



Protect Your Practice
Protect your patients

WE ARE ON YOUR SIDE CAMPAIGN

Aim of presentation

- ▶ Historical context
- ▶ Changing workload, funding and staffing of Primary care

Possible Actions your practice might take

- ▶ Safer Working
- ▶ IT
- ▶ Pushback

- ▶ How can Patients help the survival of their Practice?

Historical Context



The overall population in England has increased from 53.5 million in 2012 to 67.9 million in 2024.



The number of GP's is falling. There are approximately 2000 FTE GP's and 1300 GP practices less now compared with 2015.



Government investment into primary care has fallen . Primary care gets only 6% of the NHS budget now (was 8.9% in 2015/16).



The GP contract is worth £660million LESS than it was 5 years ago.



Your practice receives just £107.57 per patient per year from the core contract which is 30p a day (less than the cost of an apple).



The government has offered us a 1.9% uplift to our contract, and we would need an 11% uplift to be equal to real terms value of the 2018/2019 contract.

We need to slow down the pace we are running on our hamster wheel.



A single full-time GP is now responsible for an average of 2,294 patients. This is 356 more than in September 2015.

General practice is providing 20% more appointments than it was in 2019.

A total of 30.5 million appointments were delivered in general practice in April 2024 in England, with an average of 1.45 million appointments being delivered per working day.

Equivalent of 1 in 2 of the entire population are seen in General Practice EVERY month.

The number of NHS hospital doctors has grown broadly in line with demand for hospital care, but GP numbers have fallen over the last decade

Change in each indicator since 2009 (log scale)



Sources: Health Foundation, NHS *Fully-qualified, permanent GPs

FT graphic by John Burn-Murdoch / @jburnmurdoch

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Local picture in Rother Valley

Between 2014
and 2024 Rother
Valley practices
have had a:

1.2% population
increase

23.8% FTE GP
decrease

38.9% GP
Partner
decrease

32.5% increase
in patients per
FTE qualified GP

To find the statistics for your area see
<https://www.bedshertsmcs.org.uk/resilience/parliamentary-constituency-tool/>

So, What are practices going to be doing?

Partners have been asked to vote to see if they want to take 'action' – the vote closes at the end of July.



There are several possible actions and practices can choose which ones they do.



They cover 3 main themes – Safer working, Pushback on unfunded workload, and IT.

So, what are the actions and how might they impact patients?

Possible actions

- ▶ Move to 'safer working'.
- ▶ Guidelines suggest this means a maximum of 25 appointments a day
- ▶ Stop/ reduce doing things that General Practice isn't contracted to do, or paid well enough to do and pushback on unfunded transfer of workload from secondary care

Impact on patients

- ▶ Longer waiting times for a routine appointment, but hopefully a more thorough consultation, retain the clinicians in the profession and have time to process the administrative paperwork that we currently struggle to squeeze in to our working day.
- ▶ Patients will have to have more blood tests and investigations ordered and done by secondary care, and have results explained to them by their specialists in secondary care.

So, what are the actions and how might they impact patients?

Possible Actions

- ▶ Switch off data sharing with 3rd party companies. There are several options here. NHS England would like us to share data with Public Health department, research companies and others.
- ▶ Do not ration medication or referrals or investigations, (Currently, we are the gatekeepers/ riskholders for the NHS and try to reduce NHS spending wherever possible).

Impact on patients

- ▶ Unlikely to have any direct or immediate impact as we will still be sharing data with e.g. district nurses, community matrons and all the staff that are important for direct patient care.
- ▶ We will refer for investigations and into hospital when clinically appropriate, this may ever so slightly increase waiting list times.

Did you know...



The Government gives this practice just £107.57 for each patient, whatever their health needs. That's less than the cost of a TV licence.

This means we're only given 30p a day for every patient registered with us – less than the cost of an apple.



GPs want the same things that you do.

We believe nobody should struggle to see their family doctor.

We believe general practice deserves **a bigger slice** of NHS funding so we can train and hire more GPs, deliver the services you require and make it easier to get appointments to see your GP and practice team.

We know you deserve better than this. GPs Are On Your Side.

bma.org.uk/GPsOnYourSide

Did you know?



In the last 5 years GP practices have lost funding worth over £660 million.

We're not allowed to use the poor funding we have to recruit more GPs or more practice nurses.



**This is why
you struggle
to see your GP**

**General Practice is being broken.
We know you deserve better than this.
GPs Are On Your Side.**

So, how can our PPG /patients help?



- ▶ Patience please – we are trying our best !
- ▶ Please be kind to receptionists and clinicians if there are no appointments left
- ▶ Please accept advice about going to the pharmacy, see the physio, speak to a pharmacist or another clinician in our building or see a dentist, as a GP is not the right person for all problems
- ▶ Please contact the hospital direct about tests they have arranged or follow up appointments, (or to know how long the queue for an OPA is see myplannedcare.nhs.uk)
- ▶ Try the NHS app or websites for advice on minor illness
- ▶ Fight our corner on social media or contact your local MP to get the politicians to put more funding into the primary care budget



- ▶ These delightful penguins represent General Practice in the UK. Due to the poor funding in the system, many practices are perilously close to the cliff edge. It only takes a small nudge, and the penguin falls into the ocean, or the practice fails and has to hand back their contract and the patients are dispersed.