## BMA 2024-25 GP contract referendum FAQs

For All

### Am I eligible to vote in this referendum?

You can vote as long as:

- you are a BMA member
- you are practising / training in England

and are either

- a GP contractor / partner
- a salaried GP
- a locum GP
- a GP registrar / GP in training.

#### I'm a BMA member, but I've not received my email with my e-voting link. What should I do?

The referendum is being run independently by Civica. You will therefore receive your email from them. They will send out voting emails in regular intervals as members join and or update their membership details in the coming days / weeks, so please do not panic. The referendum closes on 27<sup>th</sup> March at midday.

First, however, check your junk folders the email account you have registered with the BMA. Second, <u>log-in</u> and check your membership data with us is up to date. Click 'My BMA' > Click 'My Account' > At top click 'Manage My Account' > Click 'Work Information' > Check 'Primary Role' is at a GP surgery.

If you're a locum GP, choose one of your regular practices from your current employment engagements as your place of work / employer for now. This will be changed so that you do not have to select a place of work / employer at all from Monday 11<sup>th</sup> March. In the meantime, you have until midday on 27<sup>th</sup> March to vote.

*If you are a GP contractor / partner, put your place of work as the practice for which you hold the contract.* 

If you've done all that and still haven't received your voting email, please let us know via this form.

#### I'm not a BMA member and I've not received my email with my e-voting link. What should I do?

You need to join the BMA first to participate in this referendum by Monday 25<sup>th</sup> March and for any future votes. <u>Join</u> us!

#### How can I read more about the 2024-25 GMS contract discussions and the DHSC / NHSE changes?

Visit <u>www.bma.org.uk/gpcontract</u>.

You can also read NHSE's letter to practices from 28th February

#### Why is this contract relevant to me?

The future of general practice services is relevant to all GPs and GP registrars in England. Whether you're:

- already struggling to deliver your service contract
- struggling to keep up with the workload, regular unpaid overtime as a salaried GP and/or insufficient annual pay uplifts to match inflation
- cannot find enough / any work or cannot find work with fair working conditions as a locum GP
- having your training time ruined because you are regularly being asked to contribute to service delivery beyond your contractual requirements
- have reluctantly left NHS practise and work in the private sector because of the terms and conditions on offer

we invite you to consider these contract changes from your own perspective as well as those of your colleagues and your patients.

It is from the investment in this contract that working conditions and pay are derived for all GPs and practice-employed staff. GP Registrars may have a different training contract, but they will become qualified GPs in the not-too-distant future. Every missed opportunity to improve the GP contract means it will take us longer to get things back to a place where work is safe and patient care is safe and of the quality they deserve. Check out the BMA's <u>general practice pressures data analysis</u> page to see how hard we work as a profession but how far away we currently are from safe practise and numbers of GPs.

# What is the significance of the Government's use of the GDP deflator inflation measure forecast rather than CPI (as it did for the 2019-24 contract)?

The GDP deflator and CPI are both measures of inflation. However, CPI is a measure of consumer price inflation (that's what CPI stands for) whereas GDP is a wider measure of inflation that includes goods and services bought and sold by the Government, as well as business investment spending among other things.

Inflation as measured by the GDP deflator tends to be lower than CPI. The latest forecasts suggest CPI increased by 21.7% between 2019/20 and 2023/24, whereas the GDP deflator only increased by 19.0%. So the Government using the GDP deflator means that the contract looks like it has fallen less in real terms than it would using CPI.

The GDP deflator is inappropriate for the GP contract. CPI is more appropriate because many of the things included in the GDP deflator are not relevant to the GP contract, and the biggest part of the GP contract – staff wages – should be linked to a measure of consumer inflation not the GDP deflator.

## Why do I have to be a member to have a vote?

The national GP contract was built on GPs standing together to get the best contract for them and their patients. Only by continuing to do that will the BMA GP branch of practice be able to access the best insights from across the profession in order to design and negotiate a substantially improved contract from 2025-26 and beyond.

Should any future balloting and subsequent industrial action be ordered by the membership, strict trade union laws apply around who can vote and the membership data we hold for them.

We've let poor national policies divide us for too long. The collective lobbying and individual benefits BMA membership gives you cannot be found elsewhere, and it's high time we strengthened that and secured the best possible future for the next generations of GPs and general practice staff.

#### Can I join the BMA now and still vote in the referendum?

As long as you join by Monday 25<sup>th</sup> March, you will be included in the referendum vote and will be sent an email with your e-voting link.

If you can't join before then you are strongly encouraged to do so as soon as you can. General practice in England was built on unity, collaboration and looking out for each other regardless of contractual status to ensure patients always get the highest quality care. We are stronger together.

#### Where can I find out about the contract webinars?

We will email times / dates and links to forthcoming webinars and regular intervals to all GP and GP registrar members. LMCs will also have this information.

There will also be roadshows in the summer, as we will continue engagement with members throughout the year.

#### What happens after the referendum?

The outcome of this referendum will inform our collective next steps. There are roadshows planned in the summer and the BMA and your LMCs (local medical committees) will be disseminating further information to GPs / GP registrars throughout the coming weeks and months.

#### Will the BMA be producing guidance for my practice when the contract is imposed?

Yes, the BMA's GPCE (GP Committee England) will produce and publish advice and guidance to help you consider how best to approach the contract changes. We will include this in the regular GP member bulletins and LMCs will also disseminate it to practice constituents.

We strongly encourage you to discuss this with your LMCs and neighbouring practices. It's easy to insist GPs and practice staff absorb more and more, but the Government is responsible for making sure enough resources exist so that staff are practising safely and patients receive safe care.

#### Will you be updating the BMA safe working guidance?

Yes, we will update, re-publish it and let the profession know as soon as possible.

#### Is there a reduced fee / membership offer to enable me to join?

You can review our subscription costs <u>here</u>. Our offers are always under review and we're listening to feedback on the current concessions available.

### **GP** contractors / partners

#### Does it matter what contract my practice holds for me to vote in this referendum?

No. GP contractor / partner members holding either GMS (general medical services), PMS (personal medical services), APMS (alternative provider medical services) contracts or any other type of contract with an ICB (integrated care board) are all entitled to vote and have a say.

### How much additional funding did GPCE ask for for 2024-25?

The Government / NHSE themselves coined 2024-25 as a 'stepping stone' year, which was meant to provide a stable foundation for more substantial positive reform from 2025-26 and beyond. We therefore provided evidence simply demonstrating the impact of inflation on the erosion of the real-terms value of the core practice contract baseline funding in recent years. For the uplift offer to amount to so little (£179m for GP and practice staff pay) in the context of such significant inflation, it is unconscionable that practices can absorb this without losing staff or becoming unviable.

The cost of GP and practice staff pay erosion since 2008/9 is even greater, so that needs to be addressed this year.

### Our practice has already received its e-contract variation notice. Should we sign it?

Contract variation notices are just that. The imposed changes will come into effect after the specific notice period ends with or without a signature.

### Thinking about safety, stability and hope for the coming year and beyond:

- How will the contract ensure the funding available to you enables recruitment / retention of sufficient staffing?
- How does the contract support you to maintain and or develop your practice premises?
- How will the contract ensure safe working practices around hours?
- How will the contract ensure safe working conditions?
- How will the contract safeguard GP contractor / partner members in providing safe patient care?
- How will the contract address issues around home visits and ensuring effective working patterns for GP contractors / partners?
- How will the contract ensure improved working practices around appointment times?
- Does it guarantee sufficient funding to ensure all GP contractors / partners can receive the annual Doctors' and Dentists' Review Body pay award?
- Does it guarantee protection of necessary CPD (continuing professional development) time that all GPs need?
- Is sufficient funding available to ensure GPs have the tools to deliver healthcare in the 21<sup>st</sup> century?

#### Salaried GPs

#### Thinking about safety, stability and hope for the coming year and beyond:

- How will the contract ensure safe working practices around hours?
- How will the contract ensure safe working conditions?
- How will the contract safeguard salaried GP members in providing safe patient care?

- How will the contract address issues around home visits and ensuring effective working patterns for Salaried GPs?
- How will the contract ensure improved working practices around appointment times?
- Will the contract deliver sufficient funding to ensure salaried GPs are paid fairly and have terms no less favourable, as required by the contract regulations, than the <u>BMA salaried GP</u> <u>model contract</u>?
- Does it guarantee sufficient funding to ensure all salaried GPs can receive the annual Doctors' and Dentists' Review Body pay award?
- Does it guarantee protection of necessary CPD (continuing professional development) time that all GPs need?
- Is sufficient funding available to ensure GPs have the tools to deliver healthcare in the 21<sup>st</sup> century?

## Locum GPs

## Thinking about safety, stability and hope for the coming year and beyond:

- Will the contract ensure funding for future job opportunities?
- How will the contract ensure safe working practices around hours?
- How will the contract ensure safe working conditions?
- How will the contract safeguard locum GP members in providing safe patient care?
- How will the contract address issues around home visits and ensuring effective working patterns for locum GPs?
- Will the contract ensure funding to ensure GP's entering the workforce are paid fairly within the sessional model / locum model?
- Does it guarantee protection of necessary CPD (continuing professional development) time that all GPs need?
- Is sufficient funding available to ensure GPs have the tools to deliver healthcare in the 21<sup>st</sup> century?

## **GP Registrars**

## For those of us who have just become qualified GPs and are BMA members, will the BMA be aware that we are no longer doctors in training and are now GPs?

Please make sure you have <u>updated your membership details</u>. Civica will be notified of updated membership details at regular intervals, so you will receive your voting email once they have the right details. If you still haven't received your voting email after the next mail out on Monday (11<sup>th</sup> March), complete this <u>form</u>.

## Thinking about safety, stability and hope for the coming year and beyond:

- How will the contract ensure safe working practices around hours?
- How will the contract ensure safe working conditions?
- How will the contract safeguard GP registrar members in providing safe patient care?
- How will the contract address issues around home visits and ensuring effective working patterns for GP registrars?
- How will the contract ensure improved working practices around appointment times?
- How will the contract protect/support registrar GPs in ensuring smooth transition to becoming a fully qualified GP?
- Will the contract ensure funding for future job opportunities?

- Will the contract ensure funding to ensure GP's entering the workforce are paid fairly within the sessional model / locum model?
- Will the contract facilitate the availability of GP registrar training places?
- What benefits can ST1-3s expect as a result of the contract changes?
- Is sufficient funding available to ensure GPs have the tools to deliver healthcare in the 21<sup>st</sup> century?
- How will educational opportunities be affected / protected by this new contract?