



NEWSLETTER

NOVEMBER 2024

The Search for Collective Clarity: Has the Penny Finally Dropped?

There's nothing like a sudden financial jolt to focus the mind. On 30 October 2024, UK businesses, including general practices, were hit hard by the announcement of increased Employers' National Insurance Contributions (NIC) and the national living wage hike. While NHS public bodies were exempted, general practices—classified as private businesses for NIC purposes—were left to shoulder the financial burden themselves.

The reaction was swift. GPs turned to social media to voice their concerns, while GPCE Chair Dr Katie Bramall-Stainer wrote to the Secretary of State for Health, and the BMA issued a statement outlining the potential fallout. Online calculators soon emerged to quantify the financial impact, translating budget deficits into potential job losses if no solution is found before April 2025.

If you haven't already assessed the implications for your practice, the BMA has created a useful calculator [here](#) for its members.

The Independent Contractor Model Under Fire

The classification of GP partnerships as privately owned businesses remains a contentious issue, with calls to integrate GPs into the "NHS family" gaining momentum. However, critics overlook evidence supporting the independent contractor model as one of the NHS's most efficient structures. Unlike NHS trusts, partnerships operate without deficits.

These issues will be front and centre at the England Conference of LMCs in London on Friday 22 November. Emergency motions to escalate collective action are expected, and results will follow on the BMA conferences webpage after the event [here](#).

Cambs LMC Open Meeting

On Thursday 7 November, we hosted an open meeting where 82% of attendees reported taking one or more collective actions, and 11% were working toward implementation. Popular actions included limiting daily patient contacts to 25 and halting the rationing of referrals, investigations, and admissions.

For those seeking further support to expand their actions, we've prepared updated guidance to assist you and your practice:

Action 1: Limit Daily Patient Contacts to 25

Evidence from UEMO supports this cap for safe working conditions. If you haven't already adopted this measure, we strongly encourage you to do so. The BMA's Safe Working Handbook offers practical advice [here](#).

Dr James Booth, Cambs LMC Medical Director has [recorded a safe working webinar which can be viewed here](#). Additionally, James will be hosting drop-in sessions for more tailored support—details on how to book onto these will follow shortly.

Action 2: Push Back on E-Referrals (A&G)

While many have embraced this action, challenges remain. Templates to assist with communications to hospital trusts are available [here](#). Regular discussions with Trust Medical Directors help highlight these issues, but we need your continued participation to drive change.

Action 3: Serve Notice on Voluntary Contracts

Survey results show the top unfunded services adding to your workload include PSA monitoring, MGUS monitoring, endocrinology and rheumatology blood monitoring, repeat ECHOs, and repeat DEXA scans.

To assist with PSA monitoring, we've created a comprehensive template pack in collaboration with Beds and Herts LMC [here](#). We're also writing to the ICB and trusts to address these commissioning gaps.

Action 4: Review LCS Funding

Many practices are finding that the funding for services like complex dressings is inadequate. We encourage you to assess the true cost of delivering these services and contact us at office@cambslmc.org for support.

Action 7: Do Not Switch Off MOT Software

After discussions with the ICB Medical Director, we advise against disabling OptimiseRX software due to its safety features. While some messages focus on cost savings, clinical safety remains the priority, and decisions about cost-based suggestions are at your discretion. Prescribing continues to offer challenges, and we have had many enquiries about the Boomerang Eclipse programme in the LCS. Our up-to-date guidance will be found [here](#) in the coming days.

Supporting Your Journey

We recognise the emotional toll these challenges are taking. At our open meeting, GPs described feeling tired, stressed, frustrated, worried, and overwhelmed. Practices are at varying stages of implementing actions, with some eager to move quickly while others feel left behind.

Whilst Government is so keen to emphasise that General Practices are independent private businesses, we are here to provide you with tools, information and practical guidance to empower you to be confident in the decisions you are making. Couple this with the proven efficiencies in our sector and the ability to garner patient support, we have a strong basis from which to build further action on.

We recognise the strength that comes when this decision making results in aligned and collective action however, no matter where you are on this journey, as always, we are here to represent, support and advise you all.

Please continue to keep in touch with us in the usual way.

PSA Monitoring

Following the open meeting, we recognise that many of you are keen to get on with identifying gaps and serving notice to the ICB and Trusts.

Local surveys have demonstrated that your top 5 unfunded services with the highest workload are PSA monitoring, MGUS monitoring, Endocrinology & Rheumatology blood monitoring, ordering repeat ECHOs and ordering repeat DEXA scans.

We continue to work with other LMCs on identifying a comprehensive list of unfunded work and have created a PSA template pack with thanks to Beds and Herts LMC for shared resources.

This pack has all that you need to give notice on your appropriate PSA monitoring and can be found [here](#).

We will be writing on your behalf to the ICB and the relevant Trusts. It is important that our secondary care colleagues are aware that this is not work for them but a commissioning gap that needs to be filled. PSA is just the start, and we intend to support you to rapidly expand this into the other unfunded areas.

Recently reviewed/new Cambs LMC Guidance

Gender Identity - recently reviewed and updated: [read more](#)

Bariatric Surgery - recently reviewed & updated with template letter: [read more](#)

Non compliance with monitoring - recently reviewed - no changes: [read more](#)

Requests from Ambulance Crews - New, with thanks to LLR LMC for resources: [read more](#)

Cambs LMC Ltd Annual Report

We are delighted to share with you, our Annual Report for 2023-24. The LMC remains highly visible to you with our newsletters, guidance, updates and Open Meetings. Your LMC is in a strong position offering excellent services to the local profession. With a fully engaged committee, a supportive board, and an experienced executive team, we remain committed to representing, supporting, and advising you to the best of our abilities.

2023/24

ANNUAL
REPORT
Cambs LMC Ltd



▶ The Budget NI Blow

BMA UK Council met on Wednesday and emergency business included the Chair of Council, Professor Phil Banfield committing total support to our branch of practice, echoed in a formal statement subsequently shared across social media. GPC England met where we discussed the implications of the cost pressures, strategy for discussions with the heart of Government ahead of the national conference of LMCs on Friday 22 November, and first-hand experience of the personal impact on GP elected members.

Early data from our BMA online calculator confidential submissions suggests cost pressures potentially running into the hundreds of thousands of pounds for GP contractors – whose practices may have to close or reduce staff and services as a result. The BMA is [putting pressure on the Government](#) to guarantee these cost pressures be fully resourced, and has launched a calculator to estimate the impact on your practice. Please sit down and login with your practice manager and click submit to share your figures anonymously to help us build a picture of the reality facing practices.

We have [created a calculator](#) to help you estimate the impact from April 2025 of these increases to employer National Insurance contributions and the national minimum/living wage on general practice in England.

As well as ongoing discussions with the DHSC, we wrote to the [Treasury](#) in the immediate aftermath of the Autumn Statement and there have been ongoing questions put in the House of Commons, supported by BMA members using the MP letter tool to keep the pressure up on this evolving crisis.

Help us to continue to put pressure on the Government by writing to your local MP using our [online tool](#)

Listen to the [Medics' Money](#) podcast about pressures facing GPs and why the Budget was so devastating for the profession. The podcast covers:

- The impact of the National Insurance employer contributions increase
- Why and how GPs can take part in collective action
- Ongoing problems GPs face with PCSE processing pension records
- The postcode lottery of LES funding

Watch [here](#) or listen [here](#).

Read more here: www.bma.org.uk/BudgetNIblow



Statement from BMA Council on the adverse effects on UK general practice of the Autumn Statement of 30 October.

BMA Council is astonished at the suggestion that GPs are not part of the NHS family, and recognises the existential threat to NHS General Practice across the UK by the significant increase of the National Insurance and National Living Wage burden on general practice after many years of under-investment. We call on health department politicians in all parts of the UK to immediately announce plans to fully meet these added costs that lie outside of any pay uplift mechanisms.

▶▶ Collective Action

Thank you to every practice now taking part in our collective action to protect our patients and practices. These [actions](#) have already, and will continue to make a difference: they are safe, sustainable, and do not breach your contract. This is turning up the pressure on the Government to do the right thing for patients and general practice. We are the bedrock of the NHS, but our services have been driven to near collapse.

We need you to take action to protect our patients and protect our practices.

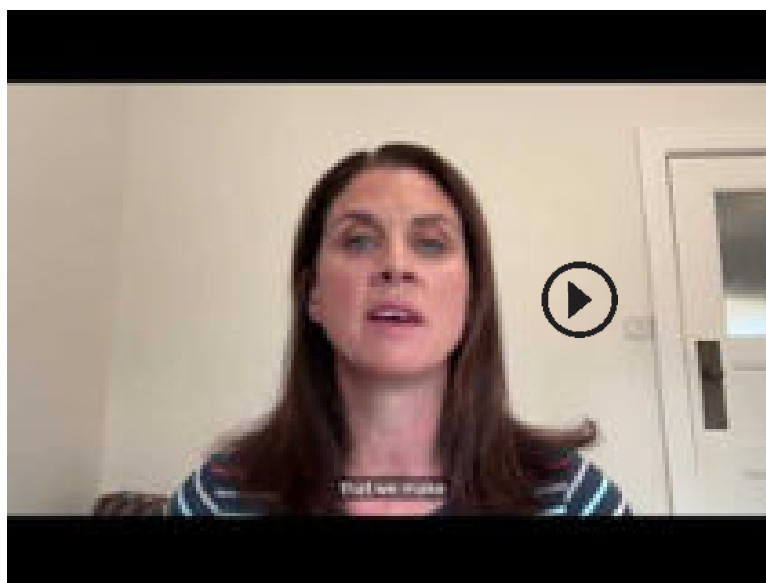
We are producing more guidance around individual collective actions to support those practices in undertaking specific actions. This week we are focusing on Advice and Guidance.

[Watch our collective action video on advice and guidance](#)

This two-minute video shows GPC England's views on this specific collective action. Dr Clare Bannon discusses how advice and guidance has been used when a referral would have been appropriate and that this has increased both work and risk for GPs. Using advice and guidance is not a contractual obligation, so as part of collective action, her practice is pushing back making it clear in referral letters that a patient should be provided with a consultation.

The [BMA's GP campaign webpage](#) has more information about all of the actions. Please also refer to our [Safe Working Guidance Handbook](#) and other useful links such as the [guidance for GP collective action](#) for sessional GPs and GP registrars, [background to the 2024/25 contract changes](#), waiting room/website videos and [infographics](#) that can be downloaded and displayed in practices. Campaign materials such as patient leaflets, lanyards, badges, window stickers and Beanie hats continue to be available from [the BMA rep Hub](#).

We want GPs to feel safe and empowered to take action that protects their patients and their practices.



▶▶ Data Access and Usage Bill

A government bill presented to parliament is having its first debate on 19 November in the House of Lords – the legislation proposes measures to replace the ICO and amend the existing regulatory framework in several significant ways. It also includes provisions that will directly impact the NHS and primary and care including the establishment of a new regulatory framework to mandate NHS IT System suppliers to develop software that they sell to the NHS in line with technical information standards set by the NHS – something the BMA has long-called for, a fact that the government has acknowledged in the bill's impact assessment. The BMA has briefed members of the House of Lords on the issues above as well as restating the case for adequate resourcing of data access requests made to GPs on behalf of patients.

GPC England Chair Dr Katie Bramall-Stainer has co-authored an editorial in this week's BMJ alongside Jess Morley and Cori Crider calling for transparency around digital transformation: <https://www.bmj.com/content/387/bmj.g2494>

▶▶ NHS England 10 Year Health Plan

DHSC and NHS England have launched a consultation – [Change NHS](#) – to help inform the development of a new 10 Year Health Plan. The consultation is looking for ideas on how the NHS can improve, as well as views on these three proposed 'shifts'; moving more care from hospitals into the community; going from analogue to digital; and moving toward prevention and away from sickness.

The BMA is developing its response to the consultation, but individual GPs and practice managers can also respond to a separate survey on the Change NHS website: <https://change.nhs.uk/en-GB/>

▶▶ Focus on DDRB Pay Award

As part of our [Guidance on the imposed 2024/25 GP contract](#), we have also published a [Focus on document on the 6% DDRB pay award](#) and how it is applied to the national practice contract baseline funding ('Global Sum') and allocated to practices.

General Practice Annual Electronic Self-Declaration (eDEC)

The electronic practice self-declaration (eDEC) is a mandatory collection which all GP practices in England must complete every year. The revised version was published on 11 October – read more [here](#).

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▶▶ Bringing back the family doctor: a round table discussion event

GPC England and the BMA Patient Liaison Group are inviting leading patient organisations to attend a roundtable meeting at BMA House on 28 November to discuss the recently [published 'Patients First' vision for general practice](#). GPCE are keen that this discussion will open up further opportunities for joint working as well as develop understanding of the patient perspective in response to:

- What immediate actions can be taken to meet patient needs without requiring additional funding
- Priorities for the forthcoming NHS 10-year plan
- What is needed in the short term for 2025/26 to stabilise GP services for patients
- How a new GP contract within this Parliament could ensure patients receive the care they need

▶▶ Do you look after asylum seekers or refugees?

It is well-evidenced that this group of patients continue to face significant barriers accessing appropriate and timely healthcare. We've launched a survey to capture your experiences, so the BMA can update its Refugee and Asylum Patient Health Toolkit and influence government policy to better support you in enhancing healthcare services for asylum seekers and refugees. Share your views and complete this ten-minute [survey](#) by 14 December 2024.



The graphic is a teal-colored square with white and light teal text and icons. On the right side, there is a white outline of a clipboard with a checklist and a speech bubble containing three dots. The BMA logo is in the top right corner. The text reads: 'Have you completed our survey on healthcare services for asylum seekers and refugees?' followed by 'Share your experience and complete our survey by 14 December'.

REBUILD

GENERAL

PRACTICE

Funded by the General Practice Defence Fund on behalf of the general practice community, Rebuild General Practice is a national campaign, calling for support to retain the GP workforce, seek fair funding and greater freedom. [Find out more here.](#)

REBUILD

GENERAL

PRACTICE

CAMPAIGN UPDATE

Under a new Government, political promises to rebuild general practice have been made, but our future remains uncertain. Now is the time to ensure GPs get a say on what changes - and how - across England, Scotland and Wales.

Rebuild General Practice is a grassroots campaign funded by the GPDF. It raises awareness of the crisis in general practice and supports GPs and LMCs to shape the future of the profession.

The campaign has secured national media cut-through, political support - and mobilised and supported LMCs and grassroots GPs to intervene in political debate and shape future policy. Thank you to every LMC and GP who has been active within the campaign to date.

In March, at the annual EGM, we will ask LMCs to support future funding for the campaign. This leaflet spotlights campaign activity between now and then, and how the campaign can support you and your LMC. Get in touch: hello@rebuildgp.co.uk

SPOTLIGHT ON IMPACT

In 2024, Rebuild General Practice, working with GPs, secured 505 GP stories in the press, engaged with 80 Parliamentarians, and shifted the political conversation towards rebuilding general practice. We know 34,000 of you have visited the campaign website and 3313 follow us on X.

SUPPORTING LMCs

We develop tailored plans for you to activate based on what your LMC needs. This has led to LMCs organising MP surgery visits, peaceful demonstrations and patient engagement materials. Get in touch to arrange a briefing and secure support: hello@rebuildgp.co.uk





»»» PROTECTED LEARNING TIME Wednesday 20 November 2024

14:30-15:30 - For Clinicians, we have Supporting Patients with Substance Use in Primary Care, with Dr Justin Markiewicz, please [click here](#) to book your place.

15:45-17:15 - For Locums, Dr Richard Maddison will be hosting a separate 1.5 hour session, to work through the associated discussion guide as a group - [book your place here](#).

You can also find details of further sessions together with our previous PLT interactive learning sessions and resources, on our web page here: <https://cptraininghub.nhs.uk/protected-learning-time-plt>

»»» GPs KEEP IN TOUCH (KIT) SESSION Returning to work - facing the unknown with confidence

Thu 28 November, 19:30-21:00

This session is aimed at GPs who are on parental leave or considering parental leave in the future. Our host Dr Sarah Ray will introduce two local GPs, Dr Rebecca Ward and Dr Tanya Leger, to talk about their own lived experiences. The session is designed to increase awareness of how to make the best use of parental leave, provide an understanding of finances and appraisals during parental leave and help you feel more confident about returning to work after parental leave. Please [click here](#) to book.

»»» CPTH FELLOWSHIP FOR NEWLY QUALIFIED GPs: Cohort 2 now open!

Our CPTH Fellowship programme for GPs supports the transition into General Practice for newly qualified GPs. After the successful launch of cohort 1, we are now delighted to announce that we are accepting applications for cohort 2, which is due to commence in February 2025. There are 10 fellowship places available and the deadline for applications is Tuesday 17th December 2024. Places will be allocated on a first-come, first-served basis. Please [click here](#) for more information and the online application form, which must be submitted by the employing practice.

»»» Leadership Development Fund

Are you looking to develop your leadership skills? The Training Hub has a Leadership Development Fund available for those who are in or en-route to a leadership role in practice of up to £800 per person. If you are interested in knowing more visit our [web page here](#).

»»» Supporting Future Educators

Are you interested in becoming a GP Educator? If so, we are taking expressions of interest for the next cohort of our Supporting Future Educators programme, which will guide you through the blended learning. [Click here](#) for more information and to express your interest.

»»» NB Medical Update for GPs - Early Bird Offer!

The Hot Topics Update course on Wednesday 19 March 2025, 09:30-17:00 will update you on the latest developments in the literature and serve as a platform for CPD to help you to deliver better patient care. It consists of a series of short 'TED-style' engaging presentations blending evidence and cases, followed by discussion which may impact your practice. The course also includes a range of incredible 'added value' extra resources. The **Early Bird offer is £75.00** for a limited period. Please [click here](#) to book.

»»» Mid-Career Development Funding

Are you a mid-career GP who would like to explore a special interest in study as you progress through your career? We are now delighted to support you with Mid-Career Development Funding. We are also keen to hear from those who would be willing to mentor others as part of this opportunity. [Click here](#) for more information.

Sign up to receive our updates

Anyone can request to receive our newsletters and updates.

C&P Locum GPs can request to join our locum mailing list.

C&P GPs and Practice Managers can request to join the LMC Link mailing list.

Email us to enquire: office@cambslmc.org

Support and signposting

Cambs LMC is always here to represent, support and advise GPs and their practice teams in a safe, confidential space if you are struggling or in distress. We actively encourage you to reach out to us. Visit our [website](https://cambslmc.org) for more information or snap the QR code:



GPAS

Audit and submit your alert state before 17:00pm on Thursdays each week: <https://cambslmc.org/gpas/>

Vacancies in General Practice

We advertise any roles in General Practice on our website: <https://cambslmc.org/jobs/>. This remains a free service to our constituent practices in Cambridgeshire & Peterborough. To advertise a vacancy in your practice, please email us the details, including the closing date and any supporting documents in to office@cambslmc.org.

Practices seeking GP Locums - We continue to forward any GP Locum availability you might have to our locum mailing list. When sending requests to office@cambslmc.org to forward on, please remember to include a short synopsis of your practice in your requests i.e. where you are, what clinical system you use and relevant contact information.

Remote GP Locum sessions - If you have roles which could be undertaken remotely – why not advertise these too? Attract GPs from across the country, and rather than working for other companies, they could work for you, and get NHS pension contributions and instant messaging with senior GPs to support.

BMA Wellbeing

View BMA wellbeing support services page here:



<https://www.bma.org.uk/advice-and-support/your-wellbeing>

A range of wellbeing and support services are available to doctors, including 24/7 confidential counselling and peer support services, NHS practitioner health service and non-medical support services such as Samaritans. Doctors in Distress also provides mental health support for health workers in the UK, providing confidential peer support.

See their **poster** with 10 tips to help maintain and support the wellbeing of you and your colleagues.

BMA Guidance Links

Practical guidance for GP practices

Safe working in General Practice

Latest GP Bulletin (England)

Latest Sessional GPs update

Latest on X/Twitter: [@BMA_GP](https://twitter.com/BMA_GP) and [@TheBMA](https://twitter.com/TheBMA)

PCSE Guidance Links

Guidance Pages

Monthly Updates

Youtube

CQC Guidance Links

Guidance for GPs

Youtube

GP Mythbusters

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Alice Benton – Interim Chief Operating Officer
Dr James Booth – Medical Director
Emma Drew – Executive Officer
Suzy Stoodley – Executive Officer
Molly Collison – Administrator

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