

# Cleveland Local Medical Committee

Cleveland LMC Bulletin Tuesday 11 March 2025

## GP contract for 2025-26 accepted in principle

Last week, the GPC England <u>voted to agree in principle the proposed amendments to the 2025/26 GMS contract for GP practices</u>, contingent upon written assurance to the profession from the Secretary of State Wes Streeting around a new substantive GP practice contract being negotiated in this parliamentary cycle. We have <u>written to the Secretary of State for Health and Social Care</u> seeking confirmation of the Government's intention to negotiate a new substantive NHS General Medical Services contract within this parliament. GPC England will work with Government over the coming weeks to provide the necessary assurances and guidance to the profession.

The 2025-26 contract includes new investment of £969m on top of the £433m invested in the autumn of last year, totalling over £1.4bn investment since July 2024.

GPCE continues to recommend <u>practices work safely</u> and advises that where commissioning gaps exist, or where commissioned pathways are failing practices and patients, these need to be negotiated locally. Practices should be appropriately resourced for the work they undertake in providing vital care for patients.

Our national dispute with the Government may be over, but the local focus and disputes at a system level continue, where our decade-long <u>safe working guidance</u> policy still remains, and where patients must be protected from gaps in local commissioning. Practices who are undertaking such work should either be appropriately resourced to ensure sustainable patient care, or consider serving notice



on them to ICBs. LMCs are central to this process of achieving a fair collective bargaining position for practices supported by national BMA advice and resources. We will be seeking DHSC support for this new phase, to help change ICB narratives towards general practice, supporting alignment with the Government's stated objectives towards continuity of care and the shifting of resources from hospital out into the community.

We will be producing new updated guidance accordingly in

the coming weeks with FAQs and webinars. The NHS sees 1.7million patients every day  $-\frac{1.5 \text{ million of }}{1.5 \text{ million of }}$  them in our GP surgeries. If the Government wants to transform the NHS, it must work with us to deliver a new practice contract with new funding agreed by the Treasury.

Read more about the changes: www.bma.org.uk/GPcontract

Watch my video recorded last week after GPC England met, explaining the contract deal.

## **Special England LMC Conference**

A Special England LMC Conference will be held on Wednesday 19 March 2025, at <u>Friends House</u>, <u>London</u>. This was requested in November by the Conference of England LMCs to further assess the critical state of general practice in light of any potential government contractual offer, and what options may be open to the profession to maximise leverage.

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.

If you have any questions, please email <a href="mailto:info.lmcconference@bma.org.uk">info.lmcconference@bma.org.uk</a>.

# 2024/25 declaration of completion for "simpler online requests"

GPC England has previously advised practices and primary care networks (PCNs) to defer signing up to 2024/25 PCN DES CAIP "simpler online requests" which may request the enable patient access to e-consultations every working day from 8am to 6.30pm (as part of the PCN voluntary contract incentives).

Whilst GPC England recognises the aspiration in relation to the on-line consultation platform and its role as one part of patients' opportunity to contact practices, we do not agree this element of the CAIP proposal was properly communicated during the 24/25 Contract consultation and remain very concerned about the potential implications of this issue for practices.

However, now that agreement has been reached for the 2025/26 contract we would advise practices with outstanding claims for this part of the CAIP to submit their claims well in advance of Friday 28 March 2025, but citing the caveats of the above information from the BMA and GPC England. We will be publishing further guidance shortly.

## Parliamentary update

The BMA has continued to brief parliamentarians as the National Insurance Contributions (NIC) Bill has been making its way through parliament. During the report stage of the Bill in the House of Lords the Government was defeated on a number of key points including a Liberal Democrat amendment to exempt the health sector from NICs increases. This means that as the Bill currently stands, health sector organisations including practices will be exempt from the employer's NICs hikes under the legislation. However, as the Bill is due to return shortly to the House of Commons it is likely that the Government will seek to overturn these changes. The BMA will continue to lobby on the Bill and keep members updated.

#### **BMA** member relations regional map

The BMA has published <u>a map</u> showing the BMA's Member Relations regional structure, identifying each Head of Region, the area they cover and their contact details. This has been created to support LMCs in building relationships with their relevant Local Negotiating Committees (LNCs). If practices or LMCs would like any contact details relating to the Trusts in your area, please email the relevant Head of Region and they will be able to assist you. The map can also be accessed on the <u>BMA LMC page</u>

# GP pressures: latest workforce data

GP practices across the country are experiencing significant and growing strain with declining GP numbers, rising demand, struggles in recruiting and retaining staff, with knock-on effects for patients. The latest workforce data shows that there is still the equivalent of 1,129 fewer fully qualified full-time GPs than in September 2015. During this time, there has been a rise in the number of patients, with January 2025 seeing yet another record-breaking number. GPs are now responsible for about 17% more patients than in 2015, demonstrating significant workload pressures. Learn more about the pressures on general practice by visiting our website

# **GP** unemployment crisis

The BMA's UK sessional GPs committee has surveyed salaried and locum members to help highlight the absurd situation of the growing unemployment/underemployment crisis among GPs. The survey showed that 1 in 5 GPs in England plan to change their career because they can't find work. At a time when patients are struggling to access appointments, it is unacceptable that so many skilled GPs are unable to find work. The BMA is also asking all GPs to write to their MP and urge them to support changes that will allow more GPs to work in the NHS. Write to your MP now by using our tool. Read more about the survey and the 'write to your MP tool'

## Guidance on salaried GP maternity leave changes for employers and employees

We recently announced a change in maternity leave for salaried GPs which extends the number of weeks for which half maternity pay can be received from 14 to 18 weeks, aligning this with the period of time parental reimbursement can be claimed under the Statement of Financial Entitlements [SFE] for GP locum cover during this period of absence. It also aligns the total period of maternity absence [8 weeks full pay, and now 18 weeks half pay] with that available to equivalent hospital-based doctors. More information can be found on the BMA website.

### **NHS England**

It has been announced that Amanda Pritchard will stand down as Chief Executive of NHS England at the end of this financial year. Sir James Mackey will take over as Transition CEO of NHS England, for the next month before taking up post formally on the first of April. In addition to this Dr Penny Dash was confirmed as the new Chair of NHS England, taking over from Richard Meddings, who will also step down in April.