# LMC Update Email

8 June 2018

**Dear Colleagues** 

# **GP Forward View 2 years on**

Today we published our report that looks at the progress of the GPFV since its publication in April 2016. We have surveyed BMA and LMCs and engaged directly with GPs via a series of roadshow events conducted in early 2018 and this has helped us to review its impact after 2 years.

Although there are some positive changes, it is clear that it in the important areas that would really make a difference to general practice the GPFV is failing and doesn't go far enough, fast enough. Crucially, investment is far below our target of 11% of the NHS budget, GP workforce is falling, practices continue to close and many practices report complex and bureaucratic processes to actually access the funding and support set out in the GPFV. The support provided to general practice needs a wholesale review, as GPC outlined in <a href="Saving General Practice">Saving General Practice</a>, and the government needs to put general practice at the centre when establishing a long-term funding settlement for the NHS.

I commented on this in the national press today and said 'We have seen the devastating effect of practice closures over the last few years, with more than a million patients displaced since 2013, and now this analysis paints an even bleaker picture for the future. Patients already face unacceptably long waits for appointments, and without urgent government action and significantly more investment this will only get worse as millions more are left without a practice and struggling to find a new one.'

Read the <u>GPFV two year on report here</u> and the press release <u>here</u>. The news was covered in <u>The Daily Mail</u>, <u>The Yorkshire Post</u> and <u>Pulse</u>. You can also read blogs by <u>Jackie Applebee</u> and <u>Ivan Camphor</u> regarding their experience of GPFV funding and support.

### **Carrying medicines abroad**

The BBC reported that the Foreign and Commonwealth Office (FCO) is advising holidaymakers to see their GPs to check if any of their prescribed medication contained controlled drugs, to avoid falling foul of local laws when travelling <u>abroad</u>. The advice was obviously been made without any thought of the serious consequences it could have on the ability of those with a real need to see their GP to be able to do so. If patients are concerned about taking medication abroad they should visit their local community pharmacy who are well placed to provide the information that is needed, and can also advise on a wide range of travel-related health issues. We have raised our concerns directly with the FCO and were informed that they will be amending their <u>website</u> accordingly.

#### Public Accounts committee report on clinical correspondence handling in the NHS

The House of Commons Public Accounts Committee published a report this week which shows that the NHS has had to spend nearly £2.5m reviewing the handling of over one million pieces of misdirected clinical correspondence. NHS England is still assessing nearly 2,000 cases to determine whether there has been harm to patients and has so far identified two incidents where expert consultant review has concluded that patient harm cannot be ruled out.

In response to the report, I commented: "Amid the longstanding chaos caused by the outsourcing of GP support services, as clearly exposed by the recent National Audit Office report, this further publication is another damning indictment of NHS England's inability to deliver basic administrative efficiency in back-office systems. Given the ongoing confusion and lack of effective communication,

it is regrettable yet understandable that some practices may have, in good faith, sent misdirected correspondence on to PCSE. This would have been the arrangement before NHS England tried to cut costs by commissioning PCSE services to Capita two years ago."

Read the full report <u>here</u>. Read the BMA's previous response to the NAO investigation <u>here</u>.

Read the articles by <u>BBC News</u> and <u>Pulse</u>.

# 40 per cent of GP visits for mental health problems

A survey by Mind, the mental health charity, of more than 1,000 GPs has revealed rising demand for mental health support in primary care with doctors saying two in five of their appointments now involve mental health, which two in three GPs say the proportion of patients needing help with their mental health has increased in the last 12 months. In response to this, I said "GPs want to offer the best possible care to their patients and are working hard to do so, despite the challenges created by a decade of underfunding. At the same time, the number of patients needing help with mental health problems is increasing. We not only need greater investment in community-based training to give GPs more opportunity to develop their skills but also a significant increase in mental health therapists directly linked to practices. This would reduce the unacceptable delays many patients currently face getting access to the care they need."

I have also signed an open letter to Health Education England calling on GP training to be extended from three to four years, in line with our previous position, and for an increased investment in local mental health therapists to help improve access to services.

Dr Clare Gerada, GPC member, has written an article in the Guardian about doctors with mental health problems, which can be accessed <a href="here">here</a>.

Read Mind's press release <u>here.</u> This was covered by the <u>Indpendent</u>, <u>HuffPost</u>, <u>The Sun</u>, and <u>Pulse.</u>

# Tier 2 visa caps for overseas doctors

Following extensive lobbying by the BMA and other bodies to end Tier 2 visa caps for overseas doctors, the home secretary, Sajid Javid, has announced that there will be a review of the Tier 2 immigration cap. The BMA has been running an ongoing campaign, calling for a flexible immigration policy for overseas doctors that is fair and which meets the needs of an NHS under pressure. In addition, last week, the BMJ launched a new campaign and petition 'Scrap the Cap' also calling for an end to cap. Read the BMA's press release here.

#### **Babylon Health app**

BBC Radio 4's You and Yours programme reported on the deal that Babylon Health has struck with Samsung for its GP app to come pre-installed on all the company's phones. I used an interview with the programme to highlight the BMA's concerns about the company's GP at hand service and the use of the out of area registration arrangement to effectively cherry pick relatively healthy patients at the expense of more vulnerable patients, with the potential impact this has on the stability of other practices. You can listen to the programme here.

# **PCSE/Capita printing problems**

Pulse reported that GPs have been told that they will have to print off their own copies of certain forms and leaflets because of a shortage of paper stock items, Dr Ian Hume, BMA GP committee policy lead for premises and practice finance, said: "This is another example in a long line of failures in the delivery of PCSE services by Capita that lumps administrative burden on practices due to errors out of their control." Read the full article in <u>Pulse</u>.

# **GP Partnership Review blog**

The partnership review has now begun its work. They are expecting to make visits to a number of areas across the country to listen and learn from GPs, practices, commissioners and others, to help inform their work. Dr Nigel Watson, the chair of the independent review, has written an initial blog which you can read <a href="https://example.com/here-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-number-nu

# King's Fund report on innovative models in general practice

The King's Fund has published a new report this week, <u>Innovative models of general practice</u>. It looks at models of general practice from the UK and other countries and identifies key design features they believe will be important in designing effective GP services in the future. Much of it echoes what we have called for in *Saving General Practice*. Attached is a brief summary of the report and recommendations which you may find useful.

# **Integrated Care Systems webinar recording**

You can watch the BMA's webinar to learn more about what Integrated Care Systems are, and what they could mean for doctors, here.

Read the latest GPC newsletter.

Have a good weekend

Richard