



For All London Practices supported by Londonwide LMCs

This area of the Contract Agreement overlaps both the (Primary Care) Network Contract DES and the 'Digital First' IT programmes.

Extended Hours DES

The Extended Hours DES requirements and 2018/19 funding will be transferred to the Network Contract DES from 1 July 2019; this is an interim solution until the DES funding becomes incorporated into the current CCG Extended Access reimbursement programme in April 2021 as this is intended to be a Primary Care Network (PCN) responsibility.

As a PCN responsibility, the Extended Hours DES must be offered to 100% of the PCN's population. Recognising these additional costs, £30 million is being invested in the Global Sum. The Extended Hours DES appointment requirements are intended to be unchanged from the current specification.

The actual delivery of the Extended Hours appointments by the PCN will be a matter for mutual agreement; it may be that the same arrangements, at each practice within the Network, can continue. Practices can mutually agree to centralise some service appointments, or share staff, with a proportionate sharing of the financing available.

CCG Extended Access Service

This is currently delivered by CCGs on a £6 per head basis; by 2021 it is intended this, and the Extended Hours DES funding, should be combined and a single integrated service be offered through the Network Contract DES, in an equivalent manner to the National Service Specifications. The goal is for PCNs to offer both physical and digital/remote services, link with 111, and urgent treatment centres, to reduce duplication and improve what is acknowledged to be a complicated system for patients. Because there are a variety of current procurement agreements for CCG Extended Access Services, the pace of this progress is expected to be incremental, and it will also involve PCNs working together at scale.

Linking with 111

In 2019/20 practices will need to offer 111 a *single* dedicated appointment per 3000 patients, for example a practice with a list of 9,000 would offer three appointments and so on. These are not required to be additional appointments and should be spread evenly through the day. They will also only be available to patients registered at a practice and booked after 111 clinical triage. This process will be dependent on IT functionality.

Patients will be advised they have a booked appointment and that they should attend at their pre-arranged appointment time. They are also advised that the practice may contact them prior to the appointment to:

- Confirm the appointment,



- Discuss their symptoms prior to confirming any necessary appointment,
- Arrange for another healthcare professional to see the patient, if this is appropriate.

These appointments can be telephone appointments where the patient will be told that the practice may phone them in advance to re-triage them or handle the case over the phone. This facility will be subject to audit and monitoring, and, if appointments are unused by a certain time, they can be used by the practice themselves.

Dr Michelle Drage, CEO of Londonwide LMCs - with thanks to Dr Julius Parker, CEO of Surrey & Sussex LMCs; Dr Matt Mayer, CEO BBOLMCs, and Alex Orton and Sam Dowling of Londonwide LMCs.