

From: Clare Sully [Forrest Burlinson] c.sully@forrestburlinson.co.uk

Subject: FW: BMA puts Quality First

Date: 16 January 2015 09:42

To: Dr A Mehrotra i Pad (ajit.meh@me.com) ajit.meh@me.com, (Anuj.Handa@GP-B85611.nhs.uk) Anuj.Handa@GP-B85611.nhs.uk, (Ajit.Mehrotra@GP-B85620.nhs.uk) Ajit.Mehrotra@GP-B85620.nhs.uk, Amarjeet Singh (amarjeetsinghuk@yahoo.co.uk) amarjeetsinghuk@yahoo.co.uk, (annalunn@hotmail.com) annalunn@hotmail.com, Anna Lunn Kirklees NHS (anna.lunn@kirklees.gov.uk) anna.lunn@kirklees.gov.uk, B. D. Lynch (drbdlynch@gmail.com) drbdlynch@gmail.com, (Bert.Jindal@gp-B85042.nhs.uk) Bert.Jindal@gp-B85042.nhs.uk, Bert Jindal (bertjindal@gmail.com) bertjindal@gmail.com, Elaine Oldroyd (elaine.oldroyd@gp-b85009.nhs.uk) elaine.oldroyd@gp-b85009.nhs.uk, Dr Hanume Thimmegowda (Hanume.Thimmegowda@gp-B85646.nhs.uk) Hanume.Thimmegowda@gp-B85646.nhs.uk, Lynne Bolton (Lynne.Bolton@GP-B85009.nhs.uk) Lynne.Bolton@GP-B85009.nhs.uk, (natarajan.chandra@ntlworld.com) natarajan.chandra@ntlworld.com, (rd.jenkinson@btinternet.com) rd.jenkinson@btinternet.com, (richard.vautrey@nhs.net) richard.vautrey@nhs.net, Robin Sharman (Robin.Sharman@GP-B85641.nhs.uk) Robin.Sharman@GP-B85641.nhs.uk, robin.sharman@btinternet.com

Cc: Ebrahim Suleman e.suleman@forrestburlinson.co.uk

From: GPC Local Medical Committees discussion list [mailto:LMC-L@LISTSERV.BMA.ORG.UK] **On Behalf Of** Gail Norcliffe

Sent: 15 January 2015 16:53

To: LMC-L@LISTSERV.BMA.ORG.UK

Subject: FW: BMA puts Quality First

Please see below this week's edition of Chaand's newsletter

Gail

Gail Norcliffe
Joint Head
NHS Primary Care Division
British Medical Association

020 7383 6014

[Find out about Quality First | View in a browser](#)



From your GPs committee chair



[Quality must come first](#)

Dear Colleague

I am pleased to inform you that the BMA GPs committee has today launched important guidance

for GPs and practices, [Quality First: Managing Workload to Deliver Safe Patient Care](#).

It is in response to GP workload having now reached unmanageable proportions, against a backdrop of escalating demand, which has far outstripped our impoverished capacity, and which is seriously impairing our ability to deliver the care our patients need.

GPs are trying to square an impossible circle; many working 12- to 14-hour days, seeing up to 50 patients — including those with complex needs — on a conveyor belt of 10-minute slots, added to by numerous telephone consultations, daily home visits, ploughing through a mountain of hospital correspondence, test results and repeat prescriptions, writing reports, making referrals, attending meetings, as well as the rigours of running a GP practice.

No wonder the recent BMA quarterly tracker survey showed that the percentage of GPs describing their workload as ‘unsustainable’ was 74 per cent — higher than for any other category of doctor.

Funding cuts to individual practices via imposed changes to the MPIG (minimum income practice guarantee) and PMS (personal medical services) reviews are exacerbating the problem, while other practices are struggling to provide services with unfilled GP vacancies.

In this intense, pressured climate, it is crucial that the safe provision of care to patients remains GPs’ overriding priority, at a time when practices are undermined from doing so by excessive, inappropriate or unresourced work.

[Quality First: Managing Workload to Provide Safe Patient Care](#) is a handbook to empower practices with practical tools, including model templates, to manage workload and to shape demand, in order to fulfil their responsibility to deliver essential services to patients.

I would urge you to read this document and to discuss strategies in your practice meetings to manage your workload so that GPs can focus their availability for the core needs of patients requiring GP services.

The guidance covers:

- Reducing clinical workload that is inappropriate for GPs or practices. It also emphasises the need for GPs to work within their competencies in the interests of their patients, and their professional duty of care
- Reviewing and limiting voluntary additional work, enhanced services or schemes that are detracting from practices’ ability to focus on their prime responsibility to patients to provide GP services
- Measures to cease unfunded and under-resourced work, given that this will result in GPs and staff time being taken away from their core duty of care to patients
- Working in partnership with patients to empower them with appropriate self-care and management skills
- Working in collaboration with neighbouring practices to manage workload, and provide systems of support
- Developing new systems of working, including the use of IT, to manage workload and increase productivity
- Measures to manage practice-list size, if practices have concerns about their lack of capacity to provide safe care
- Guiding GPs to seek assistance if they feel their workload is impacting on their contractual and professional duty of care, or on their own health.

This guidance comes at a time when NHS England has also recognised the excessive and inappropriate workload pressures on GP practices, and has commissioned a project which is looking at inappropriate demands on practices, as well as reducing bureaucracy. See 'NHS England exercise to help reduce workload in general practice' below.

Use your powers as CCG members

A key component in England is for practices to exercise their rights as CCG (clinical commissioning group) members, to influence their CCGs to use their commissioning levers to halt inappropriate workload shift, and to provide practices with resources for transferred work, should

inappropriate workload shift, and to provide practices with resources for transferred work, should they choose to take on additional services.

I am writing to the chairs of every English CCG, advising them of this publication, and recommending that every CCG board meeting should have a standing item on GP pressures and supporting practices.

I have also suggested that every commissioning decision or policy should have an impact assessment on GP practices, since all too often decisions are taken to achieve cost-effectiveness in one part of the system, with no regard to the increased workload implications for GPs.

Reclaiming control

This publication is the beginning of a theme for GPC in the coming months.

We will build on this with ongoing information and materials, supporting you to manage your workload, and find new ways of working more effectively.

At a time when all practices, my own included, feel beleaguered with engulfing pressures, it is important that we remind ourselves that as GPs we do have some say over the way we organise ourselves and our work.

This handbook is designed to help you reclaim that control, in order to work within manageable limits and provide safe, quality care to patients.

We also want to find out more about what your practice is doing in response to the workload pressures.

If you have implemented changes tell us what has worked and what hasn't. Take a look at the guidance and [tell us what you think on BMA Communities](#).

You will need to log into BMA Communities to comment as this is a private forum.

[Find out more about Quality First: Managing Workload to Deliver Safe Patient Care.](#)

With best wishes,
Chaand Nagpaul
BMA GPs committee chair
info.gpc@bma.org.uk

More from your GPC

[An honest conversation with patients](#)

In my last newsletter I mentioned that a priority for the BMA GPs committee in 2015 is to have an honest conversation with patients regarding their views on GP services within the harsh reality of inadequate resources, as opposed to the open-ended wish list that politicians promote.

We are holding two events with patients this week, in Poole and Leeds, to get their views on a number of issues including their priorities for GP services within this reality, trade-offs such as between access and continuity, and their attitudes to self-care. We will be producing and promoting a report thereafter which will inform GPC policy to influence an incoming Government.

[GP survey: make your voice heard about your future](#)

Further to my last newsletter, you should have received GPC's major survey of GPs by email and post.

I would once again like to urge you to complete and return the survey, to give us a comprehensive picture of your views and empower us to fight for solutions to the current pressures in general practice, and promote a future based on your wishes.

If you have not received a copy of the survey you can [request a link to the electronic version by email](#).

[NHS England exercise to help reduce workload in general practice](#)

NHS England has commissioned work from NHS Alliance and the Primary Care Foundation to identify opportunities to reduce workload in general practice.

All practices are invited to participate in two audits: to measure bureaucratic demands, and potentially avoidable demand for appointments.

The audit on potentially avoidable appointments runs until 30 January 2015. If three or more members of a practice complete it, the Primary Care Foundation will prepare a report for the practice, comparing results.

GPC in the media

Exposing the realities of a day in the life of a GP, York's John Lethem has been the focus of two special pieces in the Yorkshire Post. Over the course of two days he discusses the ongoing workload pressures but also gives the public an insight into the daily activities of a hard-working GP. Read about a [morning in the life of a GP](#) and read about [a day in the life of a GP surgery on the frontline](#).

The BMA GPs committee's new guidance to GPs on managing workload has also appeared in [Pulse](#) and [GP magazine](#).

In other news BMA GPs committee deputy chair Richard Vautrey has spoken to [The Guardian](#) newspaper about pressures on general practice in relation to the recent winter pressures figures, and I was interviewed by LBC radio in response to a survey showing that the public is in favour of rationing healthcare for heavy smokers and drinkers.

Tell us what you think of your new newsletter:
enewsfeedback@bma.org.uk

Follow us



[Forward to a friend](#) | [Join the BMA](#) | [Update your details](#)

Registered office: BMA House, Tavistock Square, London WC1H 9JP
Registered Number: 00008848



This email has been scanned by the Symantec Email Security.cloud service.
For more information please visit <http://www.symanteccloud.com>

The BMA is the voice of doctors and medical students in the UK.

We are an apolitical professional association and independent trade union, representing doctors and medical students from all branches of medicine across the UK and supporting them to deliver the highest standards of patient care.

This email and any attachments are confidential and intended solely for the addressee.
If you have received this email in error please notify postmaster@bma.org.uk.
Email sent or received by the BMA is monitored.

The British Medical Association.

Registered as a company limited by guarantee in England and Wales under registered number 00008848.

Registered office: BMA House, Tavistock Square, London WC1H 9JP

<http://bma.org.uk>

This email has been scanned by the Symantec Email Security.cloud service.
For more information please visit <http://www.symanteccloud.com>
