

March 2010

# GPC

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General Practitioners  
Committee

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## The Extended Hours Access Scheme 2010 - England

### **Guidance for GPs**

BMA 

## The Extended Hours Access Scheme 2010

GPC and NHS Employers have agreed that the Extended Hours Access Scheme will continue for a further year from 1 April 2010.

The associated DES Directions, which come into effect on 1 April 2010, can be found [on the Department of Health website](#).

Directions amending the SFE, which also come into effect on 1 April 2010, can be found [on the Department of Health website](#).

The main change from the existing arrangements will be that **practices will be required to indicate by 30 June 2010 whether they are proposing to participate in the new Extended Hours Access Scheme** (or equivalent local arrangements) **in 2010/11**, so that PCTs are clear early in the financial year which practices will be involved.

PCTs must, before 30 April 2010, offer all existing GMS and PMS contractors in their areas the opportunity to enter into arrangements for extended hours access under the DES Directions. Contractors that wish to participate in these arrangements must submit a written proposal to the PCT within 28 days of the PCT's offer to enter into arrangements under the DES Directions.

Where possible, PCTs must enter into these arrangements with practices before 1 July 2010. PCTs will not normally be obligated to enter into extended hours access arrangements after 30 June 2010 (exceptions are set out in the Directions). However, PCTs retain the discretion to do this if they wish.

Any agreement made under these DES Directions will last until 31 March 2011.

Extended access to GP services remains a priority of the English government. The Department of Health has made it clear that PCTs should try to maximise the number of practices offering extended hours access and is keen that PCTs commission additional appointment times in line with patient preferences as expressed through the GP patient survey.

Once PCTs have established which practices will be involved in the scheme, they are expected to commission alternative arrangements for patients whose practices are not involved in the DES or equivalent local arrangements. PCTs will be advised to use the balance of the funding available for extended opening to commission these services from:

- other GP practices already participating in this initiative
- GP health centres
- out-of-hours providers.

There is obviously a risk in this policy of further fragmentation of routine patient care, especially as information sharing between practices is far from straightforward. The reality is that consultations taking place outside a patient's normal practice may be limited for practical reasons to treatment of minor illness.