

Dear Sir/Madam

Over the last couple of months we have been gathering Gps' views about the government's GP contract imposition proposals and those views have been incorporated into our formal response sent to the Department of Health (DH) today.

The changes would make it difficult for practices to maintain the level of care they currently offer while introducing an even greater focus on targets and box ticking at the expense of holistic, patient-centred primary care. This is of particular concern given the recent conclusions of the Francis report published during the consultation period.

### **What we are calling for**

You can read [our full response](#). In summary, these are the key changes we are seeking:

- The DH needs to return to the draft proposals developed between NHS Employers and the GPC for reducing variability in practice funding.
- Correction factor money and PMS funding removed from practices must be ring-fenced and reinvested in general practice through the global sum. Outliers need proper consideration and practices needing higher funding for legitimate reasons should be excluded from the process.
- Practice financial instability should be reduced by moving funding from the QOF organisational domain into practices' global sum equivalent or baseline funding.
- Proposals for increasing QOF thresholds must be rejected – there should be public recognition that as a result, exception reporting will increase which is an appropriate clinical response to individual patient needs.
- The changes to timescales for any QOF indicators from 15-12 months must be abandoned. If imposed, the changes should be postponed to allow for IT system changes and development of guidance.
- New DESs should not be introduced without new funding. The GPC has grave concerns about some of the elements of the DES but does, however, remain willing to work with the DH to make the DES specifications more workable and clinically appropriate and we have provided detailed comments on the proposals for DESs.
- The proposal to transfer the responsibility for locum's employer superannuation payments to practices raises serious concerns. The GPC opposes this and asks that, at least, implementation is delayed by 12 months. If pursued, the funding should be transferred to Global Sum Equivalent and PMS baselines rather than to global sum to allow a fairer distribution of funds.
- Locums must have an easy way of checking that employers' contributions have been made.
- If this is implemented, equivalence should apply to locums in all aspects of the pension scheme including death in service benefits and the ability to pension appraiser work.

### **Your feedback on the proposals**

Well over two thousand of you attended the roadshows we held throughout the UK and very many have directly raised their concerns with Ministers and local MPs. Nearly 8000 GPs in England responded to our survey detailing what they consider the implications of the proposals will be for them and their practices. You can read the [full survey results](#). The key findings are:

- 88% of respondents with some awareness of the terms of the contract imposition agreed with the statement that they personally will be less able to offer good quality care to their patients as a result of this imposition.

- Of the 58% of respondents who expected their practice would have to do things differently if the changes are implemented, 82% expected to make changes to staff working hours or employment. Of these roughly 22% expect to make clinical staff redundant and 35% would have to lay off administrative staff.
- Of respondents with some awareness of the terms of the contract imposition, 91% felt they would be less able to manage their workload, with 97% saying they believed that general practice would become more stressful for them and 92% that they felt they would be less able to achieve a satisfactory work-life balance. 89% of those with awareness of the contract terms said these proposals made them less enthusiastic about general practice as a career and 87% that they were less likely to recommend general practice as a career for new doctors.

The results of this survey are very concerning and provide us, the DH and other government departments with a clear picture of what GPs think about what is being proposed. I am particularly grateful to GPs who have helped provide this evidence and who have actively supported our position. It has allowed us to make it clear to DH that we expect decreasing morale, increasing stress and falling practice funding to have a real impact on both recruitment and retention in general practice.

#### **Our next steps**

We now await details of what the government decides it will implement and we will update you as soon as we have the information. In coming months advising and supporting GPs and practices on how to cope with what is implemented will be our key priority. Stay informed by visiting [bma.org.uk/gpcontract](http://bma.org.uk/gpcontract)

Yours sincerely

Dr Laurence Buckman  
Chairman  
General Practitioners Committee