

NHS

**Has there been adequate staff
and capacity in the networks?**



Data Import

Data Preparation

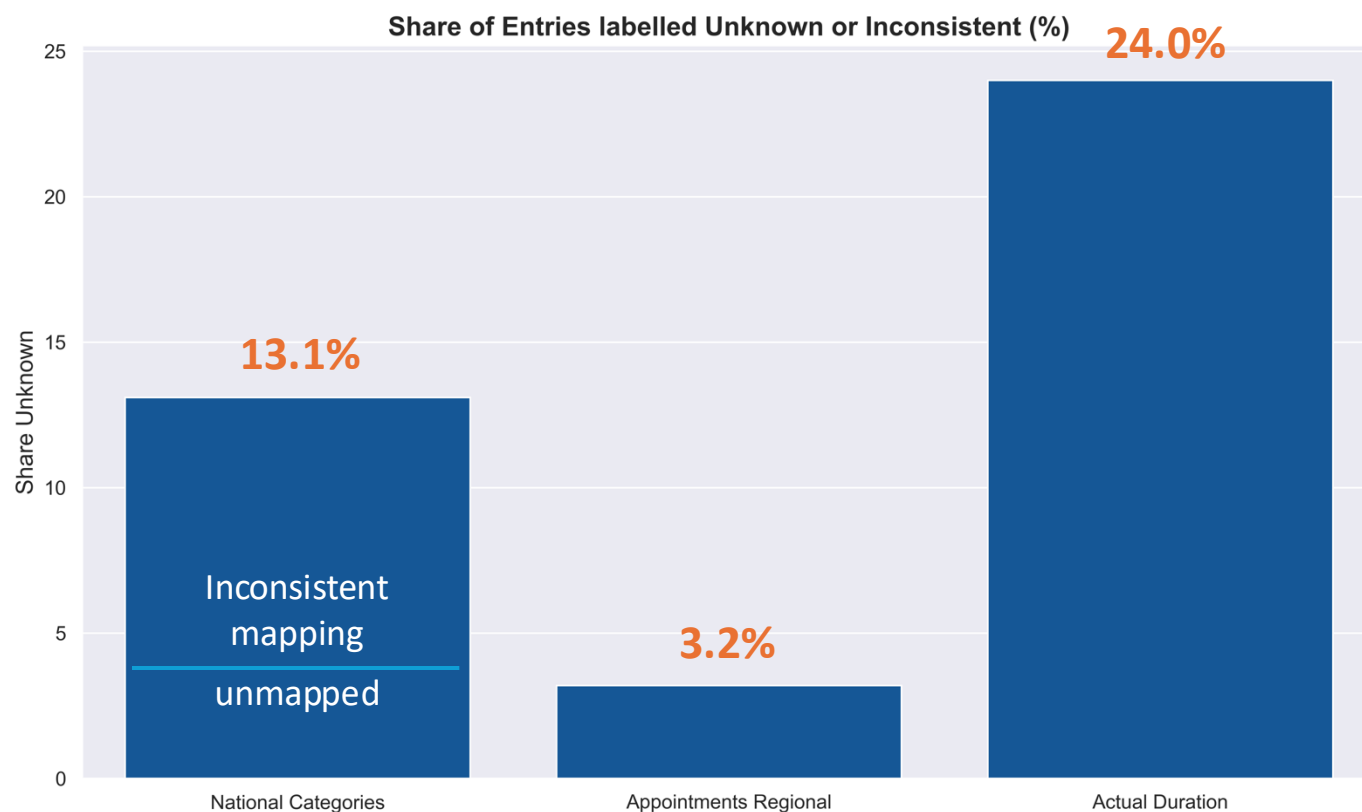
Exploratory Analysis

Recommendations

1. How good is the data quality?
2. What trends does the data reveal?
3. What are current utilisation rates?
4. How large is the impact of DNA*?

* “Did not Attend”

How good is the Data Quality?



Variations

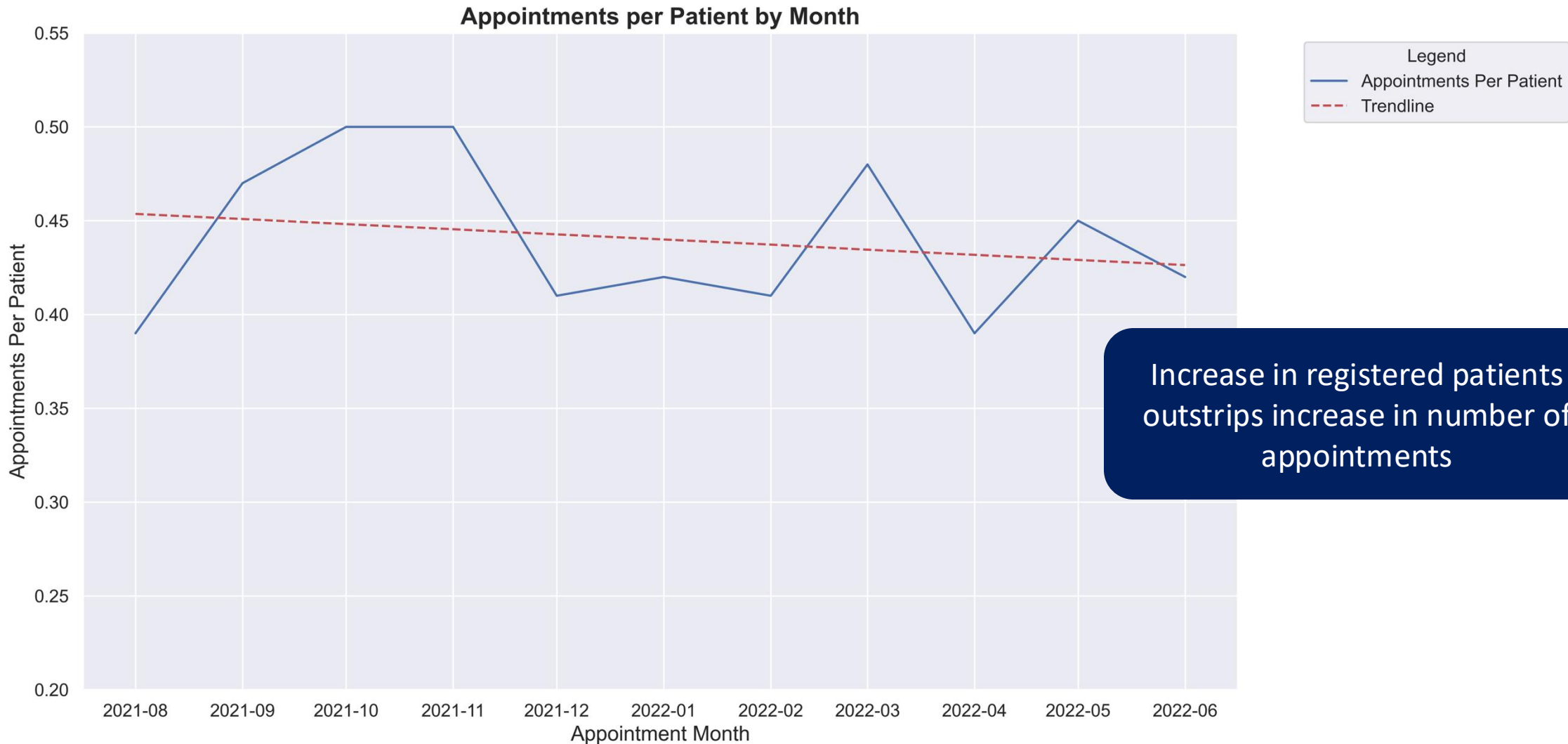
- different practices → different ways
- manual classification
- different IT system suppliers

number of appointments ≠ number of patient contacts

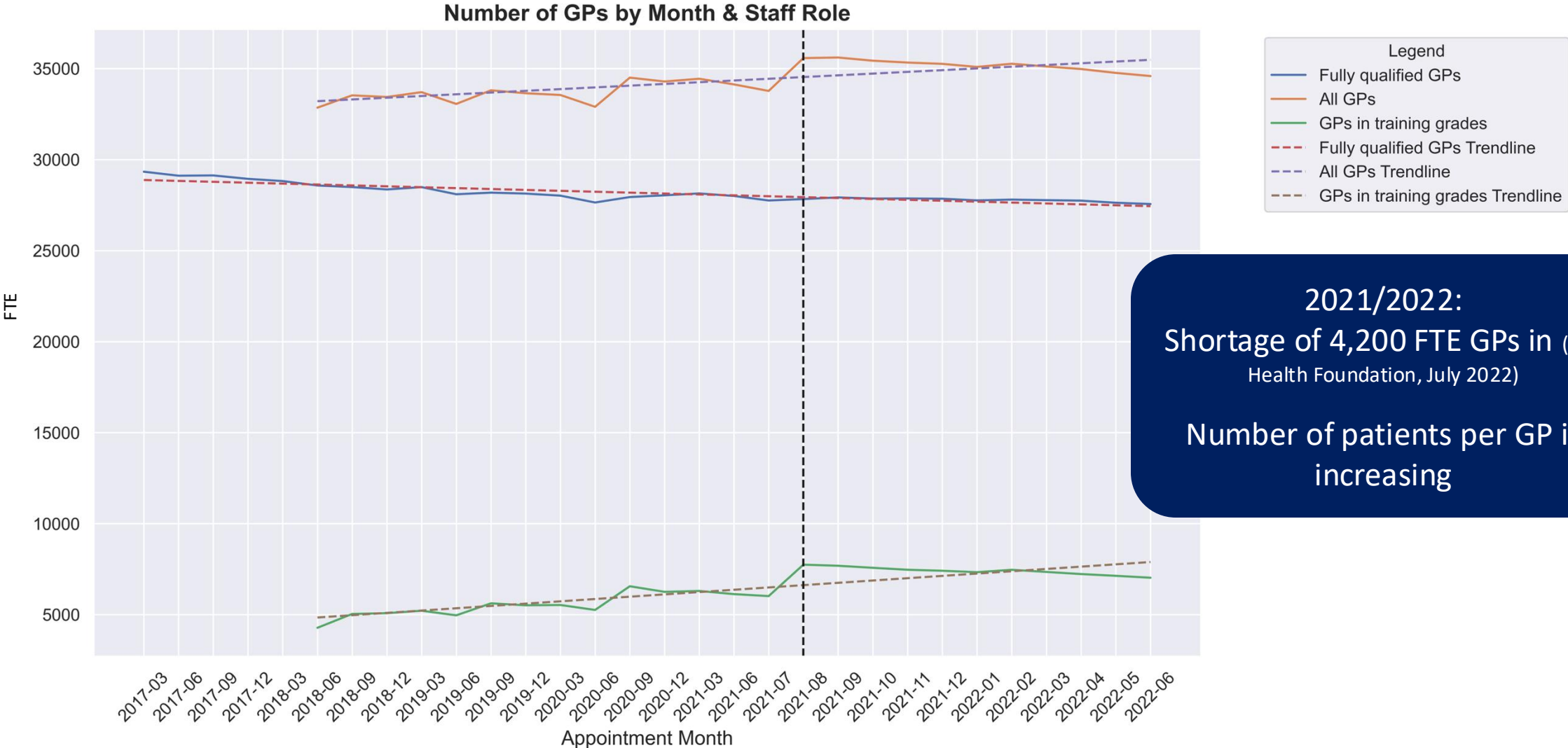
A circular graphic on the left side of the slide. It features a dark blue background with a glowing blue line graph and bar chart. The graph shows a fluctuating line with several peaks and troughs. Below the graph, there are several horizontal lines with small blue dots, suggesting a data series or a timeline. The overall aesthetic is futuristic and data-driven.

What trends does the data reveal?

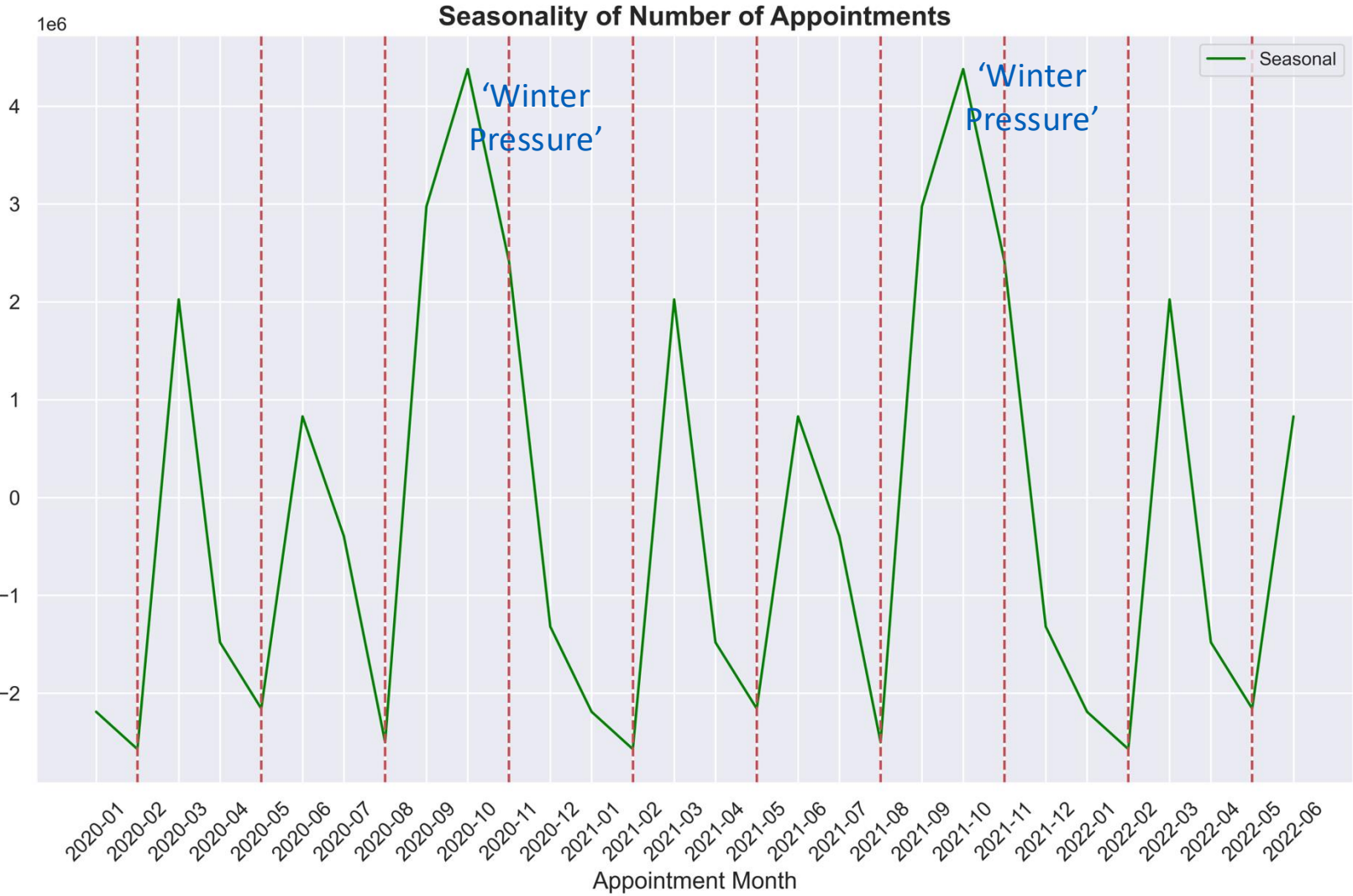
Supply not keeping up with Demand



Increasing GP Shortages

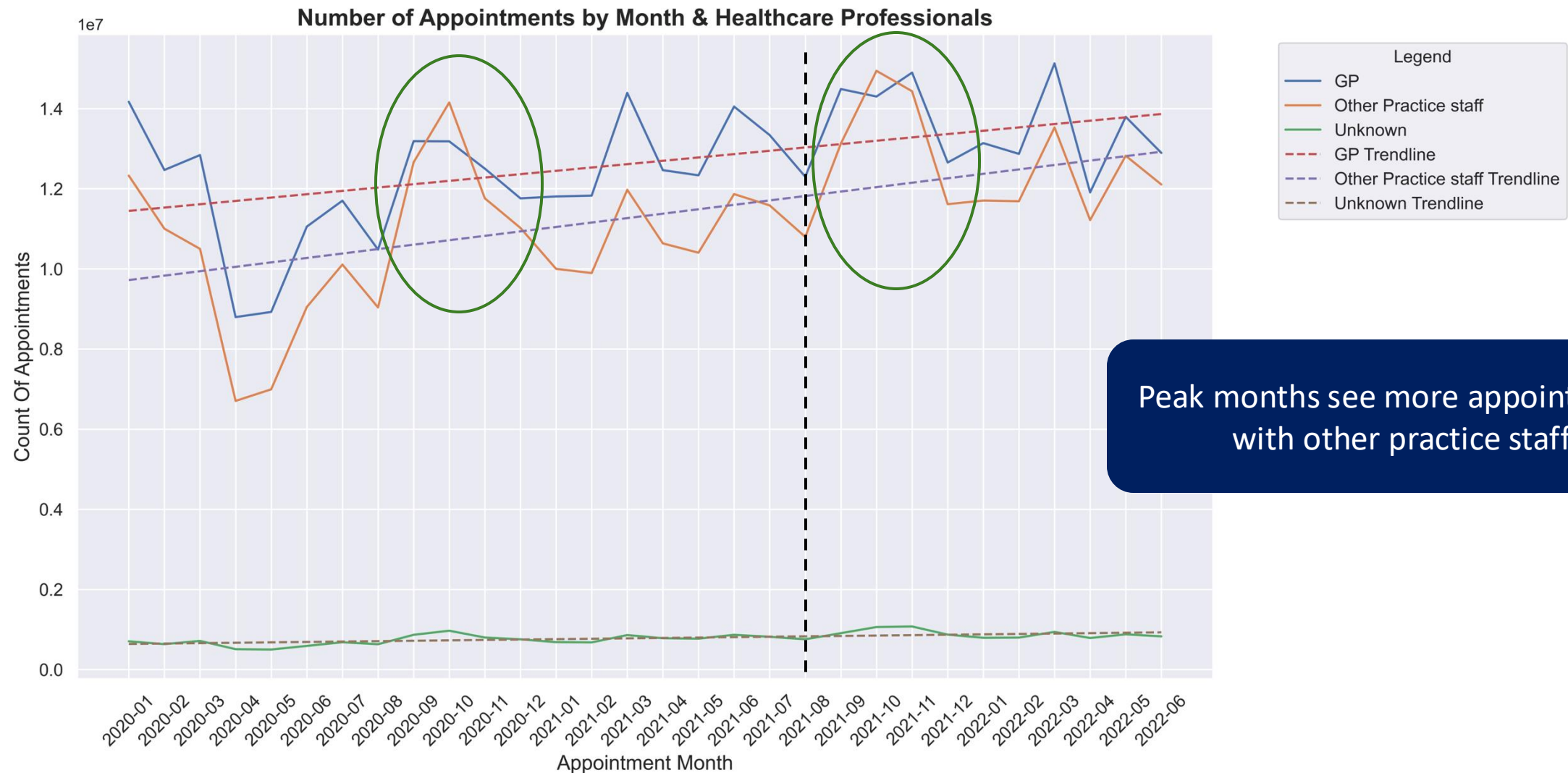


Increasing Pressure

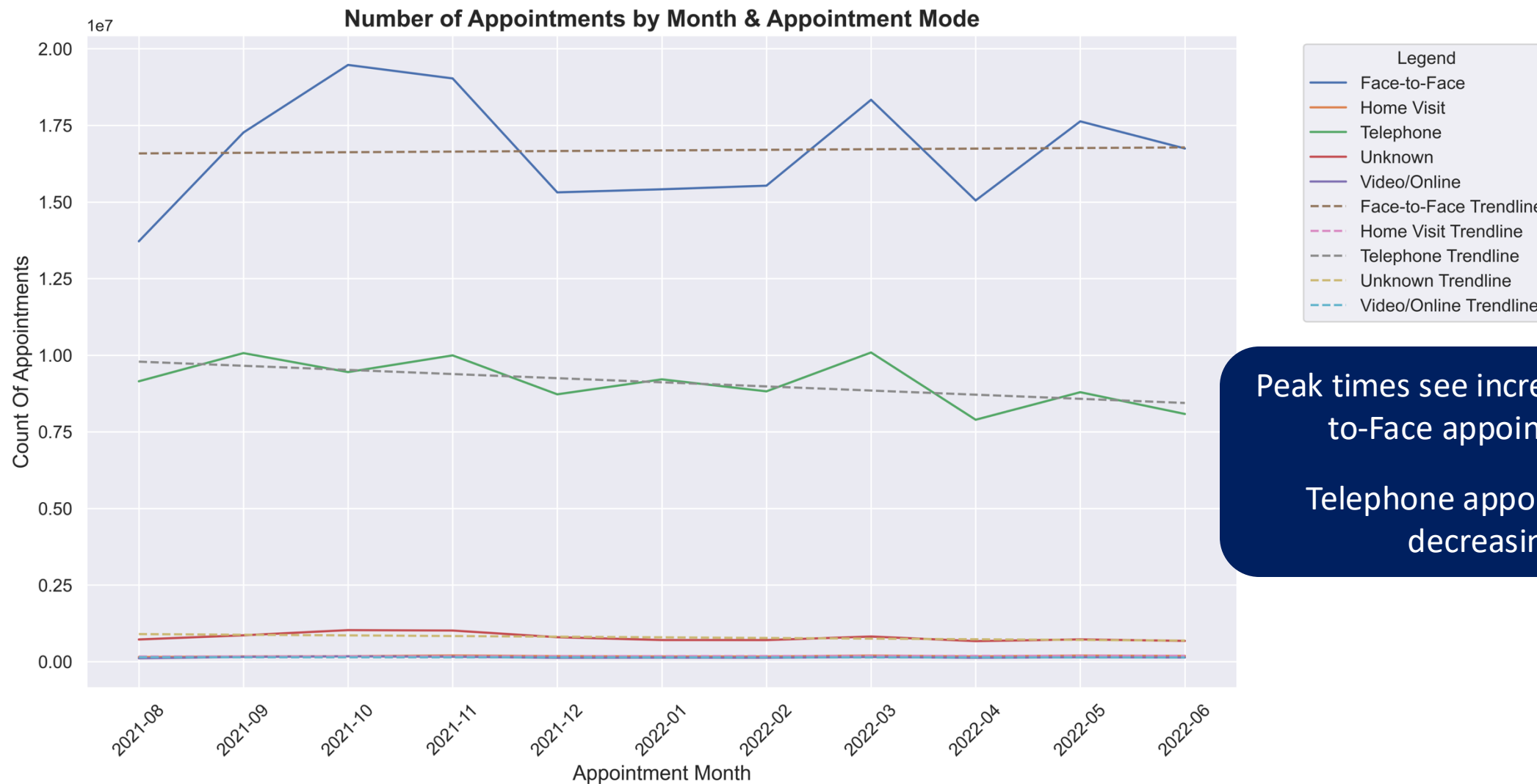


“...pressure has been building not just at winter but throughout the year.”
(NHS Providers)

Other Practice Staff cover Peaks



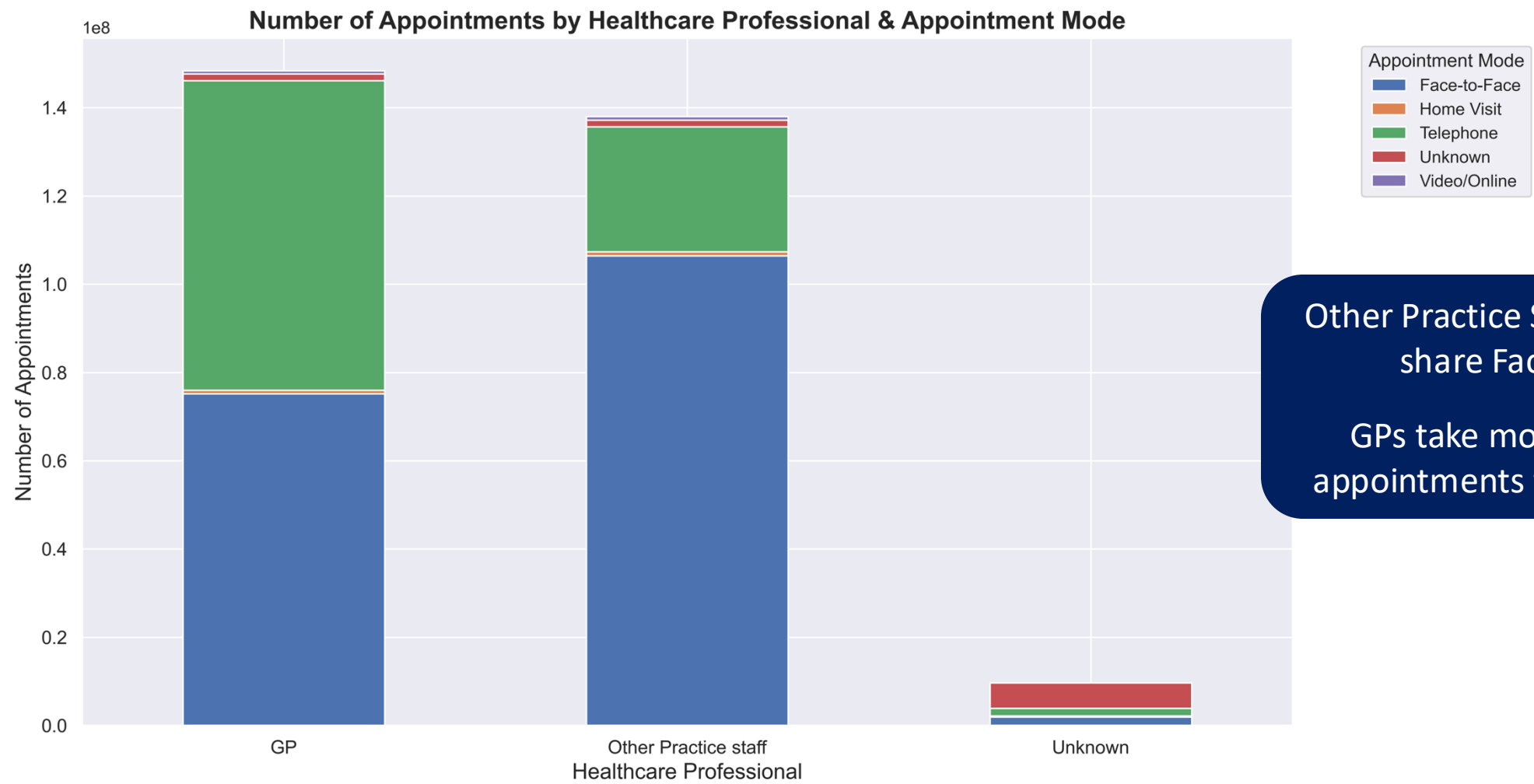
Changing Appointment Modes



Peak times see increase in Face-to-Face appointments

Telephone appointments decreasing

Role of Other Practice Staff



Other Practice Staff take higher share Face-to-Face

GPs take more telephone appointments than other staff



What is the current Utilisation Rate?

$$\text{Utilisation Rate} = \frac{\# \text{ Appointments / Workday}}{\# \text{ Average Capacity / Workday}}$$

Example June 2022

$$\text{Utilisation Rate} = \frac{1,291,404}{1,200,000} = 1.08$$

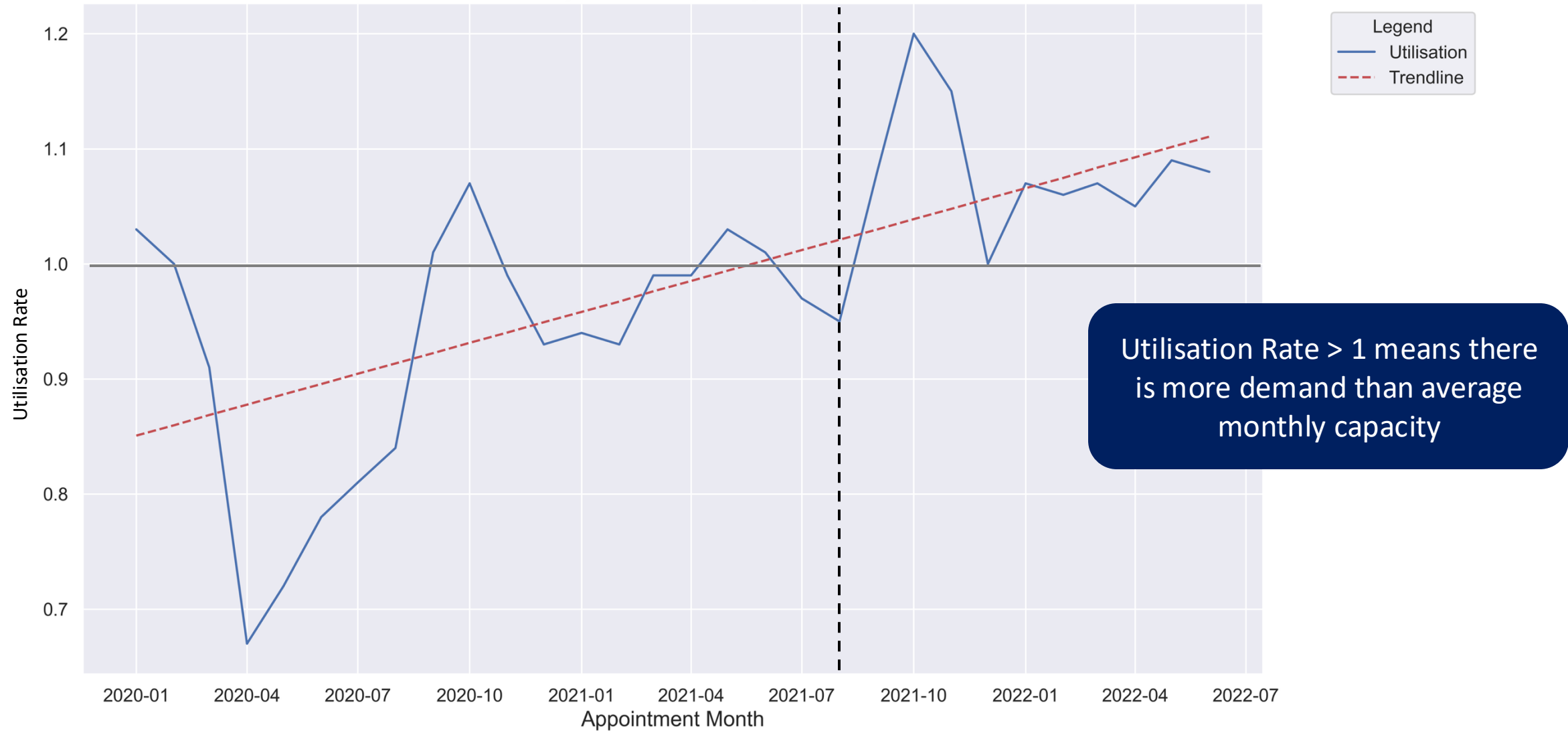
Note: Workdays vary between 19 to 23 days per month

NHS: average of 1.2m appointments per day as available capacity

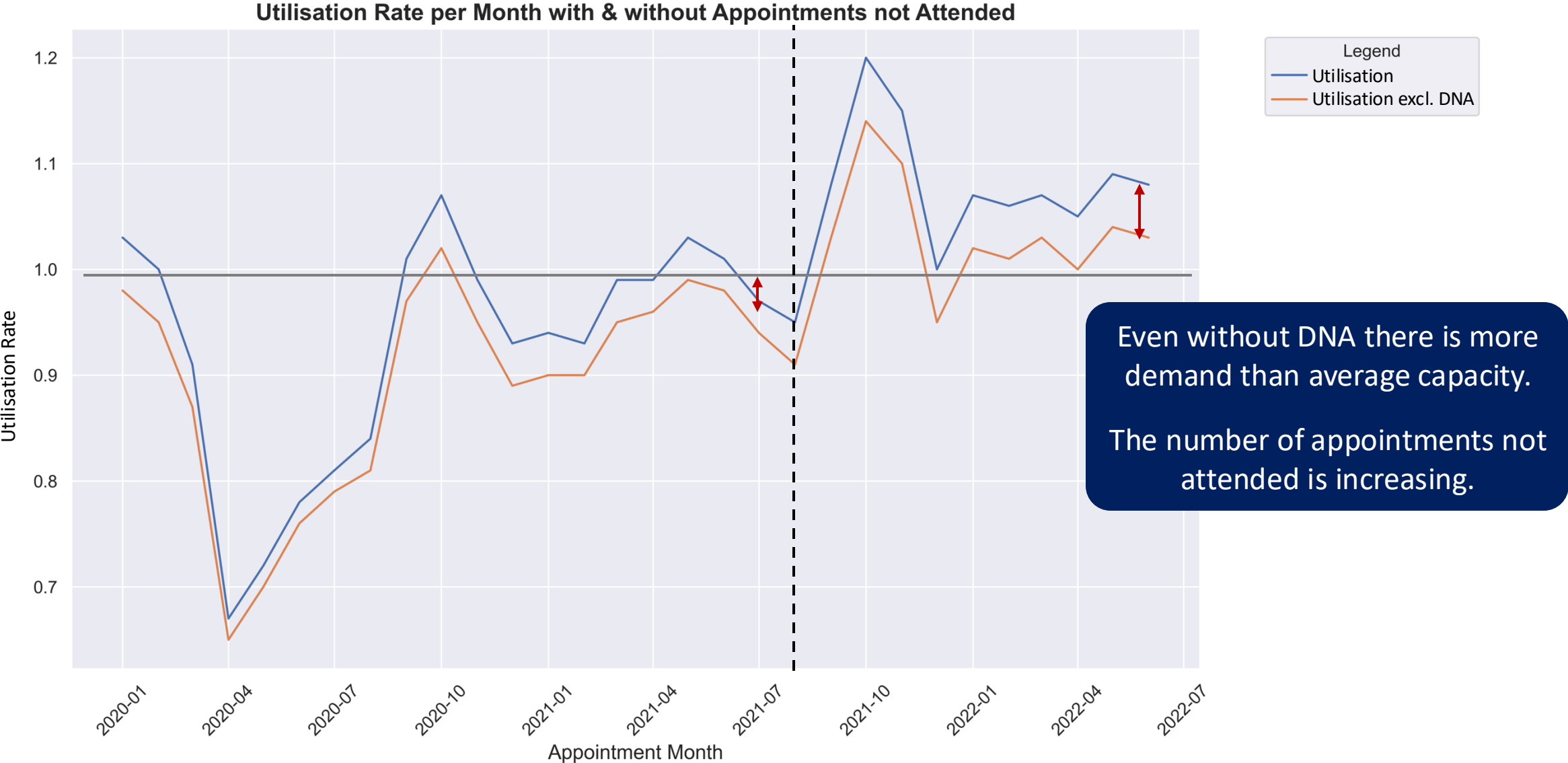
Upward Trend in Utilisation Rate



Utilisation Rate by Month: January 2020 to June 2022



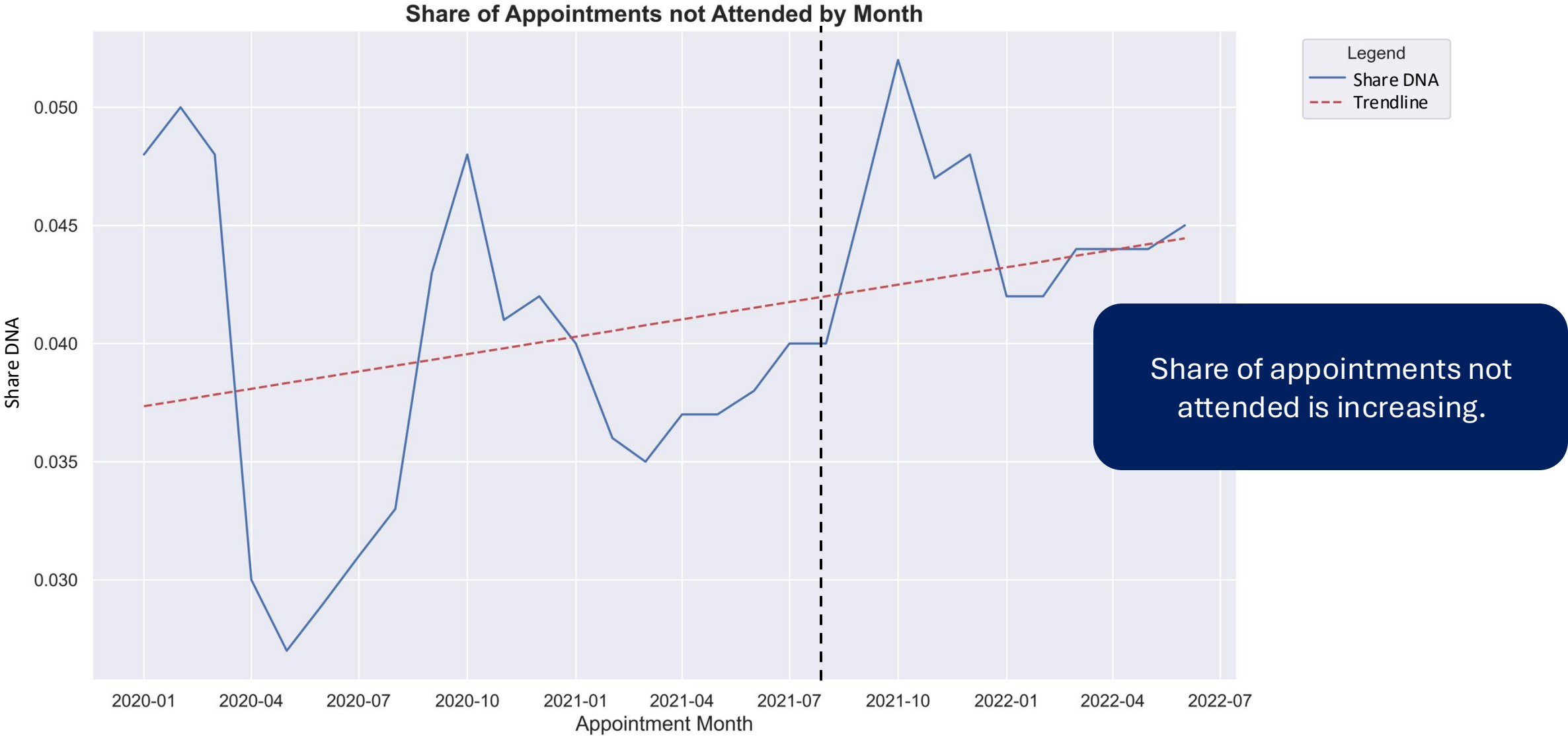
Impact of DNA on Utilisation



A circular inset image on the left side of the slide showing a waiting area with several blue plastic chairs on a green carpet. In the background, there is a large window and a small decorative light fixture.

“Did not Attend” (DNA)

Upward Trend in Appointments not Attended



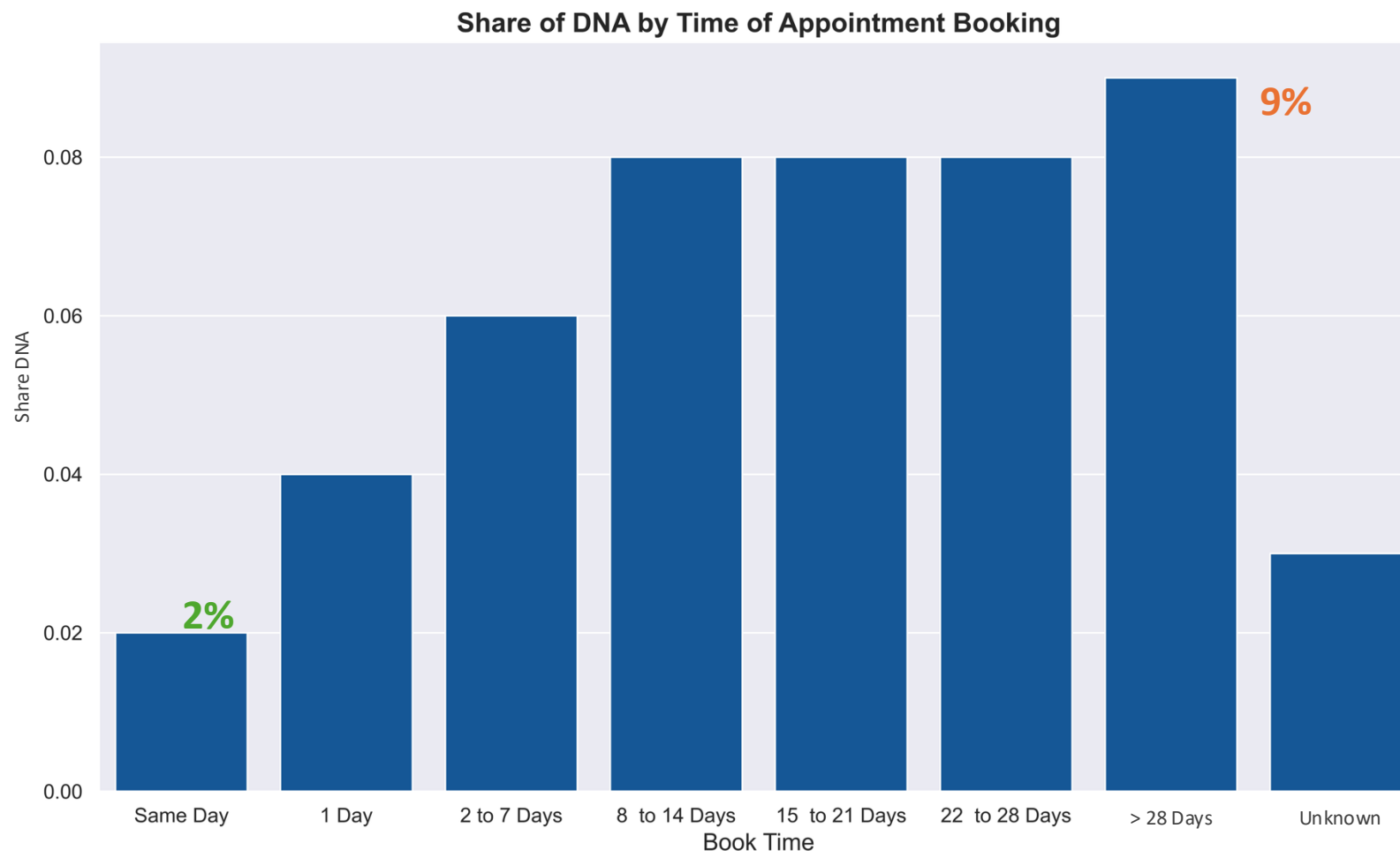
Reasons for Missing Appointments



- forgetting appointments
- being too ill to attend
- feeling better
- work & family commitments
- transport problems
- appointment not with a preferred GP
- difficulty cancelling appointments

Reasons for Missing Appointments

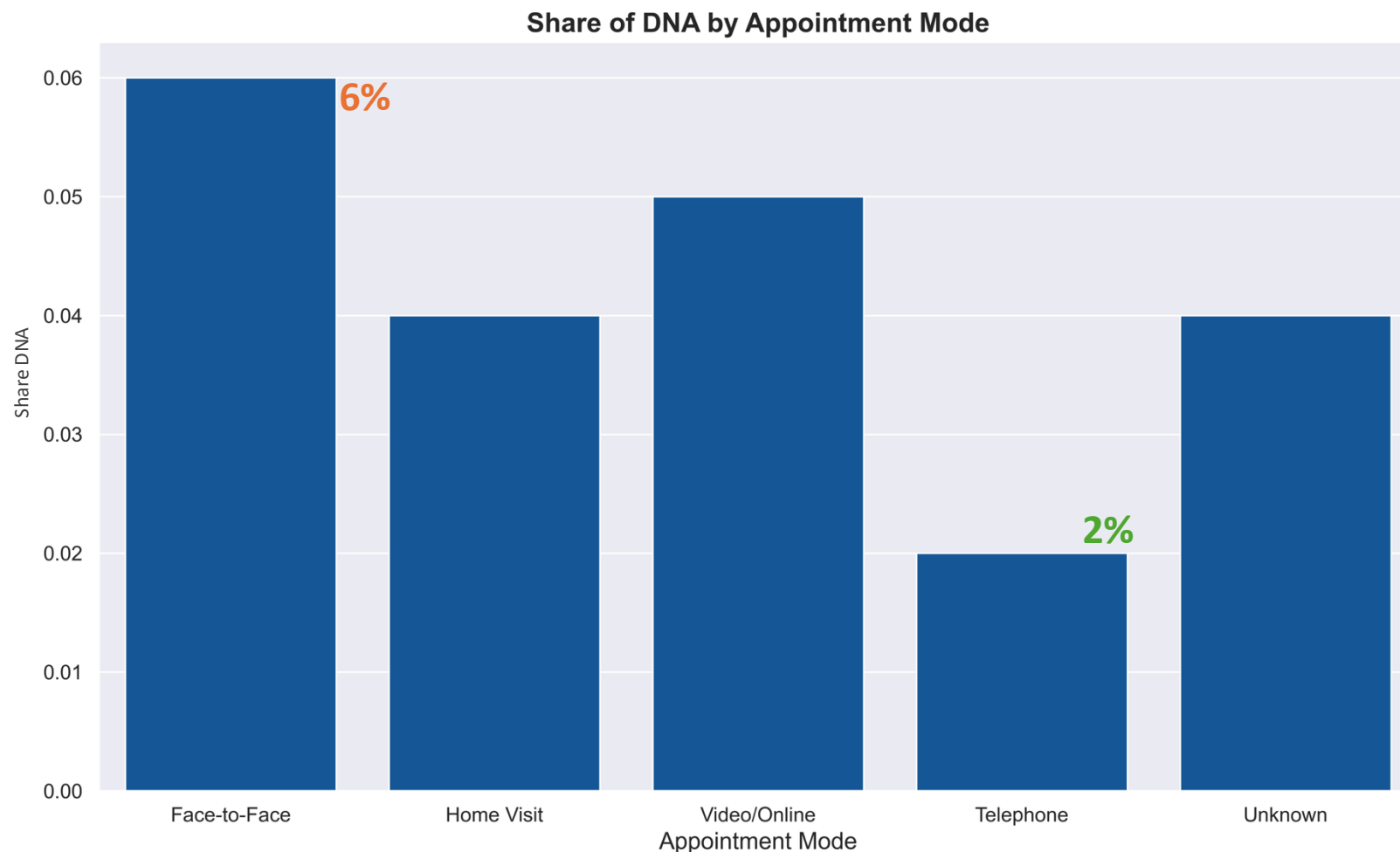
➔ Booking further in advance



- **forgetting appointments**
- being too ill to attend
- **feeling better**
- work & family commitments
- transport problems
- not with a preferred GP
- difficulty cancelling

Reasons for Missing Appointments

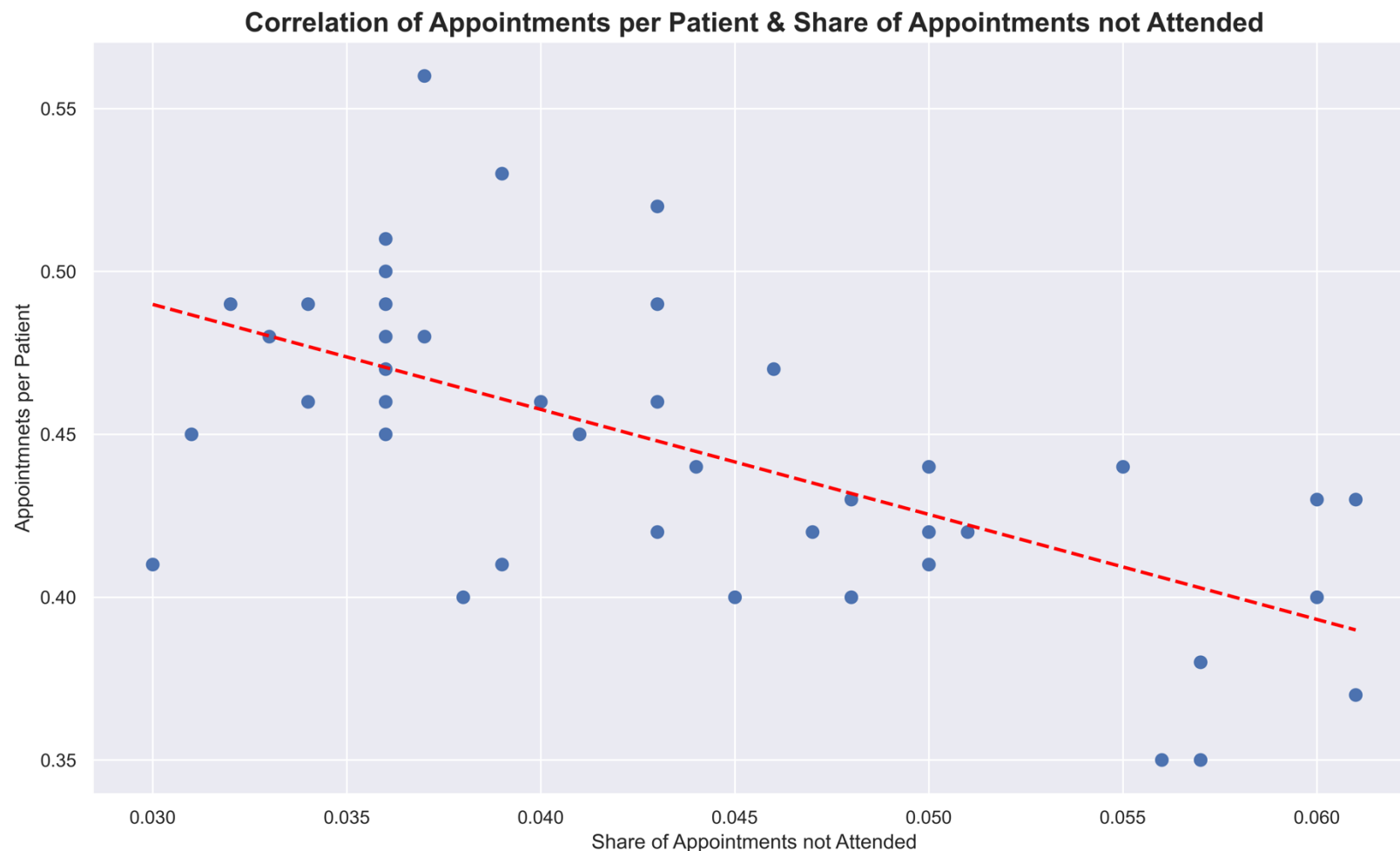
➔ Fewer telephone appointments not attended



- forgetting appointments
- **being too ill to attend**
- feeling better
- work & family commitments
- transport problems
- not with a preferred GP
- difficulty cancelling

Reasons for Missing Appointments

➔ Fewer appointments per patient



- forgetting appointments
- being too ill to attend
- feeling better
- work & family commitments
- transport problems
- **not with a preferred GP**
- difficulty cancelling

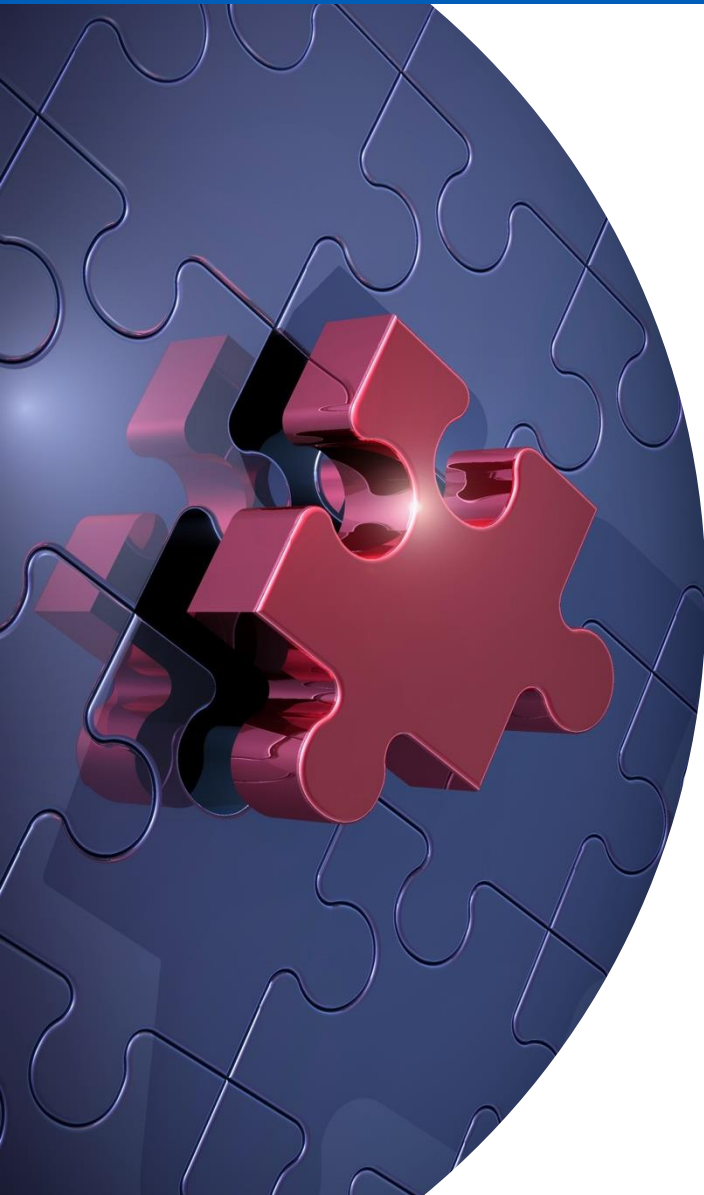
The Cost of Appointments not Attended

13,318,384 appointments
were not attended in 11 months

equivalent to **11** more workdays
or at least **£115m**

From August 2021 to June 2022

Assuming appointment cost with GP of £30 for 3.8m appointments



GP shortages

Increase in Registered Patients

Increase in Utilisation Rate

➔ demand for more capacity



Recommendations

Better Data = Better Decisions

Improving Data Quality



Access to training & support for digital tools

- Target Audience: GPs & Practice Teams
- Resource: NHS Website & Training Teams

Introduce National Standards for Data Entry

NHS
England

Digital Services Data Cyber Developer News About

NHS Digital > Publication System > Statistical > Appointments in General Practice > Improving Data Quality

Improving data quality

The data quality items listed below have been flagged as requiring attention therefore the information below aims to provide guidance on how to address these issues.

Page contents

- [Top of page](#)
- [Checking your data](#)
- [Raw data download](#)
- [Unmapped appointments](#)
- [Appointment status](#)
- [Unknown appointment mode](#)
- [Unknown HCP type](#)
- [Inconsistent Mapping](#)
- [Administrative categories](#)
- [0 minute duration](#)
- [Unknown duration](#)
- [Time between booking and appointment](#)

Much of the information collected as part of GPAD is useful for understanding activity taking place in general practice, however the data quality of certain aspects of the collection are not yet fully understood. NHS England are aiming to understand certain areas of data quality better in order to ensure activity in general practice is more appropriately reflected in the Appointments in General Practice publication. The data quality items listed below have been flagged as those which need improvement, and therefore we have produced guidance to help you understand your data and and minor updates your appointment book in order to better reflect what activity is taking place.

Addressing historic DQ issues

Please note that any changes made in the appointment book system will not lead to retrospective updates of the GPAD data which underpins the dashboard. Data is collected weekly and therefore any changes you have made should be seen going forwards. If the guidance below does not help address the data quality issues flagged for your practice/PCN, or you see no improvements after making amendments then please raise a request via our contact centre.

Checking your data

The dashboard aims to provide practices and PCNs with information about the data collected in GPAD, the data should reflect the appointments in the GP system appointment books and we therefore ask that you check that this is the case. This is easiest to do by limiting the dashboard to a smaller period of time, such as 1 week, and cross checking aspects of the data against your appointment books such as the total appointment count, appointments mapped to a specific national category.

Please note that there will be a time lag on data in the dashboard compared to your appointment books as NHS England only receive data and update the dashboard on a weekly basis, and only receive updates to appointments from the past week. Any amendments to appointments prior to this will not automatically be reflected in the GPAD collection or the dashboard.

Raw data download

The 'raw data' download on the GPAD dashboard enables you to download the latest 4 weeks of appointment level data for your practice as an Excel or CSV file. This data will be updated each week and only the latest 4 weeks of data will be available. This data can be used to cross check with what can be seen in the appointment book system at the individual appointment level and is therefore useful to:

- identify any discrepancies between what is being extracted via GPAD and what appears within the system
- understand how appointments are mapped or categorised
- make amendments to appointment slots which may be identified as being inaccurate
- identify known areas of data quality issues to feed back to NHS England, GP system suppliers or commissioners, for example

The data dictionary file below contains further information regarding what each column of the data is. Where areas of poor data quality are identified, please use the information within this webpage and the weblinks within the data dictionary to understand what action needs to be taken to improve data quality.

If you have any questions or concerns regarding your raw data download then please contact primarycare.domain@nhs.net with the subject 'Raw Data Download - Practice Code'.

Data dictionary

GPAD dashboard raw data download

[NHS Website](#)

Improving Data Quality

Start with Sub-ICBs with most quality issues

- Area: Actual appointment duration
- Who: 20 of 106 Sub-ICBs
- Issue: Share of Unknown / Data Quality Issues > 30%

sub_icb_location_ons_code	sub_icb_location_name	actual_duration	1-5 Minutes	6-10 Minutes	11-15 Minutes	16-20 Minutes	21-30 Minutes	31-60 Minutes	Unknown / Data Quality	total_appointments	Unknown per Total Appointments
E38000226	NHS Lancashire and South Cumbria ICB - 02M		56820	80817	65894	42762	39821	21930	268055	576099	0.465
E38000163	NHS North East and North Cumbria ICB - 00N		44112	60721	47809	29315	24935	12799	174922	394613	0.443
E38000068	NHS Cheshire and Merseyside ICB - 01F		42523	51667	39640	24997	23460	14875	151234	348396	0.434
E38000091	NHS Cheshire and Merseyside ICB - 01J		65936	70902	53685	34319	34106	22364	174257	455569	0.383
E38000172	NHS Cheshire and Merseyside ICB - 01X		61600	71021	58325	38848	39421	26515	182788	478518	0.382
E38000240	NHS North Central London ICB - 93C		479241	554789	483885	331829	327070	225123	1393313	3795250	0.367
E38000187	NHS Greater Manchester ICB - 02A		56631	77742	61859	41345	38144	22476	167594	465799	0.360
E38000205	NHS Greater		103319	123342	96383	63624	62767	39561	268433	757429	0.354

Incomplete Data Extract

Increase availability of appointments

Use available resources more effectively

Implement Government Mandate



The Government's revised 2021-22 mandate to NHS England and NHS Improvement

Published 31 March 2022

ensuring that patients who need an appointment get one within 2 weeks

Increase appointments carried out by Other Practice Staff

Healthcare Professional Type	Healthcare Professional
GP	GP Registrar
GP	Locum GP
GP	Principal GP
Other Practice staff	Acupuncturist
Other Practice staff	Chiropodist
Other Practice staff	Community Psychiatric Nurse
Other Practice staff	Counsellor
Other Practice staff	Dispenser
Other Practice staff	District Nurse
Other Practice staff	Health Visitor
Other Practice staff	Interpreter/Link Worker
Other Practice staff	Osteopath
Other Practice staff	Other Practice Staff
Other Practice staff	Physiotherapist
Other Practice staff	Practice Nurse

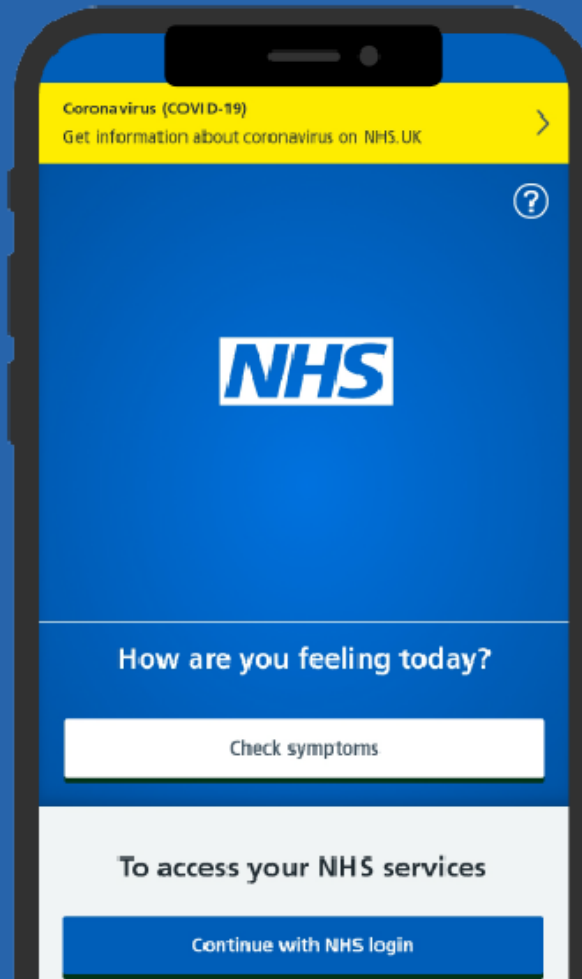
Reducing Appointments not Attended



Expand the use of the NHS App



Encourage use of NHS 111
or use the NHS App



The NHS App

Simple and secure
access to a range of
healthcare services

Raising Awareness with Social Media



Top 18 trending hashtags around healthcare





**Set Target:
additional 7.2m appointments**

equivalent to
6 more workdays/ year



Formulate KPIs

- Data Quality
- App Users
- Role Other Practice Staff
- Reduction in DNA

NHS