

14 June 2019

Dear Colleagues

Annual allowance and tax change survey

For many months now, we have been [expressing our grave concerns](#) about the current pension taxation system and the unintended but serious consequences this is having on patient care and the wider NHS, caused by GPs being forced to cut back on their sessions or even retiring completely to try to avoid the onerous and pernicious annual allowance tax penalties which they are unfairly landed with.

While we note that the Secretary of State for Health and Social Care and NHS England have [acknowledged the problem and have agreed to review](#) the NHS pension scheme arrangements, our modelling has shown that the solution they have proposed surrounding pension flexibility (50:50) will categorically not solve the problem.

We need you to help us influence that review by filling in this brief survey about the impact that the current pension arrangements have had on you and your decisions about the amount of work you do. Please take a few minutes to fill it in [here](#). Please share this survey widely to encourage as many GPs to complete it as possible. You can read the BMA press release and letter [here](#). It was reported in iNews, [Financial Times](#), [Pulse](#), [OnMedica](#), [GP Online](#) and [Pensions Age](#).

Tackling anti-GP rhetoric

Many of you will have seen the unhelpful [reporting from the BBC](#), after an announcement from NHS Counter Fraud Authority (NHSCFA) that said it would be launching an investigation into so-called "ghost patients". I made it clear in response that unjustified anti-GP rhetoric to hide the failure of NHS England commissioned PCSE/Capita to do regular list validation just undermines the morale of hardworking practices.

I said: "There are many reasons why the number of patients registered with a GP practice may not reflect official population data, and we should therefore be wary about the term 'ghost patients' which will be offensive to the many patients who could be contacted as part of this process but who have very real healthcare needs. You can only be registered with one GP at a time, and while some of these will be people that have recently died, or left the country, others may be homeless or simply unaccounted for in government statistics, and we would be concerned at any suggestion that any discrepancies are down to wilful deception by hardworking GPs. Data checks on practice lists is currently the responsibility of Capita, which we know has overseen a litany of failures in its running of GP back office functions. Practices, as always when this has been carried out in the past, will be doing all they can to engage with this process. Anti-GP rhetoric that attempts to distract from the failure of Capita to undertake list revalidation properly only undermines the morale of hardworking practices." This was reported in [GP Online](#), [MailOnline](#), the i Paper (print) [MedScape](#) and [OnMedica](#). I was also interviewed by Eamonn Holmes on TalkRadio about this.

Medical Defence Union legal action

The [Medical Defence Union](#) has taken legal action against the Department of Health and Social Care (DHSC). Unlike the MPS, they have not yet reached agreement on an existing liabilities scheme with DHSC. We issued a statement to say: "The introduction of the state-backed indemnity scheme in April, negotiated by the BMA as part of the five-year GP contract deal, was a huge step forward for hard-working GPs, and will save them thousands of pounds a year. GPs will be understandably concerned about the legal dispute between their MDO and the Department of Health and Social

Care. It is disappointing to see this happening. The BMA continues to engage with all parties on indemnity issues and we would urge those in dispute to resolve these differences relating to existing liabilities through discussion and mutual agreement. All GPs can be confident that they remain fully covered both historically and going forwards.” This was reported in [GPonline](#).

Primary Care Network support

The webcast from the Clinical Directors Conference last week is now available and can be accessed [here](#), and Krishna Kasaraneni, GPC England Executive and chair of the event, has written a blog about this which you can read [here](#).

We also hosted a PCN webinar - *A practical guide to the Network Agreement Schedules* - this week, where we analysed some of the core issues in completing the network agreement. Watch the webinar [here](#)

For further information about support in setting up PCNs please see our PCN webpages www.bma.org.uk/pcns

Social Prescribing: making it work for GPs and patients

We agreed plans with NHS England to fund social prescribing link workers for Primary Care Networks in England, as part of the English GP contract agreement. Social Prescribing schemes are targeted at patients who visit their GPs but do not necessarily immediately require clinical treatment. These schemes aim to address the wider determinants of health problems with supported access to community groups and voluntary organisations. GPC England has drafted this guidance to help GPs harness the benefits of social prescribing schemes through close collaboration with link workers who will, from 1 July 2019, join their extended primary care teams. Read our guidance [here](#).

GP pressures

Following on from the [BMA's analysis of the pressures on the NHS](#) in England published last month, we are now able to present more detailed figures specifically relating to GP pressures on a monthly basis. However, we know that this does not accurately represent the complete totality of GP appointments as the NHS Digital data is unable to accurately reflect all types of GP appointments across all system suppliers. Indeed, what these figures do not account for is the vast range of other activities GPs complete in their day-to-day work – including training, meetings and paperwork, which add significantly to their workload. The majority of evening and weekend appointments will also not have been included, as well as some home visits and telephone triage calls. Taking this qualification in to account the key figures for April-May are (based on [NHS Digital data](#)):

- The total number of appointments at GP surgeries in England was 24.5 million in April 2019 (39 appointments per day per GP).
- The total number of patients rose by 728,000 from last April to 59.8 million, which leaves each GP responsible for an average of 2083 patients. An extra 57 patients for each GP.
- Despite having fewer GPs working compared to April 2018, GP practices held 543,000 more face-to-face appointments this April.
- 18.5% of appointments recorded involved a wait of over 2 weeks, up from 17.6% last April.

With patient numbers rising, fewer GPs are looking after more and more patients. As a result, some patients are being left waiting weeks for appointments, and GPs are working extra hours. The BMA quarterly survey found that 3 in 4 GPs are often or very often working beyond their regular hours.

BMA review

As we reported previously, following serious allegations relating to inappropriate behaviour by

doctors at BMA and LMC related events, an independent investigation, will be taking place. The BMA has now appointed Daphne Romney QC to lead the investigation into allegations of sexism and sexual harassment. Read more [here](#), as well as my statement on the issue [here](#). It was reported in [GP online](#).

UK Doctors' Salary and Satisfaction Report 2019

Medscape has published a [UK Doctors' Salary and Satisfaction Report 2019](#), which showed that out of those surveyed, 56% of GPs would opt to stay in medicine, and almost two thirds said they would remain in the same specialty. Staffing levels and workload issues were named one of the biggest job-related challenges, for 40% of the GPs surveyed. In response to this I said: "The funding allocated to primary care under the long-term plan was an NHS first of preferentially investing in general practice, primary care and community-based services. That's a real landmark decision of the central NHS to do that. We have to now turn that into a reality. In future, doctors will see that primary care is where the funding is going, where the priorities are and where the excitement is and that the flexibility of general practice - offering portfolio working - will see clinicians increasingly choosing to become GPs". This was reported in [GPonline](#).

Proposed new contract deal for junior doctors

Negotiations to introduce a number of improvements to the 2016 junior doctor contract in England have now concluded. The deal which the BMA has agreed with NHS Employers and the Department of Health and Social Care brings a £90 million investment for junior doctors over the next four years, and includes increases to weekend and disco shift pay, £1,000 a year extra for all less than full time trainees, and a guaranteed annual pay uplift of 2 per cent each year for the next four years.

For GP trainees specifically, the terms and conditions of service will reflect the longstanding principle contained in the previous contractual arrangements for GP trainees prior to 2016, that trainees in general practice settings are supernumerary to the workforce of the practice. In addition, GP trainees that are required to use their personal vehicle on the possibility of a home visit being required on any working day shall be eligible for reimbursement for the cost of mileage and associated costs from their home to the principal place of work.

Read the full details of the agreement [here](#). Read the BMA's full press release [here](#). The story was covered on BBC Radio 4's [Today Programme](#), [BBC Breakfast](#) [HSJ](#), [The Mirror](#), [MailOnline](#), [Pulse](#), [BMJ](#), [Hospital Dr](#), [OnMedica](#), [MedScape](#), [HR Magazine](#), [BMJ \(opinion\)](#)

GP trainees committee elections

Have your say on the working lives of GP trainees in your region – voting is now open for the GP trainees committee 2019/20. Voting closes at 12pm Wednesday 26 June 2019. Seats are available in Kent, Surrey and Sussex, Peninsula, Scotland, South East London, North East & Central. Find out more [here](#).

Re-train as a GP

Health Education England is continuing to receive enquiries from doctors who are considering re-training as a GP - from other medical speciality trainees, consultants and trust and staff grade doctors. The next round of GP specialty training applications opens from 30 July – 15 August 2019 (February 2020 start). Follow the #ChooseGP [Facebook](#) page to get the latest updates or find [case studies](#), [FAQs](#) and [career information](#) on the GP National Recruitment Office (GP NRO) website. E-mail gprecruitment@hee.nhs.uk with any questions.

NHS waiting lists

I was interviewed by BBC York to discuss waiting times for an increasing number of specialist

services, such as autism assessment, and the impact this has on both patients and practices. The BBC reported that some areas of North Yorkshire has closed waiting lists while other patients had to wait for more than a year to be seen. I noted that GPs have a real concern because patients are not getting access to the services that they really need. We've seen a growing pressure on all aspects of the NHS in recent years and funding has not kept up with demand. The NHS has not been able to employ enough specialist staff to keep up with the growing needs of our patients. Listen to the interview [here](#) (around 14 minutes in).

QNI launches new national survey of District Nurse team leaders

The Community nursing charity, The Queen's Nursing Institute, has launched a new UK wide survey of the District Nursing workforce. The survey results will be analysed within the International Community Nursing Observatory of the QNI and will be published at the formal launch of the ICNO on 18th November 2019. It is anticipated that the survey will create the most accurate picture ever of the District Nursing service, including how it is adapting to changing technology, utilising innovative approaches to care, and managing rising demand and increased complexity in care delivery. The survey can be completed [online](#) and remains open until **15 July 2019**.

Former Scottish GPC chair awarded CBE

I was delighted to see that the former chair of GPC Scotland, Alan McDevitt, has been awarded a CBE in the Queen's birthday honours for services to the NHS and general practitioners in Scotland. This was very much deserved. Read more [here](#). This was also reported in the [Express](#), [Herald](#), [Scotsman](#), [i Paper](#), and on [Twitter](#).

Annual Representatives Meeting

The BMA's [Annual Representatives Meeting](#) is taking place on 23-27 June at the ICC Belfast. The ARM elections are open for a number of committees - including GPC UK. Please note that the nominations are open to all BMA members who meet the criteria for the committees. However, voting is only open to ARM delegates and will take place at the ARM. Nominations will close at 5pm on 24 June. For more information and to nominate, please go to the [on line election portal](#)

Read the latest GPC newsletter [here](#).

Read the latest GP trainee newsletter [here](#)

Have a good weekend

Richard