

Primary Care
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2 March 2026

Subject: Access Specification 2025/26 – Data Review and Actions Required

Dear PCN Clinical Directors and Managers (for onward cascade to Practices, as needed)

As we approach year-end, we are writing to share your current performance data for the 2025/26 Access Specification.

Our aim in doing this, is to:

1. Ensure PCNs have full visibility of their recorded activity and progress, thereby enabling constituent practices to work together to:
 - Address any gaps or areas of shortfall
 - Review areas where targeted activity could increase PCN share of the related funding
 - Ensure that all remaining reports are completed and submitted by the deadlines
2. Clarify the ICB's intention regarding assessment:
 - noting a further breakdown that will be applied to the individual elements
 - of the NHS App registration - recognising that there have been national changes affecting the data
 - for clinical coding – recognising that achievement needs to be measured but that the ask in the specification was unachievable
3. Remind PCNs of the final submission dates and requirements

A further breakdown

In the 2025/26 Access specification, the ICB set out how the available funding would be allocated against the main themes: 35% for Accessibility, 10% for Continuity and 15% for Digital and Engagement.

The ICB has, however, now agreed to further subdivide the funding. This approach:

- ensures that the elements requiring the greatest effort to implement are aligned with a higher proportion of the available funding
- supports a more flexible model, rather than the previous all-or-nothing arrangement. For example, under the Continuity theme, a PCN that delivers the requirement to flag 2% of its patients but does not complete the audit, can now receive a partial payment of the funding available for this theme

The further breakdown percentages can be found within the attachment: *2025/26 Access: Progress Review (PCN)*

Assessing the NHS App metric

PCNs/Practices were tasked with increasing NHS app registration by 10% against their March 2025 baseline (as recorded on the NHS England dashboard and provided to PCNs at the outset of the year).

NHS England, however, made an in-year change to the methodology for measuring NHS App registrations which altered the baseline. In recognition of this, the ICB has agreed to provide funding to all PCNs that show any positive increase in their year-end position against the new, revised baseline.

Assessing Clinical Coding

The specification asked Practices to “code every direct clinical care interaction with their patients (remote or f2f) – either on their GP appointment ledger or via a unique SNOMED code for clinical activity outside of the appointments ledger.”

The ICB recognises that capturing every clinical interaction that occurs outside the ledger is too challenging an ask as it relies on clinicians remembering and manually coding. This is contributing to the wide variation we are seeing between PCNs in the data provided. To set a fair and realistic threshold, the ICB has determined that PCNs will receive 100% of the available funding where they record patient total clinical activity for the year at a rate of at least five cases per 1,000 registered patients (0.5% of the registered list size) by year-end, logged in line with the requirements of the specification. This threshold provides a reasonable and achievable measure of activity and ensures alignment with the associated audit, which will also be assessed and paid at the same rate, in line with the specification.

Final submissions

Type	Improvement Plan Requirements	Due Date
Metric	90% of calls answered within 10 mins	Final submission: Extended to 10/04 to capture end-of-quarter data. Please use of the template provided
Metric	90% of e-submissions are responded to by end next working day.	Final submission: Extended to 10/04 to capture end-of-quarter data. Please use of the template provided
Metric	SNOMED coding to record direct clinical care that is not in the appointment ledger	<ul style="list-style-type: none"> Accessibility Audit monthly summaries (Jun-25 - Jan-26) completed A PCN-level summary report confirming monthly figures and an assessment of the learning should be submitted by 13/03/2026. Use of the provided template in the Appendices is recommended but not mandatory.
Audit	Audit of use of clinical time	
Metric	Continuity flag for at least 2% of the registered patient list is in place	<ul style="list-style-type: none"> One-off Continuity Audit of high-risk patients (Nov-25 - Jan-26) completed A PCN-level summary report needs to be submitted by 13/03/2026 outlining the findings and the specific actions that have been taken/will be taken as a result. No template is provided.
Audit	Review of a 10% sample of the identified registered population	

Report	Patient engagement via annual survey (>4% return) and engagement event	Submit report in any return and by 13/03/2026 , outlining the overall level of return for the survey, the findings, the date of the event and number of patients attending, plus the overall learning and actions. No template is provided.
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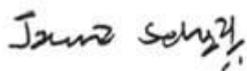
Next steps:

PCNs are asked to

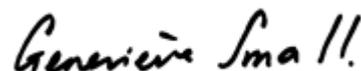
- Review the data provided in the Appendices and attachments to note where additional action can make a real difference
- Support constituent practices to maximise delivery in the remaining time
- Ensure all gaps are addressed and any final submissions are completed in line with the requirements in the specification and the 13th March deadline.

We recognise the significant effort that practices and PCNs have made this year and want to take this opportunity to thank you once again for your ongoing work to improve access for patients across North West London.

Yours sincerely,



Javina Sehgal
Director of Primary Care,
NHS North West London ICB



Dr Genevieve Small
Medical Director, Primary Care,
NHS NW London ICB

Appendices

A. 2025/26 Access: Progress Review (PCN)



NWL Primary Care
Access 25-26 Progress

B. 2025/26 Access Dashboard link: [Access](#)

C. 2025/26 Quarter 4 Access Metrics Template



NWL Access
Improvement Plan D

D. Audit of Clinical Times Summary Report (PCN)



Audit of Clinical
Times - Practice Sum