

Tackling abuse and meeting with the Secretary of State for Health and Social Care

In recent weeks, GPs and their practice teams have been subjected to a systematic and cruel smear campaign by sections of the media, this has directly resulted in rising incidences of abuse and aggression being experienced by general practice. This has left many in the profession feeling totally demoralised and under siege.

We want to be clear - general practice has continued to see patients throughout the pandemic, in July alone 27 million appointments were delivered by general practice, the majority of which were face-to-face. This is testament to the true integrity, grit and determination of GPs and their practice teams. We will not let false narratives go unchallenged.

Following [a horrific act of aggression against a practice](#) last Friday, we [wrote to Sajid Javid](#) earlier this week demanding an urgent meeting and summit to discuss the unacceptable level of abuse being levelled against GPs and their staff, and have called for a comprehensive national violence reduction strategy, and as a result of our pressure, I met with him face to face yesterday.

It was a robust and frank meeting in which I highlighted the serious damage to morale the current anti-GP rhetoric was having on the whole profession, the fear that many on the GP frontline had and that this must stop. I raised the need for urgent action to challenge abuse against GPs and their staff, and support for the whole general practice workforce and called for legislative change to better protect the workforce. I stressed the need for Government to explain to the public why healthcare workers are still working within the constraints of infection, protection and control measures, that large numbers of face-to-face consultations were taking place every day and that clinicians would always see their patients when it was necessary to do so. We also discussed the value of telephone consultations as part of a mix of access offers - something that is increasingly appreciated by many patients who now receive more timely appointments as a result but whose voices are not being heard in the toxicity of media reporting.

I also raised the essential need longer-term premises development so we have the space to offer access to the increasing multidisciplinary team that is developing in many practices, in addition to being a safer place for patients with the on-going pandemic. I focused on the need to address the unsustainable workload pressures, the impact of the care backlog and secondary care work transfer to general practice and urged him to trust practices to deliver services to patients with long-term conditions without the rigidity, bureaucracy and burden of QOF or unnecessary CQC inspections. We also called for far more action to enable practices to expand their workforce and for government to deliver on their own commitment of 6000 more GPs. But most importantly I focussed on the need to acknowledge, thank and value the GP workforce who have gone above and beyond over the course of the pandemic from being pivotal in delivering the COVID vaccination program to continuing to keep seeing patients throughout the course of the pandemic.

We now demand that the Government take immediate action to tackle the abuse against GPs and their practice staff, which is having a serious impact on the wellbeing and morale of the profession and provides both immediate and long term support to practices at this critical time.

Read our [statement](#) following the meeting.

Read our [message to the profession](#), including resources for [practices how to remove violent patients from your practice list](#).

Dealing with abuse of practice staff on social media from patients

GPC have developed guidance [how to protect yourself from online abuse](#) and the steps GP practices can take against patients who leave abusive comments on social media or websites. It outlines what to do first, how to report content to the provider and what criminal and civil actions are possible.

On top of what the BMA has been doing, [other GPs](#) are making it clear the pressures they're under.

NHS Confederation is also showing their support in their statement '[Standing with primary care](#)' where they 'stand unwaveringly in support of the vital contribution of our primary care members'.

Following increasing instances of GPs being scapegoated by the media and rising instances of abuse against GPs and their staff, we are asking members to use our [template letter](#) to write to your local MP to outline the current pressures being faced by GPs across the country.

Media intrusion

GPC are aware that with the intense national media vilification of General Practice some journalists are approaching local practices directly for comment. There is no obligation to respond to the media. If practices would like guidance about a specific situation they can reach the BMA media team at Media Office MediaOffice@bma.org.uk. We are also concerned that some publications will send photographers to practices looking for photos designed to support their narrative of primary care being hard to access. The Editor's Code of Conduct which guides the practice of press organisations in the UK says that journalists should identify themselves when asked to do so and *that no journalists should operate on healthcare property without permission*, this applies to photographers as well. So if practice staff see a possible photographer who is not welcome then the best advice is to ask them to identify themselves and then ask them to leave.

Media

Reported on by [Chronicle live](#), [The Daily Telegraph](#) (print and online), [Express](#) (print and online), [Yahoo news](#), [Nursing Standard](#), [Mail Online](#), and in multiple regional titles including [London Economic](#), [Evening Standard](#), [BasildonEcho](#), [LancsLive](#), [Management in Practice](#), on LBC, [Shields Gazette \(print\)](#), [Sunderland Echo \(print\)](#), [BirminghamLive](#), [the Express](#), [Daily Mail](#), [Pulse](#), [Pulse](#), the [Clinical Services Journal](#), [GM Journal](#), [Nursing in Practice](#), and on local radio stations.

Support your surgery campaign

The BMA has been campaigning consistently and vociferously in defence of GPs and their staff over the summer with our [Support Your Surgery campaign](#) to get the backing of patients to make the changes to primary care that are so urgently needed and to help them [understand why we still need to work in the way we have been doing](#), primarily to protect them from infection.

Please continue to show your support by signing the [Support Your Surgery petition](#) and sharing it with colleagues, friends, and families. The petition is just one element of the campaign but is a way of putting pressure on the Government to properly support general practice.

We have produced a **GP campaign factsheet** that can be used to rebut the misinformation being published in the media and to proactively include in social media posts, letters to the local press or MPs. Please do all you can to help us defend and support general practice at this critical time.

You can also get involved in the [#SupportYourSurgery social media discussion](#). Many GPs and patients are sharing their support for each other and practices across social media. This will help us reach as many people with the campaign as possible.

GPC UK meeting update

GPC UK met yesterday in its first meeting of the new session and where new members were welcomed to the committee for the year ahead.

The main item of discussion was the recent shocking rise in cases of abuse and aggression being directed at GPs and practice teams, fuelled by false narratives put forward by sections of media. The committee discussed the actions urgently needed to tackle the abuse against GPs and their staff and to support the. I

also updated the committee on plans to meet with the Secretary of State for Health yesterday afternoon, more of which is reported in the next item.

The committee discussed further campaigning planned by the BMA in defence of GPs and their practices following on from the [Support Your Surgery](#) campaign. Work on the actions that can be taken next both nationally and by individual practices is happening at pace over the coming weeks.

GPCUK also discussed the following key items:

- Updates from the four nations on ongoing work
- Update on COVID-19 pandemic and vaccinations from Dr Susan Hopkins, Public Health England, and Dr Jonathan Leach, Medical Director COVID-19 Vaccination at NHS England
- Health and Social Care Bill - report from David Wrigley, chair of the BMA health bill task group
- The role of General Practice in addressing climate change
- Health inequalities and an update on BMA work

The policy lead update and a summary of my oral report to the committee on items not otherwise on our agenda are attached.

Support for GPs

We were pleased to have some recognition from the [Deputy Prime Minister, Dominic Raab, who thanked GPs](#) in answer to a question by Robert Langan MP to get GPs to see patients face-to-face. Mr Langan said GPs have done a brilliant job and are working long hours in challenging circumstance, but many constituents have raised concerns about seeing their GP face-to-face.

Mr Raab paid tribute to GPs by saying "I join him in thanking GPs for the heroic job they have done in seeing us through the pandemic" and also said appointments have returned to pre pandemic levels.

COVID vaccinations

Phase 3 and booster vaccinations (England)

The [roll out of the COVID booster vaccination](#) programme has started this week, for the eligible cohorts (aged 50 and over, health and social care workers, and those [clinically extremely vulnerable](#) aged 16 and over).

Those who have had their second vaccine at least six months ago are eligible, and in line with JCVI advice, people should receive either one dose of the Pfizer vaccine or half a dose of the Moderna vaccine, which means for some people their booster dose may be different from the vaccines they had for their first and second dose. People could also be offered a booster dose of the Oxford/AstraZeneca vaccine if they cannot have the Pfizer/BioNTech or Moderna vaccine.

Updated [Patient Group Directions and national protocols](#) for use in England for Pfizer BioNTech Covid-19 Vaccine BNT162b2 and Comirnaty have been published.

Overprescribing report

The [national overprescribing report](#) was published yesterday by the Department of Health and Social Care. The key recommendations from the review are:

- the introduction of a new National Clinical Director for Prescribing.
- system-wide changes to improve patient records, improve handovers between primary and secondary care, develop a national toolkit and deliver training to help general practices improve the consistency of repeat prescribing processes.
- improving the evidence base for safely withdrawing inappropriate medication
- cultural changes to reduce a reliance on medicines and support shared decision-making between clinicians and patients, including increasing the use of social prescribing

- providing clear information on the NHS website for patients about their medication
- the development of interventions to reduce waste and help deliver NHS's net zero carbon emissions.

Although we agree with the overall aim and recommendations, and are pleased to see the growing number of practices that now have pharmacists working in them and increasingly making a difference both in terms of quality care and workload reduction - something we lobbied hard for - this report omits to understand that the cost of achieving change is enormous, with a service so overstretched with targets demands and a dwindling tired workforce in all health service sectors.

It also fails to highlight how difficult it can be to access alternative services, with long waiting times and limited interventions, leaving GPs with lack of support for their patients with acute and often complex needs. It is also regrettable that international comparators and any lessons learned from overseas haven't been incorporated into the report.

The good work that general practice does do in managing multiple co-morbidities and complexity, having to make complex decisions in partnership with patients within a very resource poor environment, should be acknowledged.

End of the shielding programme and closure of the Shielded Patient List (SPL)

We have updated our [webpage on shielding](#) following the [Government announcement](#) that the shielding programme has now ended and patients will no longer be advised to shield.

Pension deductions by PCSE

We are aware that around 2,000 practices did not have pension deductions taken for one or more GPs from June through August. PCSE inform us that the majority will have the deductions in total taken from payments to practices during this month's payment runs. The deductions will be taken from the first payment processed by PCSE during the month, be that global sum or any other payment. Where the deduction total is greater than this payment the balance will be taken from the next payment during this month.

PCSE tell us that they have communicated this to affected practices but we are keen that this is understood. They have advised us that practices will also receive a separate statement with details of the pensions deductions being taken and that it will be important that practices compare both statements to ensure they have the full view of payments in vs the deductions.

LMC UK conference agenda committee elections

The results from the LMC UK conference agenda committee elections have now been confirmed, and are as follows:

Bethan Roberts (Wales & member of GPC UK)

Alastair Taylor (Scotland)

Paul Evans

Shaba Nabi

Rachel McMahon

Elliott Singer

Ursula Brennan (Northern Ireland)

GP Trainees committee chair

Congratulations to Dr Euan Strachan-Orr who has been elected as the new chair of the GP Trainees committee. Thanks too to Dr Lynn Hryhorskyj for all the work she has done for GP trainees during her time as chair.

Media

GP pressures

Following BMA media work there were two items last night on ITV regarding the pressures on general practice. [ITV national news](#) looked at the reality of GPs' experience, featuring an interview with Dr Ehsan Alkizwini at his surgery in North London, as well as an interview with Dr Farah Jameel, GPC England executive, discussing the wider picture. Dr Jameel said: "Are GPs closed? Absolutely not. Are they seeing patients face to face? Yes. However, complexity has increased, workload has increased. There is a significant backlog and the significant numbers of patients who need to be seen or who need access to their GPs has risen." Read about it in this [BMA tweet](#)

There was also a regional coverage on [ITV West Country](#), with an interview with Dr Shaba Nabi, GPC England member, at her surgery in Bristol. Dr Nabi said: "At my end of the spectrum, at the more senior end of the spectrum - are leaving in their droves, they're retiring early, because the job has become too pressured, so we need to make the job better. I think it's important that the public know the truth, and the truth is that we're a system under pressure, huge pressure. And scapegoating general practice is not the answer to that problem. I just want people's understanding, nothing else. I don't want claps, I don't want cards, I just want a bit of understanding from the public that we're all humans first, and we're all patients first as well."

The [Daily Mail](#) reported on GP pressures and quoted from my interview with [Radio 4 Today](#) programme where I said: "The pressures on services are incredible but we recognise that there aren't enough GPs, there aren't enough nurses. To resolve that we need the Secretary of State, we need the Government, to act to do what they promised – which is to recruit 6,000 more GPs, to invest in our premises, to invest in our staff and our service – and by doing that we will get a better service for our patients." My comments on Radio 4 were also covered by the Daily Telegraph (print) and [Mail Online](#). [GP Online](#) reported that Kernow LMC were raising concerns that practices in Cornwall are dealing with an unmanageable workload and it feared that they would not have the resources or resilience to handle any additional pressure in the coming month.

Face-to-face appointments

GPC have sent a strong rebuttal to the Daily Mail in response to their [article alleging that lack of face-to-face GP appointments 'caused stillbirths to spike 88%'](#) in England during pandemic, which they have chosen not to publish but is attached.

GB News (BBC1 Wales) reported on the issue of face-to-face appointments, and the continued [Daily Mail](#) campaign, echoed in the [Sun](#).

Flu vaccine delays

I was interviewed on [BBC Radio Humberside](#) (starting 2h09) about flu vaccine logistical issues. I said: "This is really difficult for practices. They're trying their best to provide a good service to their patients and they're under huge workload pressure at the moment. And not just GPs, but practice receptionists, practice managers and many others working in the practice. They're trying to provide a good service but these are just added difficulties and added frustrations."

Low Level Anxiety – Support Services

It is important to remember that you're never alone- there are many local organisations and community groups that you can reach out to for support. This [document](#) may be useful for practices of community based support services for patients who are generally anxious or presenting frequently or inappropriately to practices.