



## Consortium of Local Medical Committees

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15 October 2021

Letter to All GPs & PMs in Lancashire & Cumbria

### LMC Response to the Communication of 14<sup>th</sup> October from NHSE

Dear Colleagues,

You will have no doubt heard about the document released yesterday by NHSE entitled “Our plan for improving access for patients and supporting general practice.” Maybe you have not seen the document itself, but it has had extensive media coverage.

Whilst the document’s title suggests it is “supporting” general practice the reality is far from this. It sets out to be punitive with contract sanctions, together with naming and shaming practices that struggle to achieve what NHSE see as acceptable access rates.

This document comes on the back of a campaign of negative comments from the PM and SoS fuelling some very negative press coverage in certain national newspapers. We all know it can be frustrating for our patients in trying to access any health care at the moment, but this campaign vilifies general practice and encourages aggressive behaviour from a small section of the population.

We know that general practice has had a very tough time this last 18 months. You were under pressure before COVID but now it is something else and it is difficult to imagine how you have all coped so well in difficult circumstances. You are now seeing more people than ever, undertaking vaccine programmes, and dealing with a lot of unplanned transfers of work from secondary care. And all on a reduced workforce. This is not sustainable anymore and needs to stop.

What we need from NHSE is compassion and reassurance that we will be supported in doing the best we can in impossible times. This document is the opposite of this. It is prescriptive, menacing and blame apportioning.

Our advice to you is to stay safe: look after your own safety as a GP; look after your patients’ safety and welfare; and look after your practice staff health and safety. How you do this is up to you; all practices are different in terms of staffing levels and skill mix, your premises and your patient population.

The LMC will support you to the hilt in your efforts, in these difficult circumstances, to “meet the reasonable needs of patients” as specified in your contract with NHSE. Furthermore, any hint of contract sanctions or forced mergers for practices in the bottom 20% of some arbitrary access targets, will be met with the strongest of opposition from your LMC. We are in close contact with our national representative body, the General Practitioner Committee (GPC) of the BMA on how we provide a concerted local and national response to this unacceptable and insensitive behaviour from NHSE and the SOS. We will keep you advised of developments.

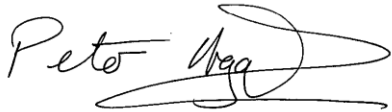
We must find a way of limiting the inexorable extra work that flows into general practice. We are where we are because of years of underfunding of primary care and there is no quick fix by throwing money at it with two weeks’ notice to produce a solution. The doctors are simply not there to take up any extra demand and we also struggle to recruit to other primary care clinical roles. There is no

recognition out there that general practice is working over its capacity level and that we have an exhausted and now demoralised workforce.

Our secondary care colleagues either don't understand or are too busy with their own problems. Now is the time to stop the transfer of work from secondary care, but to do so we need a unified approach across the consortium. We cannot simply respond to more and more patient demand; we need to find a way of capping the number of patients a practice can see, either face to face or remotely, so that each GP or health care professional can give the attention and priority to meet the needs of the patients in front of them. They cannot do this with rushed consultations, extremely long days and patient aggression. The result is exhaustion, burn out and walking away from the profession. We cannot let this happen. We will be consulting with you how best to support you in capping demand and stopping the transfer of secondary care work.

In the meantime, if you have any queries about access challenges in your practice please contact the LMC Office for advice.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Peter Higgins', with a large, stylized flourish underneath.

**Peter Higgins**

**Chief Executive**