

Freedom of Information Request	FOI 21-209	14 th June 2021
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1. What information is collated and published about the quality and effectiveness of services delivered by GP surgeries?

The Quality Assurance and Improvement Framework (QAIF) was introduced in 2019 which replaced the Quality and Outcome Framework (QOF), originally introduced as part of the new General Medical Services (GMS) contract in 2004. The QAIF measures achievement against key criteria within the contract and rewards GP contractors for the provision of quality care and helps to embed quality improvement into general practice.

Key Criteria:

- Quality Assurance – clinical indicators in relation to chronic/long term conditions
- Quality Improvement – based on quality improvement projects, one is mandatory i.e. patient safety project and one other from a basket of projects
- Access - the standards set clear requirements on practices in terms of expectations relating to access including an increased digital offering
 - People receive a prompt response to their contact with a GP practice via telephone
 - Practices have the appropriate telephony systems in place to support the needs of people avoiding the need to call back multiple times and will check that they are handling calls in this way. (please note this standard has been suspended due to COVID pandemic)
 - People receive bilingual information on local and emergency services when contacting a practice
 - People are able to access information on how to get help and advice.
 - People receive the right care at the right times in a joined up way which is based on their needs
 - People can use a range of options to contact their GP practice.
 - People are able to email a practice to request a non-urgent consultation or a call back.
 - Practices understand the needs of people within their practice and use this information to anticipate the demand on its services. (please note this standard has been suspended due to COVID pandemic)

It should be noted GP practice participation within QAIF is voluntary.

Historic practice achievement is published by Welsh Government via the following link: <https://statswales.gov.wales/Search?Query=gp+contract>

Due to the COVID-19 pandemic GP practices have been operating differently and elements of the GMS contract have been suspended to enable them to focus on the added pressures placed upon the health service at this time.

Practices are also monitored for compliance against the all Wales Clinical Governance Practice Self-Assessment Toolkit (CGPSAT). This toolkit encourages practices to bridge the gap between understanding and thinking about their governance systems and completing the actions needed to improve them. Practices are asked to consider the maturity of their systems are by means of a matrix and are to be reviewed and updated on an annual basis.

Practices participate in national audits in relation to disease management such as the National Diabetes Audit (NDA). This provides a comprehensive view of Diabetes Care and measures the effectiveness of diabetes healthcare against NICE Clinical Guidelines and NICE Quality Standards which are published.

2. Is there a standard pro-forma used within the NHS (including GP surgeries) to record and collate complaints raised by the public about services received? If yes, how does one obtain access to the form? If there is no standard form, why not?

The Health Board's complaint process is known as 'Putting things Right' (PTR). Information, including a standard complaints form can be found via the following link on the Health Board's website:

<https://abuhb.nhs.wales/about-us/complaints-concerns/>

GP Practices are independent contractors who may each operate a different complaints system in line with PTR guidance.

3. What information is published about complaints raised about GP surgeries, and how would one obtain the number, frequency, outline details and outcomes of complaints against a particular GP surgery?

GP practices are independent contractors who record the number of complaints received within their own individual practice.

The Quality and Patient Safety (QPS) Directorate within the Primary Care and Community Services division monitors the number of concerns received formally and undertakes a thematic analysis of these. This information is then included within each divisional assurance QPS report and is shared across all services via individual area/directorate/service reports and escalated to the corporate team via executive assurance. This information is not published formally but is available as part of the Health Board's Annual Report which is managed by the Corporate Putting Things Right Team.

4. Are there minimum KPI (Key Performance Indicators) against which GP surgeries are measured? How are these KPIs recorded, measured and reviewed? How does one obtain access to the KPI reports?

Please refer to information under question 1. There are no minimum KPIs, however, GP practices are required to comply with the General Medical Services contract. The GP software system helps to monitor some

compliance, also the Health Board meets with practices on an annual basis to discuss and review compliance. This information is not in the public domain.

- 5. Are any studies being conducted regarding the remote delivery of services by GPs (i.e. telephone, video or text consultations) versus face-to-face physical consultations? If yes, where are the results of these studies published for public consultation? If not, why not?**

The Health Board is not undertaking any studies at present.