

## Frequently Asked Questions (FAQs) Audit of Potentially Avoidable Appointments in General Practice

This audit was developed as part of a research project commissioned by NHS England and the initial results were published in *'Making Time in General Practice'* available at <http://www.nhsalliance.org/making-time-in-general-practice/> It helped create the evidence base for the recent *'Forward View for General Practice'*. Initial results suggested that, on average, 27% of appointments in general practice were potentially avoidable if other services and support were put in place. NHS England is now committed to extending this work by funding support for practices - so there is no direct cost - of an App you can download on to your computer screen, making it really easy for you to see how many of your appointments might be avoidable and helping you explore how you might be able to do something about it.

Below you can find the answers to a series of frequently asked questions about the audit. If you have further questions, please email us at [info@primarycarefoundation.co.uk](mailto:info@primarycarefoundation.co.uk)

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### What is the point of this audit?

It is designed to help you look at the current workload in your practice and whether you could manage it in a way that reduces the pressure on your clinical team. It is a simple tool for measuring how many of the appointments with GPs, nurses and other clinicians in the practice, could, potentially, be managed in other ways. The point of auditing what is happening in your practice is to look at how by making changes, either within the practice or across the local health system, you can free up clinical time and offer better care to patients.

### What are the different types of potentially avoidable appointments?

They vary, from people who you think don't really need to be seen at all, to those who need better advice and self-care, to patients who could be seen by other members of the practice team, or by other services such as pharmacies, or patients who have non-medical needs that would be better met by different types of support in the local community. The audit tool

categorises the different options in a clear and simple way, while also allowing you to add other options if you identify something that is not already covered.

### **What are the benefits for the practice?**

The audit provides clear evidence of how you work in your practice, rather than relying on assumptions and anecdote, and offers potential options for reducing your workload. The real benefit is generally found in the discussion and debate across the practice team as you make sense of the results and think about the best way to make improvements.

### **How much will it cost the practice?**

There is, currently, no direct cost to practices. NHS England are committed to extending this work and are currently funding free support for practices across England.

### **How do we get the results?**

The audit provides both instant feedback for individual clinicians as well as a more comprehensive report for the practice as a whole. As soon as a clinician completes the audit they get instant feedback from CFEP about how their results compare the national benchmarks. And once everyone in the practice team has completed the results, you will receive a report that compares the results from clinicians across the practice team, makes comparisons with results across the Country, feeds back your reflections at the end of the audit and offers suggestions for how you might be able to make improvements and further support, if you need it.

### **What will the results tell us?**

The results provide three different types of information. First, they highlight the different perspectives across the clinical team within the practice - there are often striking differences between individual GPs and nurses. Second, it shows how your practice varies from other practices, as we benchmark your results against all other results received so far. Thirdly, we feedback the comments from clinicians as they undertake the audit and a brief review at the end, all of which should inform a wider discussion across the practice team.

### **How long do we need to run the audit for?**

We offer you the choice - there is a screen when you set up the audit that allows you to decide whether you want to carry out the audit over a couple of day, a week or a longer period.

### **How easy is it to use and how much of my time will it take?**

The audit has been designed to be quick and as simple as possible to use. It should take no more than a couple of seconds after each appointment to decide whether the appointment was avoidable and, if so, how it could be avoided.

### **Is the audit just for GPs?**

No. Although the initial audit was largely carried out by GPs we think it makes sense to review appointments across all members of the clinical team - so GPs, nurses, HCAs as well as other roles, such as practice pharmacists, or physician assistants.

### **Can we use it as an audit across a wider group of practices?**

Yes. We think that it makes a lot of sense to look not just at results within the practice but across a wider group of practices. So we welcome interests from GP federations or networks, CCGs or LMCs - in fact any group of practices working together who would like to look collectively at reviewing the results. We are happy to prepare an additional report (again at no cost to you) across a wider group of practices so that you can run a session to support mutual learning and development as you begin to work more closely together. It is likely to add greater value as some of the solutions to reducing workload within your practices may involve working collaboratively with others, as well as developing new services with your local CCG.

### Can we add to the audit or customise it for our local area?

Yes. There is an option to tailor the audit with additional questions - about specific skill groups or services for practices - across a wider group, such as a federation or a CCG. If you are interested in this, please email us on [info@primarycarefoundation.co.uk](mailto:info@primarycarefoundation.co.uk)

### What are the wider benefits of this work?

We hope there will be two broader benefits to extending this audit. The results should help inform local commissioning decisions as part of wider discussions across the local healthcare system as you look at how you can transform care through the local STP. It will also help inform national policy as NHS England looks at the best way of offering additional support to general practice and the health system as a whole as part of the Five Year Forward View, just as the initial audit played a part in shaping the Forward View for General Practice. As part of this, we intend to prepare regular summary results available at a national level, to help inform local commissioning and national policy making.

### Will the results be confidential or are they shared more widely?

Once you sign up for the survey you will be sent a document about survey governance and security. In short, neither the data entered by clinicians nor their scores will be used to produce any results that identify them individually.

### Who is managing this audit?

The audit has been designed and is being run by the Primary Care Foundation. The data is being received and analysed by specialists in running audits and surveys in general practice, CFEP UK Surveys. Initial feedback to individual clinicians will be from CFEP, full reports for the practice or wider groups of practices working together, will be from the Primary Care Foundation. For more information about both organisations, you are welcome to visit our websites. For the Primary Care Foundation, please go to <http://www.primarycarefoundation.co.uk/> and for CFEP UK Surveys please go to <https://www.cfepsurveys.co.uk/>

### What do we do if we have other questions or need more support?

if you have any further questions, or you would like to discuss any of this further, please email us on [info@primarycarefoundation.co.uk](mailto:info@primarycarefoundation.co.uk) and we will get back to you as soon as we can.

June 2016