

Out of area registration: In hours urgent primary medical care (including home visits) Enhanced Service

Introduction

1. This enhanced service has been designed by NHS England to support the new out of area patient registration arrangements being introduced 5 January 2015 to extend choice of GP practice.¹ It seeks to secure access to local GP practices for patients living in the practice area but who are registered with a practice away from home without access to home visits.

Background

2. From January 2015 all GP practices are free to register new patients who live outside their practice area without any obligation on the practice to provide home visits for such patients when the patient is at home, away from, and unable to attend, their registered practice.
3. NHS England must ensure all such patients are able to access primary medical services in their home area during core hours if they have an urgent care need and if they cannot reasonably be expected to attend their registered practice. In this context urgent care is where the patient's medical condition is such that in the reasonable opinion of the patient's registered practice attendance on the patient is required and it would be clinically inappropriate for the patients to go their registered practice.
4. NHS England area teams are putting in place their arrangements for January to deliver these services on an area-wide basis. These will provide access to a local provider for an urgent consultation with a GP or other healthcare professional – or (where clinically necessary) a home visit – when it is not clinically appropriate for the patient to attend their registered practice.

¹ GP practices have always had the ability register patients who live out of area but with no difference to any other permanent registration (e.g. including requirements to provide home visits). Such discretion remains for GP practices alongside the new arrangements.

5. Area teams will determine the mix of arrangements they put in place locally, including from any provider. This could include modifying existing Walk-in Centre services or working with CCGs to secure an in-hours service from out-of-hours providers, or using this enhanced service to secure services from GP practices.

Purpose

6. This enhanced service specification aims to secure the delivery of care to patients who are registered with a GP practice away from home under the new arrangements (out of area registered without home visiting duties) and who require urgent care and cannot reasonably be expected to attend their registered practice on clinical grounds (i.e. in general this would not be expected to apply to patients who live in close proximity to but outside their practice area).
7. The service will provide urgent and local care, as deemed clinically necessary by the appointed GP practice, for such patients living in the appointed practice's boundary area, as follows:
 - a. Access to essential primary medical care services for patients who fall ill at home during the weekday in hours period (8.00am to 6.30pm; Monday to Friday, excluding bank holidays) or who are recovering at home after a period of hospitalisation; and,
 - b. Home visits (where clinically required).
8. GP practices choosing to participate in this enhanced service will be required to ensure secure and robust processes are in place to communicate details of the care provided under this enhanced service to the patient's registered practice.

Process

9. All area teams are required to have established urgent care arrangements for out of area patients who live in their area from 5 January 2015.
10. Area teams wishing to secure services from GP practices as part of their arrangements will therefore want to offer and secure sign up to this enhanced service at the earliest opportunity.
11. Where GP practices do not wish to participate in this enhanced service area teams are free to offer the service to neighbouring practices to secure services for a wider area (e.g. the appointed practices area and that of the neighbouring practice). In those circumstances the national pricing does not apply and is to be agreed locally.

12. This enhanced service is intended for use during the period 1 April 2017 to 31 March 2018.

Requirements

13. Practices must ensure that information about access to their services for patients who are registered with out of area practices are provided to NHS 111 for recording on the Directory of Services in order for patients to be directed to their service as and when required.

14. The practice must ensure that they have mechanisms in place to provide services to patients who are resident in the area² but who are registered with an out of area practice:

a. Access for those who fall ill at home during the in hours period (8.00am to 6.30pm; Monday to Friday, excluding bank holidays) or who are recovering at home after a period of hospitalisation, this means:

- i. The provision of essential medical services to those patients who are, or believe themselves to be ill with conditions from which recovery is generally expected
- ii. offering a consultation for the purpose of identifying any need for treatment or further investigation and making available any such treatment or further investigation as is necessary and appropriate

b. Home visits (where deemed clinically necessary by the provider) to provide essential medical services

- i. to those patients who, in the reasonable opinion of the contractor, attendance on the patient is required and it is inappropriate for them to attend at the practice premises

15. The practice must ensure that they have a robust system in place to transfer information securely, about any care given, to the patients registered practice within no more than 24 hours of the consultation.

16. The practice must complete a claim form and submit to the area team on a quarterly basis.

² For the purposes of this enhanced service 'area' will be the contractors practice area or any other area agreed between the contractor and the area team (e.g. the practice area of another GP practice who declined the opportunity to take up the enhanced service)

Monitoring

17. Where a practice chooses to offer this service, the monitoring required will be the number of out of area registered patients accessing services and, in the case of each out of area patient, the number of consultations provided (and of those consultations how many were home visits). A standard template will be provided for these returns.
18. The practice will be required to provide clinical details of each attendance to the patient's registered practice following the consultation in a timely manner to ensure that the patients' clinical record is kept updated.

Payment and Validation

In hours care at the practice

19. Payment under this enhanced service for each consultation at the practice (excluding home visits but may include telephone/skype consultations.) is **£15.87 per GP (or other healthcare professional as appropriate) consultation.**
20. Should any individual patient be consulted at least four times in any 12 month period this will be a trigger for a review by the patient's registered practice as to whether it is more clinically appropriate and practical for the patient to register with a practice closer to home. Further details on this review process are given in main NHS England guidance.

Home Visiting

21. The payment for a home visit under this enhanced service is **£60 per home visit.**
22. Should any individual patient receive a home visit on more than two occasions in any 12 month period this will, again, trigger a review by patient's registered practice as to whether it is more clinically appropriate for that patient to register with a practice closer to home. Again, further details on such reviews will be given in NHS England guidance.
23. Administrative provisions relating to payments under this enhanced service are detailed in appendix to this specification.

Other issues relevant to Choice of GP Practice

24. Practices that are eligible to provide services under this specification are only those that are currently maintaining an open list status.
25. Existing GP health centres, walk-in centres or minor injuries units that already have unregistered patient services included in their current service contract are excluded from provision of those services under this specification, although area

teams may wish to consider how to utilise these services in addition to or in place of this enhanced service, including whether those services are able to provide home visits.

Administrative provisions relating to payments under the 'Out of area registration: In hours urgent primary medical care (including home visits)' enhanced service.

1. Payments under this enhanced service are to be treated for accounting and superannuation purposes as gross income of the GP practice in the financial year they are received.
2. The amount calculated as payment for the quarter falls due on the last day of the month following the month during which the GP practice provides the information specified in the Payment and Validation section of the enhanced service specification to NHS England.
3. Payment under this enhanced service, or any part thereof, will be made only if the GP practice satisfies the following conditions:
 - a. the GP practice must make available to NHS England any information which NHS England needs, and the GP practice either has or could be reasonably expected to obtain, in order to establish whether the GP practice has fulfilled its obligation under the enhanced service arrangements;
 - b. the GP practice must make any returns required of it (whether computerised or otherwise), and do so promptly and fully; and,
 - c. all information supplied pursuant to or in accordance with this paragraph must be accurate.
4. If the GP practice does not satisfy any of the above conditions, NHS England may, in appropriate circumstances, withhold payment of any, or any part of, an amount due under this enhanced service that is otherwise payable.

Provisions relating to GP practices that terminate or withdraw from the enhanced service prior to 31 March 2018 (subject to the provisions below for termination attributable to a GP practice split or merger)

5. Where a GP practice has entered into this enhanced service but its primary medical care contract subsequently terminates or the GP practice withdraws from the enhanced service prior to 31 March 2018, the GP practice is entitled to a payment in respect of its participation if such a payment has not already been made, calculated in accordance with the provisions set out below. Any payment calculated will fall due on the last day of the month following the month during which the GP practice provides the information required.

6. In order to qualify for payment in respect of participation under the enhanced service, the GP practice must provide NHS England with the information requested under paragraph 20 of the enhanced service specification before payment will be made. This information should be provided in writing, within 28 days following the termination of the contract or the withdrawal from the enhanced services agreement.

Provisions relating to GP practices who merge or split.

7. Where two or more GP practices merge or are formed following a contractual split of a single GP practice and as a result the practice area is combined or divided between new GP practice(s), the new GP practice(s) may enter into a new or varied agreement to provide this enhanced service.
8. The enhanced service agreements of the GP practices that formed following a contractual merger, or the GP practice prior to contractual split, will be treated as having terminated and the entitlement of those GP practice(s) to any payment will be assessed on the basis of the provisions of paragraph 5 of this annex.
9. The entitlement to any payment(s) of the GP practice(s), formed following a contractual merger or split, entering into the new or varied agreement for this enhanced service, will be assessed and any new arrangements that may be agreed in writing with NHS England will commence at the time the GP practice starts to provide such new arrangements.
10. Where that new or varied agreement is entered into and the new arrangements commence within 28 days of the new GP practice(s) being formed, and those arrangements were, in the opinion of the NHS England, broadly comparable to the enhanced service, the new arrangements are deemed to have commenced on the date of the new GP practice(s) being formed. Payment will be assessed in line with the enhanced service specification – subject to the provisions of paragraph 12 of this annex.
11. NHS England is entitled to make an adjustment to the payment – or any part thereof, if payment has already been made or is payable to the previous GP practice(s) for participating in the enhanced service.

Provisions relating to non-standard splits and mergers

12. Where the GP practice participating in the enhanced service is subject to a split or a merger and:
 - a. the application of the provisions set out above in respect of splits or mergers would, in the reasonable opinion of NHS England lead to an inequitable result; or,

- b. the circumstances of the split or merger are such that the provisions set out in this section cannot be applied,

13. NHS England may, in consultation with the GP practice or GP practices concerned, agree to such payments as in NHS England's opinion are reasonable in all circumstances.