

**Healthwatch Central West London and Hammersmith and Fulham Local Committee  
Response to Digital-First Primary Care Policy: consultation on patient registration,  
funding and contracting rules by NHS England and NHS Improvement**

Healthwatch Central West London (CWL) and its H&F Committee welcome the opportunity to comment on Digital-First Primary Care Policy: consultation on patient registration, funding and contracting rules by NHS England and NHS Improvement.

**Who we are:**

Healthwatch Central West London is an independent charity established under the provision of the Health and Social Care Act 2012 to represent the voices of local people in health and social care. As a local Healthwatch our role is to ensure that local people are actively involved in shaping the health and care services that they use, and that they have a say on how decisions about what health and care services are available for them.

Healthwatch's work in the London Borough of Hammersmith and Fulham (H&F) is shaped and driven by its Local Committee -an active group of 14 residents and representatives of voluntary organisations.

**Overall Comments on the consultation**

We welcome the NHS England and NHS Improvement consultation document and its efforts to address issues deriving from the quick expansion of digital providers.

We support the commitment of providing the option to all patients in every GP practice to access health services on line in the future as set out in the NHS Long Term Plan. However, we expect NHS England to support GP practices by ensuring there is a secure method of email and online communication between GP practices and patients.

We would like to stress the importance of assuring patients that traditional elements of accessing healthcare will not be lost, NHS England should make it very clear when communicating any changes to patients that those who can't or don't wish to use digital services or tools will still be able to access face to face appointments and health care in general practice. We recommend that NHS England and NHS Improvement reconsiders the "digital-first" name, which can be misleading and confusing for patients.

**Chapter 1: Out-of-area registration**

We support the decision to not change (or limit) the out-of-area rules to ensure that patients continue to benefit from having the choice to register with a GP practice out of area that is convenient for them for work, family and other reasons.

We support the principle of the proposal to have a new local contract awarded to the provider in the "other area" once a specific number of patients has been reached. We are in favour of this because it would mean that the funding remains with the CCG where the patient lives and not when the practice happens to be, making it easier for patients to access other local health services. (i.e. hospitals, out of hours services) and screening services. We also find the threshold of 1,000-2,000 patients reasonable.

However, we think that the details of this proposal should be worked out thoroughly to ensure that its implementation is practical, the contract conversion is efficient, and it address issues that might arise such as future mergers of CCGs and contracts with numerous CCGs.

We are concerned about potential risks for patients that fall through the gaps during the creation of new patient lists and the re-registrations process which could be confusing. We

recommend that NHS England carries out an Equality and Health Impact Assessment to identify potential risks for patients and puts mitigations in place to address them.

### **Chapter 2: CCG Allocations**

We support the proposal to change the funding allocation for CCGs to be recalculated on a quarterly basis to ensure that the money follows the patient and is more adaptable to rapid changes in patient numbers.

We recommend that this also happens retrospectively and that it should start from November 2017 to include new patient registrations with the Babylon GP at Hand practice.

We would like to highlight that the existing funding allocation system has created several problems for the healthcare system in Hammersmith and Fulham. Our local CCG that is already under huge financial pressure, had to also deal with the financial uncertainty that the expansion of Babylon GP at Hand practice has brought to the CCG for the past two years. We have witnessed that H&F CCG and local politicians have put enormous time and energy into trying to respond effectively to the situation for the benefit of the local population, when the resolution should have been provided on a national level. We believe that this has influenced patients and the local health landscape in a negative way, as this level of attention could have been directed to local healthcare issues.

### **Chapter 3: New patient registration premium**

We welcome the proposal to pay the new patient registration premium if the patient remains registered with the GP practice for a minimum period. We think that it shouldn't be less than 6 months and that 12 months is too long. We tend to think that 6 months sounds a reasonable timeframe, but we don't have enough details and analysis of how this might work and affect patients to make a firm recommendation.

### **Chapter 4: Harnessing Digital-First Primary Care to cut Health Inequalities**

We support the proposal in principle, but we require assurance on the following:

- Digital providers will respond to what matters to patients in under doctored areas.
- CCGs and digital providers need to provide evidence they have engaged locally with the wider community, people that don't want to use the internet and seldom heard groups to avoid the perception of a rigid top down approach being imposed on a local area.
- An Equality and Health Impact Assessment is completed with detailed mitigation actions.
- Digital providers will comply with rules to reduce inequality.
- Booking face to face and screening appointments locally should be as easy as booking digital appointments online.
- Digital providers employ GPs with minimum x years of experience as a GP with regular face to face sessions concurrently at a GP practice as well as evidence on the standard of their interpersonal skills.

We also need clarity on whether new restrictions on new digital providers applies to existing digital providers.

22.08.2019

**Olivia Clymer, Chief Executive of Healthwatch Central West London**

**Keith Mallinson, Chair of Healthwatch Hammersmith and Fulham Local Committee**