



CLEVELAND LMC

Cleveland Local Medical Committee

Cleveland LMC Bulletin Tuesday 28 January 2025

Update from GPC England

It may appear quiet on the GPCE front, while we are focused on negotiations with Government, DHSC and NHSE, which we anticipate will conclude next month. The Secretary of State, Wes Streeting wrote to me last week, and I shall be meeting the Minister for Primary Care, Stephen Kinnock later this week.

Government is well aware of the upcoming Special England LMC Conference on Wednesday 19 March to focus on potential '*escalatory steps needed to ensure the survival of what still remains of English general practice*' (further details below), and the lack of GP employment opportunities. The Special Conference is also to consider the 2025-26 offer from the DHSC / NHSE. The key milestone however, was always going to be the Spring 2025 three year spending review – Treasury's instruction manual for planned costs between now and 2028. This is where, together with the [NHS Ten Year Plan](#), we need to see practice resource restoration set out and a new substantive contract for practices across England, as iterated in our manifesto [Patients First](#).

GP Unemployment Crisis & ARRS Roles

NHSE has written to Primary Care Networks (PCNs) encouraging them to use their GP ARRS funding in 2024/25 to recruit recently qualified GPs. NHSE states they will be monitoring the data on the number of GPs recruited, and are doubling down on ICBs to work with those PCNs who have not yet taken advantage of the GP ARRS funding. The Secretary of State is no doubt frustrated that despite removing the barriers to enable GPs to be recruited, his announced target of 1000 new GPs is far from being realised, yet the numbers of unemployed GPs continue to make headlines. The reason is simple – the ARRS mechanism is not appropriate for GP roles, and the funding is woefully insufficient.

The failure for GPs to find work, often when newly-qualified, but increasingly more generally, is completely unacceptable. It is estimated that between [20-33% of GP Registrars are failing to secure substantive roles after qualifying](#). Training more GPs whilst depriving practices of the necessary funds to recruit those same GPs is a failure of NHSE. Worse still, even when joining the profession, 25% of these GPs appear to be leaving their roles.

ARRS GPs are not the answer to 'bringing back the family doctor'. Rather than 1000 new GPs, comparing [December 2024](#) with June 2024's data there was a gain of a mere 111 (FTE) salaried GPs, and 8 (FTE) locums. There are currently estimated to be around 3500 under-employed or unemployed (FTE) GPs out there. There is an opportunity to change this for 2025/26, if NHSE take it. Please join the BMA's UK Sessional GP Committee on their Virtual Rally on Wednesday 12 February – see below.

Special England LMC Conference 2025

A Special England LMC Conference will be held on Wednesday 19 March 2025, at [Friends House, London](#). This was requested during the Conference of England LMCs on Friday 22 November to further

assess the critical state of general practice in light of any government contractual offer, and ahead of the Spring three year spending review and the publication of the NHS Ten Year Plan:

The focus will be to discuss and determine what escalatory steps will be needed to ensure the survival of what still remains of English general practice.

Help address the GP unemployment crisis


Despite the rising demand for family doctors, an appalling paradox exists where a significant number of highly skilled GPs are struggling to secure work.

The BMA's UK Sessional GP Committee is looking for salaried and locum members to help highlight this pressing and absurd situation of the growing unemployment crisis among GPs. Please take a few minutes to share your experiences by [completing our survey](#).

Your input is critical to understanding the full extent of this crisis, and strengthening our lobbying efforts for meaningful change.

Join the sessional GPs unemployment virtual rally

Wednesday 12 February, 7.30-9pm | We invite you to join us in addressing the [urgent issue of sessional GP unemployment](#). This is your chance to be part of the conversation, share your voice, and mobilise for change.



**Unite for action:
Sessional GP
Unemployment
virtual rally**

Together, we can amplify our message and advocate for progress, plus, learn how the BMA is committed to supporting you and all GP colleagues. Register [here](#)

GP collective action

Thank you for continuing to build on our [collective action to protect our patients and practices](#).

We recognise the challenges across the primary and secondary interface, which is why GPCE and UK Consultants Committee are working together to produce resources to help 'translate' collective action for our hospital and trust-based colleagues.

There will be a mailout to the profession from the BMA Chair of Council very soon to all branches of practice to explain and galvanise support for GPs from secondary care colleagues, alongside a microsite with links to multiple resources including slides which LNCs can present and 'at a glance' fact sheets to and explain that secondary care doctors can stand shoulder to shoulder with GP colleagues.

Safe working guidance – 'core' general practice

As part of the [safe working guidance for GP practices in England](#), we have developed a section focusing on 'core' general practice to help you identify which services are included within 'core GMS'.

It's essential that GPs and practices focus on delivering services that are properly commissioned and resourced. It is not always clear which services are included within 'core GMS', leading to some practices potentially offering unfunded services. To help clarify, we've compiled a list of locally commissioned services that should be commissioned separately. If your practice is asked to provide un-commissioned services, we recommend declining and working with your local ICS (integrated care system) to ensure proper commissioning.

[Explore the list of services and learn more](#)



Westminster update

The fourth day of Committee stage on the National Insurance Contributions (Secondary Class 1 Contributions) Bill be taken on Thursday 6 February, we continue to brief peers on the Bill, and have received ongoing mentions throughout committee stage. You can read the latest [debate here](#).

GPCE deputy chair, Dr David Wrigley this week provided [oral evidence](#) to the Health and Social Care Committee to inform their evidence session on *What progress is being made in preventing cardiovascular disease*. During the session he outlined the role GPs played in providing health checks, the use of IT to identify patients at risk of cardiovascular disease, and the impact of outsourcing health checks on patients, and the wider health services.

We briefed MPs ahead of a Westminster Hall [debate on doctor welfare](#) tabled by consultant Dr Peter Prinsley MP. During the debate he commented, "Our GPs are under pressure as never before. Who is looking out for them? They face massive lists of patients and huge demands. We know that we must support them, for they are the front door of our NHS".

GPCE leaders attended a [report launch](#) in Westminster by Pulse and its publishers Cogora showing that around a quarter of salaried GPs and locums are looking for a permanent role at the same time as practices are facing a shortfall in GP numbers. This important report highlights the concerns which the BMA has been raising regarding GP unemployment.

GPC Preventing sexual misconduct in the workplace - live webinar Thursday 6 February, 1-2pm

This live webinar will explain NHSE's new work to prevent sexual misconduct at work, including the sexual safety charter and what they want employers to be doing to support staff. It will also explain the role of the BMA in providing support to our members who have been a target of sexual misconduct and how doctors can be better allies when they witness this behaviour at work. Register for free [here](#)