February  2021

**Dear MP**

**Update on General Practice pressures in CONSTITUENCY**

As the current pandemic places general practice in **CONSTITUENCY** and the Capital under increased pressure, I wanted to update you on some of the key issues affecting local general practice staff and patients.

General practices are the cornerstone of primary healthcare for patients and communities throughout the UK. GPs and their patients have traditionally had a unique and special relationship based on trust and respect. Through the past ten months of the pandemic London’s general practice teams have been working with agility and resourcefulness, continuing to support patients and communities. We have changed the way we consult, planned and administered vaccine programmes for flu and for Covid-19 in the face of many logistical challenges, continued to deal with patient’s ongoing clinical needs including cancer presentations and chronic condition management, and we have shown resilience day in and day out.

**ACCESS TO GENERAL PRACTICE :**

London general practice remains fully, and safely, open. Indeed, in November 2020 we saw **XXX** general practice appointments booked across the **XXX** London STP area, compared to **XXX** appointments in November 2019. With an increase in appointments kept/ attended from **XXX** to **XXX**.. A remarkable achievement considering that the coronavirus pandemic has placed unprecedented demands on GPs, practice teams and patients alike. Despite the redeployment of general practice staff into Covid-19 hubs, and high levels of staff sickness, we have seen London general practice at its innovative best in the face of this challenge.

Healthcare during the pandemic is not an issue of primary or secondary care, but managing care across the whole health system. Despite this, we are concerned that negative media messaging is adding to the inappropriate expectations of general practice from the public, fuelled by the desire to return to economic normality sooner rather than later. GPs and practice teams were already practising at the limits of patient safety even before the pandemic due to longstanding disparities between supply and demand, and workload and workforce. The resulting conflict and disconnection from the realities of the pandemic is undermining confidence and trust amongst some patients, and morale and resilience amongst some practitioners.

**AVAILABILITY OF COVID VACCINE :**

Since Christmas practices in London have been switching to focussing on essential services due to the need to prioritise the Covid-19 vaccination programme, an unprecedented volume of patients seeking care, stringent infection control measures, and the impact of illness and isolation requirements on workforce availability.

Practices are well underway providing vaccinations to the groups prioritised by the JCVI, with eligible patients being contacted and booked-in for appointments as a priority. Whilst speed and volume of supply is clearly a rate limiting factor, practices are doing all that they can to ensure that the most vulnerable members of our communities are given the vaccine first. We understand that many people will have concerns and anxieties around when they will receive their Coronavirus vaccination and some will chose to raise these with their MP.

The diversity of London’s patient population has resulted in a range of approaches being adopted locally to engage with some of the more hard to reach groups. **Please see the** [**attached FAQ**](https://www.lmc.org.uk/visageimages/2021%20Londonwide%20Newsletters/LLMC%20Coronavirus%20vaccination%20programme%20FAQs%20-%20Feb%2021.pdf) **that covers potential questions from patients, which you may find useful when dealing with constituents queries about accessing the vaccine through general practice.**

**COVID-19 SAFETY AND INFECTION CONTROL :**

Whilst the pandemic continues, returning to “business as usual” is not an option for general practice if “usual” means practising unsafely for patients and for staff. Concerns about infection control and vulnerable patients have led to dramatic changes in the way that people work. Safe remote consultations take time; often twice as long as the already inadequate 10 minute face to face consultations we saw previously. We take seriously the threat of infection and the necessary consultation spacing and infection controlling wipe-downs impact on time, footfall and f2f appointments. With infection prevention and control measures, face to face consultations now take more GP or practice nurse time than they did before and often rely on a virtual appointment taking place beforehand.

Access to remote and face to face consultations for those truly in need continues to be our priority. Patient care has been transformed by GPs and their teams at a pace and scale that the system had struggled to deliver for years prior to the pandemic, but continuing care must be safe care. The previous mantra placing convenience over need must be laid to rest as we continue to struggle with the challenges presented by Covid-19.

**NEXT STEPS :**

We want to thank patients for their support in helping practices to prioritise those who most in need, as the Capital sees record levels of Covid-19 infections on top of seasonal pressures. And we need unambiguous communication to the public by our national leaders to ensure that our patients and communities have a clear understanding and expectation of what services can be offered; covering immediate essential needs to prevent the harms we saw in the first wave with delayed presentations for serious illness and long term condition exacerbations, and helping to ensure that people continue to access other essential services such as childhood vaccinations.

The coming weeks and months we will continue to encourage people to value, care for, and protect general practice. To value not only the services we provide but also our clinical time and our staff as dedicated professionals. To care for our exhausted GP and practice staff, other patients, and the wider community within which their local GP is embedded. To protect general practice teams from abuse, to protect services from reduction and removal, to protect general practices and their autonomy and place in the community, and to protect general practice in London, and all the values therein. Londonwide LMCs is the voice of general practice in London, supporting and representing over 7,000 GPs working full-time and part-time as well as their practice teams across just over 1160 practice in London. I hope that we can work together to protect general practice for the future in the best interests of the patients and local communities we serve.

If you would like to find out more about the work general practice has been doing in **XXX**, I would be happy to arrange an opportunity for you to hear directly from London GPs, practice managers, practice and nurses in your area, to get the view from the front line. Please contact Sam Dowling at [sam.dowling@lmc.org.uk](mailto:sam.dowling@lmc.org.uk) to arrange a convenient time. And I am always available to discuss pan-London issues affecting the profession, our practices and our patients.

Thank you for your continued support.

Yours sincerely,

**Dr Lisa Harrod-Rothwell**

**Deputy Chief Executive, Londonwide LMCs**