

### Appendix 1

# Out of Area Patient Registration – Information and Key Points to note re: Changes from 1<sup>st</sup> October 2014

This paper provides details on the following:

- 1. Learning from the national Out of Area Registration 'choice pilot'
- 2. Information for practices on what Out of Area Registrations will mean for you

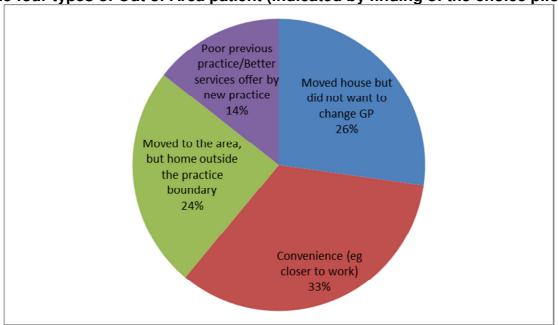
### Section 1: Learning from the national pilot on Out of Area Registrations

From 1<sup>st</sup> October 2014 all GP practices will be free to register patients from outside their practice area 'Out of Area patients' and without any obligation on the practice to provide home visits or out of hours services when the patient is at home, away from, and unable to attend, their registered practice.

Practices should note the learning from the recent 'choice pilot' which anticipates demand will grow slowly and from a very low base.

- The 12 month choice pilot was focused in four large city centres with high numbers of commuters. Manchester and Nottingham had similar levels of participation while Salford had lower overall participation. Westminster dominated the number of Out of Area patients.
- A total of 1108 patients registered with the 43 pilot practices and uptake was slow before new registered patient numbers rose appreciably.





- Based on an extrapolation of the results from the choice pilot suggests take up could be much lower at around just 0.36% of the population (or around 200,000 Out of Area registered patients in England).
- We anticipate, based on findings from the choice pilot, that patients who will
  choose to register Out of Area and further away from home will be typically
  younger, in work and without complex health problems. If this remains the
  case through national roll-out then the demand for home visits will likely be
  low.
- Just 4 home visits were recorded during the 12 month choice pilot.
- The choice pilot also confirmed that the majority of Out of Area patients registering with the pilot practices were those who lived in the surrounding area of the cities concerned (e.g. commuter belt) while a few Out of Area patients lived very far from their new practice (for example, Cornwall to Manchester, Gloucestershire to London). In Westminster, not unsurprisingly, the majority of Out of Area patients lived within London's inner boroughs, with many patients in the adjacent boroughs.

A full report of the findings of the choice pilot is available here:

http://www.piru.ac.uk/assets/files/General%20Practice%20Choice%20Pilot%20Evaluation.pdf

# 2. Information for practices when considering offering Out of Area Registrations:

#### 2.1 Out of Area Registration

#### What does Out of Area Registration mean for patients?

From 1<sup>st</sup> October 2014 changes will allow patients to request to register with (or remain registered with) participating GP practices away from home, providing more choice and control for patients over where to access primary care.

For example, this type of registration may suit commuters, people moving home but wishing to stay registered with their original practice or those who live near a practice but outside of the usual practice boundary.

#### 2.2 What does Out of Area Registration mean for practices?

Changes to the GP contract from 1st October 2014 mean that any practice may offer registration to patients who live outside their usual practice boundary but without the usual requirement to provide home visits.

Offering this new type of registration will be voluntary.

# 2.3 What considerations are there for practices when considering taking Out of Area patient Registration?

When registering an Out of Area patient (or keeping a patient on the list when they move), practices will need to ensure that the patient is made aware of what to do if they fall ill at home and either requires a home visit or need to access a GP closer to home. It is expected that the patient should contact 111 in the first instance; however, if more details of commissioning arrangements in the patient home area are available (e.g. if the patient lives in the same CCG as the registered practice), these should be discussed with the patient.

### 2.4 How is the Registration of Out of Area patients recorded?

For the foreseeable future Out of Area Registration is expected to be captured as any other permanent registration but with a manual (free text) note in the registration system confirming "Out of Area patient Registration".

# 2.5 Ensuring in-hours urgent primary medical care (including home visits) for patients registered Out of Area

Because from 1<sup>st</sup> of October 2014 some patients will be able to register with a GP away from their home area (see Section 1 above) – NHS England must put in place arrangements to ensure that in these circumstances Out of Area patients can continue to access a full range of primary medical services when they are at home and unable to attend their registered practice.

A new Directed Enhanced Service (DES) is being finalised which will reimburse practices for providing in-hours primary medical services for patients who are registered "Out of Area".

If practices do not sign up to the DES the Area Team will have to commission contingency plans.

# 2.6 New Directed Enhanced Service (DES) to ensure in-hours urgent primary medical care (including home visits) for patients registered Out of Area

NHS England will offer practices the opportunity to provide services to Out of Area patients i.e. those patients registered with another practice away from where they live. To support this initiative the new DES will provide those practices that are currently have an open list.

As soon as the national final specification becomes available we will be share it with all practices.

### 2.7 What does the new Directed Enhanced Service (DES) involve?

The Service will have two elements and will provide urgent, local care to Out of Area patients who are unable to attend their registered practice:

- i) **Consultation fee** for providing access to 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) or who are recovering at home after a period of hospitalisation
  - Payment under the DES for each consultation at the practice (excluding home visits but may include telephone consultation etc.) will be a fixed price per consultation (the price is yet to be finalised but current thinking is that this will be around £11.90).
  - A payment will be made up to a maximum of 3 times for any individual patient, per annum, before triggering a review whether it is more clinically appropriate and practical for that patient to register with a practice closer to home.
- ii) Home visits fee (where deemed clinically necessary).

This will be paid to a maximum of 2 times per annum for any individual patient before triggering a review of whether it is more clinically appropriate for that patient to register with a practice closer to home (the price is yet to be finalised but current thinking is that this will be around £40).

### 2.8 Implications for CCGs

In view of the circumstances above CCGs will need to ensure their local provider arrangements recognise this new category of registered patient and ensure these are integrated into their local arrangements including overall urgent care strategies.

The introduction of Out of Area registration does not however alter a CCG's overall responsibilities as regards to securing out of hours primary medical services on behalf of NHS England.

#### 2.9 What are the implications for out-of-hours primary medical care services?

CCGs are responsible for commissioning out of hours primary medical care services for their area (except where 24-hour responsibility is retained under the GP contract) and will meet the routine out of hour's needs of Out of Area patients whether they are either:

- An Out of Area patient whose home is in the CCG area but they are registered elsewhere; or,
- An Out of Area patient who is registered with a practice in the CCG area but does not live there.