



From your BMA GPs committee chair

GP partners at risk of becoming an endangered species

Dear Dr

The latest phase of results from the BMA national GP survey reveals an alarming picture of the state of GP partnership and practices which, if not addressed, could risk GP partners becoming an endangered species in some areas of the country.

GP partners are suffering the greatest workload pressures compared to other categories. Just 6% of partners believe their workload is manageable, compared to 12% of salaried and 34% of locums. Only one in five GP partners is content to continue to work in their current partnership and one in three partners report that they are looking for alternative employment options.

This is against a backdrop of one in five practices reporting GP vacancies remaining unfilled for six months, and one in three unable to fill vacancies for over 12 months, exacerbating a cycle of adding even more workload on an ever diminishing pool of partners, who themselves are more likely to leave their partnership as a result.

These increasing pressures could result in a domino effect of the widespread collapse of GP practices. BMA GPs committee member Stephanie de Giorgio has written a poignant [blog](#) as to why she recently gave up being a GP partner 'with a heavy heart' to work as a salaried GP. She represents one of a tragically growing number of GPs feeling forced to give up their vocation.

This is why GPC is pressing NHS England to implement specific measures outlined in [Urgent Prescription for General Practice](#) to stem the soaring workload demands that are destabilising practices and fuelling problems in recruitment and retention. GPC is also continually updating our [Quality First](#) website with more tools and resources to enable practices to take control of their workload, which I would strongly recommend that GPs and practice managers make full use of.

The **GP Forward View practice resilience programme** provides further money and support for practices under the greatest pressure (CCGs and local NHS teams should have notified selected practices already about funding which will be made available by the end of this month). If you have applied, and not heard, please contact your LMC and CCG immediately.

The views of salaried GPs and locums

Our survey provides a valuable insight into the perspective of salaried and locum GPs. 30% of salaried GPs have made a positive career choice, valuing continuity (54%), job security (41%) and the ability to limit workload (43%).

Forty-six per cent of locum GPs say that they made a positive career choice, citing more autonomy (48%) and control over workload (76%) as the main reasons.

We should embrace a plurality of contractual options to meet the diverse aspirations of GPs. However, our survey also shows that one in two salaried and locum GPs may want to be partners but are being put off by excessive workload pressures. *The GP Forward View* espouses that more GPs should work permanently in practices; this is precisely what GP practices want – and this reiterates the need for NHS England to prioritise making GP partnership an attractive and secure career option with a rewarding workload.

You can **watch** GPC sessional committee chair Zoe Norris speak on what the survey results tell us about sessional GPs. GPC executive member Mark Sanford-Wood, who is a portfolio GP, has also written a **blog** on the workforce implications of the survey and action that the Government must take as a priority.

GPs want to work together

Our survey results also show that, if given sufficient resources, one in two GPs support the current independent contractor partnership model. However, our results equally show that nearly 4 in 10 GPs want to work in collaborative alliances with neighbouring practices and multi-professional health staff, as they see this as being key to reducing bureaucracy and workload.

The *GP Forward View* proposes using a £171m transformation fund (spread over two years) commencing in April next year which can be used to support practices working collaboratively. It is therefore vital that GP practices start having conversations and liaising with their local medical committees and CCGs (clinical commissioning groups) regarding how they would wish to use this resource.

GPC has already provided significant resources on practices working collaboratively in networks which you can access **here**.

Increasing public awareness – GPC in the media

Once again, our survey findings have resonated with the public and we received a great deal of media coverage on the pressures and threats to practices with unfilled GP vacancies – it was featured on **iNews** and **ITV online**, as well as in many regional papers such as the **Newcastle**

Chronicle, the *Northern Echo*, the *Lancashire Telegraph*, the *Darlington and Stockton Times*, and the *Huddersfield Daily Examiner*.

Holding CCGs to account to deliver the GP Forward View

As part of NHS England's planning guidance, all CCGs are required by 23 December to publish their plans on how they will implement the funding commitments in the *GP Forward View*. GPC has written to all LMCs with a **checklist** which will help them to check CCG plans, to ensure that NHS England's stated commitments are delivered on the ground in a manner that reaches the frontline of GPs and their staff. I would recommend that all practices also look at our checklist, so that you are aware of the resources and support that you are entitled to. You can find out more about the specific initiatives in the GP Forward View in our **Focus on funding and support for General Practice**

With best wishes,

A handwritten signature in black ink that reads "Chaand Nagpaul". The signature is written in a cursive style with a large initial 'C'.

Chaand Nagpaul
BMA GPs committee chair
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Meet the team – Gavin Ralston



Gavin has been appointed to his new role on the GPC England executive since October. He went to Birmingham Medical School and has lived in Birmingham since 1979. He has been a partner at Lordswood Surgery in Harborne for 26 years and has overseen the development of the practice. Gavin is also a committed and longstanding member of his local medical committee.

Gavin developed an interest in commissioning after sitting on the South Birmingham Primary Care Trust professional executive committee for three years and together with a small number of colleagues formed Birmingham Cross City CCG (clinical commissioning group), the fourth largest in the country, which he subsequently chaired.

Gavin strongly believes in the value and benefits of GPs working collaboratively with multi-professional healthcare staff to help ensure that services for all patients are flexible, joined up and effective – the kind you would be pleased for your family and friends to use.

During his time as CCG chair he facilitated the development of several robust federations, a GP provider group and a large super partnership OHP (covering 285,000 patients) of which his practice Lordswood is a founder member. Gavin's lead areas as a GPC executive member include: commissioning; working at scale; GP training; and premises.

Commenting on his appointment, Gavin said: 'General practice and indeed the NHS as a whole is at a crossroads and now more than ever we need to make certain that

general practice has a strong voice. I am really pleased to be taking up this role and looking forward to using my experience as a GP, commissioner and long standing LMC member to ensure that general practice thrives and not just survives, which is a necessity for the NHS as a whole to work well for our patients.'

Shared business services – significant incident and payment to practices

Back in April, NHS England informed us of a significant incident reported by NHS SBS (Shared Business Services), who previously provided primary care support to GPs in a number of areas across England.

SBS had identified a warehouse of patient-related written items stretching four years that they had failed to transfer to practices for processing. This includes DNA hospital correspondence, temporary resident forms, duplicate documents, patient test results and communications about treatment steps.

SBS will be sending these items to practices over the next few days for review to assess for clinical harm, and any necessary action. You should have recently heard from your local medical committee about this but there is further detail on our [website](#).

This will place extra workload on practices over the coming month(s), at a time of excessive pressures. GPC has secured funding from NHS England for this extra work which will be paid automatically to practices, based on numbers of documents received. [Details are on our website](#).

We have vociferously highlighted that this is a further example of how failures from outsourced service providers commissioned by NHS England are causing havoc on the ground for practices.

GP Forward View practice development funding – survey and support for practice managers

As part of the *GP Forward View*, NHS England is running a practice manager development programme, worth £6m, which aims to support training and networking

between managers at a local and national level, in order to share successful ways of managing workload and provide peer to peer encouragement and support.

As part of that work, they are undertaking a survey of practice managers to understand what their development needs are. Please do publicise the survey to your practice managers to ensure that the *GP Forward View* budget allocation for practice manager development is spent in areas that will have be of greatest benefit. The survey can be completed [here](#)

Please also highlight to your practice managers the free [networking events](#) which are taking place across the country this month to promote the sharing of good ideas, action learning and peer support. We know that practice managers are vital to the running of GP practices, yet many feel as overburdened and isolated in their roles as we do – therefore do encourage them to avail of opportunities for training and development to support your practice.

Sessional GPs newsletter

Please find a [link](#) to last week's sessional GPs newsletter, which in this edition, as well focusing on the views of sessional GPs on our survey results which I discuss above, also dispels some myths around working as a locum GP, and updates on the work of the sessional GPs subcommittee to ensure that locum doctors are entitled to access clinical commissioning group-led education events.

The Claire Wand Fund

The Claire Wand Fund makes grants to general practitioners to promote practice development through further education. Awards are generally granted for sums up to £3,000. [Download an application form](#)