improved digital tools:

**Digital telephony:** £90m distributed based on need to support practices to move from analogue to cloud based telephony systems available via national frameworks.

**Online consultation, messaging and appointment booking tools:** £71m of which the majority added to ICBs' allocations to spend on accredited digital systems that will be made available via a national digital pathways framework in August 2023.

**National communications campaign:** These changes will be supported by a national communications campaign to explain the new model of general practice to the public alongside access to improved digital tools that better meet patient and practice needs.

# Find out more

## Universal support

*For practices and PCNs*

- Webinar series on the key focus areas; demand and capacity, navigation and triage, telephony journey, online journey and practice workload.
- QI training for practice and PCN staff.
- Development programme for PCN Digital and Transformation Leads
- Online resources, including quick wins

Practices can register for webinars and training using the link below

## 'Hands on' intermediate and intensive support

*For practices and PCNs*

Practices and PCNs can find out more about the hands-on support provided nationally using the link below.

ICBs are coordinating hands-on support and capacity funding to practices.

Contact your ICB lead to confirm your interest as a practice or PCN.

## Join PCIC, the national Primary Care Improvement Community

A community for all involved or interested in Primary Care quality improvement.

Joining gives you access to:

- support through a national network of like-minded colleagues
- events and resources on a range of quality improvement topics
- a monthly newsletter with the latest developments and resources

Join the community on: [Connect - our online space on FutureNHS](#)

Contact us: [england.si-pcic@nhs.net](mailto:england.si-pcic@nhs.net)

[Details of how to access the support offers are available on our webpage: NHS England » National general practice improvement programme](#)

# Q&A

