



Ein cyf/Our ref – MA-P/MD/1213/16

Assembly Members

23 March 2015

Dear Colleagues

During Health and Social Services Oral Assembly Questions on Wednesday 2 March, questions asked about the Programme for Government commitment to improve access to GP services for working people after 6.30pm on week nights and on Saturday mornings. Given the limited time available to respond to these important questions, I am setting out what the Welsh Government has done to improve access to GP services.

Our main focus since 2011 has been to optimise the availability of appointments during core hours – 8am to 6.30pm, Monday to Friday, with more practices offering appointments later in the day between 5pm and 6.30pm. The latest GP access statistics show a continuing trend of improvement and I expect this to continue.

The 2015 GP access statistics show:

- More GP practices are open longer – 82% of GP practices are now open for daily core hours (or within one hour of the daily core hours); this is up from 60% in 2011;
- The number of GP practices closed for half a day or more has fallen from 19% in 2011 to 4% in 2015;
- More GP practices offer appointments in the evening – 97% of GP practices now offer appointments at any time between 5pm and 6.30pm at least two week days, up from 92% in 2011;
- 79% of GP practices now offer appointments at any time between 5pm and 6.30pm every week day, up from 63% in 2011;
- 16% of practices now offer appointments before 8.30am at least two week days, up from 14% in 2011;
- More GP practices offer appointments for the whole half hour between 5.00pm and 6.30pm – 91% of practices offer appointments during the whole half hour between 5.00pm and 5.30pm at least two week days, an increase from 84% in 2011;
- 64% of practices offer appointments during the whole half hour between 5.30pm and 6.00pm at least two week days, an increase from 40% in 2011;
- 17% of practices now offer appointments during the whole half hour between 6.00pm and 6.30pm, an increase from 8% in 2011.

The 2015 published statistics on GP access can be viewed through the link <http://gov.wales/docs/statistics/2016/160224-gp-access-wales-2015-en.pdf>

All GP practices now have the ability to offer appointments and repeat prescriptions via *My Health Online*. The website is being used by 73% of practices and 167,007 people are registered to use the service.

Further planned IT developments include making it easier for people to register with *My Health Online* and improving the availability of mobile applications for use on smart phones. In addition, approximately 43% of GP practices are now using *My Health Text* to remind people about their appointment to help to reduce the number of missed appointments.

In relation to access to GP practices after 6.30pm, health boards have provided assurance that access reflects assessed need. Where there is an assessed need, we expect health boards to plan for this.

In relation to access to GP planned appointments on Saturday morning, access is matched to local need. Where there is an assessed local service need access will be expected to be provided, consistent with the principles of prudent healthcare. Access to unscheduled GP services at the weekend is provided through GP Out of Hours services

A small scale GP out-of-area scheme was piloted in Cardiff, Wrexham, Swansea and Newport in 2015-16. This was available to people who are registered with a practice but needed to see a GP during working hours in a different area. Whilst the feedback from Swansea is awaited, overall the pilots had a very low uptake. We will be working with the health boards and GPC Wales to consider the lessons for future planning.

The Welsh Government's national primary care plan and work on prudent healthcare is designed to increase the capacity and capability of the wider multi-professional primary care team working with GPs. This will allow GPs to focus their time on people with more complex needs.

Building on the £3.5m the Welsh Government made available for primary care in 2014-15, we provided a £40m national primary care fund in 2015-16. This aims to achieve service sustainability; improve access and help to move services out of hospital. Examples of how this funding is being used across Wales includes: the recruitment of clinical pharmacists and physiotherapists to work with GP practices; new models for call triaging to direct people to the right professional and service and; four pilot schemes to move treatment for wet age-related macular dystrophy out of hospital into primary care, where care will be delivered by nurses.

Yours sincerely



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