

LMC Update Email

6 January 2023

Dear colleagues

## **GPC England New Year's message**

I want to send you all best wishes for the New Year. Many of you will have been working in Out of Hours, Urgent Treatment Centres, Prisons, and other settings this Christmas and my thanks goes to you. Many will have continued working at home to clear backlogs built up due to the increased patient demand and the recent respiratory influx. Despite this I hope that you and your teams had some time to rest and recuperate after this unprecedented period of pressure.

General practices have never been so busy, with over [31 million appointments](#) carried out in November, fifteen percent more than in November 2019, and this with fewer and fewer GPs as shown in the November [GP workforce figures](#), with a fall of 77 full-time equivalent fully-qualified GPs in England between October and November, and 471 in the 12 months to November.

The Government has now overseen the loss of the equivalent of more than 1,900 full-time fully-qualified GPs in England since 2015, and that almost a quarter of this loss happened in the last 12 months alone – the biggest annual fall in almost three-and-a-half years – speaks volumes to the intense pressures that practices and staff are under. With workload demands soaring, and financial stresses on practices bearing down, alongside the impact of punitive pension rules, many GPs are having to take the difficult to decision to reduce their hours or leave altogether to protect their wellbeing.

Fewer GPs means patients are suffering. GPs and our colleagues in general practice are doing unsafe levels of consultations. We risk making mistakes if we try to work beyond our mental and physical capacity. We will burn out and harm our own health if we continue to work in this way.

To save ourselves and protect our patients we have to move to delivering safe working models. We have produced [guidance to help practices](#), LMCs, and ICBs to develop models which deliver for patients and keep doctors safe.

The NHS in general is at breaking point, and this is putting untold pressure on general practices. We need investment in traditional general practice. This is what patients want. This is what GPs want.

The [Health and Social Care Select Committee report into the Future of General Practice](#) provides some hope as we move into a new year. I move towards the new year with more determination to get general practice the support it needs so that GPs and practices thrive and enable them to deliver the services which patients require.

Wishing you all a safe and prosperous New Year.

Read the [press statement about the GP workforce and appointments data](#).

Read more about the pressures in general practice [here](#)

## **Junior doctors' ballot in England for strike action**

Next week the junior doctors' ballot in England for strike action will open. Today, the BMA's Junior Doctor Committee (JDC) has confirmed that following a successful ballot, the first form of strike action will be a full walkout of junior doctors for 72 hours. JDC have been brought to this point by the year-on-year pay erosion that has left our junior doctor members with a real term pay cut of 26.1% since 2008/2009.

As the co-chairs of JDC set out in a [blog](#) published today, this strategy builds on the lessons learnt from 2016 when junior doctors last took industrial action. Then, full walkout maximised participation in the strike by junior doctors and had greatest impact on the government.

GPC England is unequivocal in its support of all our GP trainees in this dispute for full pay restoration to protect our profession and the services our patients rely on. This support was [demonstrated](#) by English GP representatives at the recent LMC England conference. You can find out more information about the ballot at [www.bma.org.uk/juniorspay](http://www.bma.org.uk/juniorspay).

## **Junior doctors' guide to strike action - guidance for GP trainees**

Guidance for GP trainees has been added to the [junior doctors' guide to strike action](#).

If a GP trainee wishes to picket, legally, it must be picket at or near their place of work. They are not able to picket at a place that is not considered their place of work. However, a GP trainee is not barred from taking part in a protest that takes place near to a hospital or other NHS building. If they are not part of a picket line, they are fine to join any organised protest.

We are in the process of preparing more GP specific advice for trainees and practices which we will share in due course.

## **GP Retention survey and focus groups**

NHS England have launched a [GP retention survey](#) alongside a form for registering to participate in focus groups on GP retention. They want to understand the impact existing approaches to recruitment and retention have had to feed into future proposals for support for GPs and others working in general practice. This includes improving their understanding of the experience of GPs and other general practice workforce with protected characteristics and underrepresented groups, so they can identify any disparities in experience and any adjustments required to meet their needs.

Links to the survey and focus groups form can be found [here](#). As the survey was launched over the Christmas period, there is less than a week to complete it, with 11 January being the last day for submissions. The focus groups will take place between 16 and 27 January.

## **Long covid survey**

We know that a proportion of the medical profession has suffered from the chronic health complications which continue after acute infection by COVID-19. This includes people who may have Long COVID and/or other complications. What is less well described is the impact such chronic health complications have continued to have on doctors' work, home, financial security, and overall quality of life. In partnership with [Long COVID Doctors for Action](#), which campaigns and advocates for doctors suffering the continuing effects of COVID, the BMA is undertaking a survey of doctors in the UK to:

- Increase understanding of the impact of post-acute COVID health complications

- Improve support at work for those who continue to experience post-acute COVID health complications
- Strengthen our call for COVID and chronic illness following COVID to be recognised as an occupational disease
- Enhance our call for an appropriate compensation scheme for affected doctors

If you have experienced any type of post-acute COVID ill health, we value you taking the time to complete the [survey](#). The survey will close at midnight, 15 January 2023

## Wellbeing

As we continue to face overwhelming pressures in general practice, we encourage practices to focus on their own team's wellbeing.

A range of wellbeing and support services are available to doctors, from our 24/7 confidential [counselling and peer support services](#) to networking groups and wellbeing hubs with peers, as well as the [NHS practitioner health service](#) and non-medical support services such as [Samaritans](#).

The organisation [Doctors in Distress](#) also provides mental health support for health workers in the UK, providing confidential peer support group sessions.

See our [poster with 10 tips to help maintain and support the wellbeing](#) of you and your colleagues.

Please visit the BMA's dedicated [wellbeing support services page](#) for further information.

## GPC England committee pages and guidance for practices

Read more about the work of the [Committee](#)

Read practical guidance for [GP practices](#)

See the latest update on Twitter: [@BMA\\_GP / Twitter](#) [@TheBMA / Twitter](#),

Read about BMA in the media: [BMA media centre | British Medical Association](#)

Contact us: [info.GPC@bma.org.uk](mailto:info.GPC@bma.org.uk)

Read the last GP bulletin: [GP pressures | advice on NHS strike action | Streptococcus A update](#)

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