

Dr Katie Bramall-Stainer (GPC Chair) Speech at LMC Conference of England LMCs  
November 22nd 2024

Key Points:

- Average cost of National Insurance change to Practices is £36k
- £200m national pressure on Practices
- KBS met Wes Streeting and Stephen Kinnock and told them she is hearing from GPs that don't normally contact her. Practices that haven't engaged before are now.
- Many Practices are having to let go staff and cut services
- As a result Practices that didn't engage in Collective Action, will do now to remain viable
- A % of practices now saying will have to hand their GMS contract back
- GP is the only primary care partner that cant increase prices
- We are seeing clinical staff being made redundant, reduction in use of locums, reduced partner drawings, reduced services
- Yesterday a letter from Wes Streeting to KBS- a public letter and addressed to profession -this acknowledged that General Practice is the bedrock of nhs family -we now need to see the action for support that

3 key facts:

- i) Single thing that unites all external stakeholders isn't striving for value money, access or productivity – it is control! Government / NHSE would rather pay more and get less for it but be in control. They will pay more for worse outcomes – General Practice is the last bastion of autonomy in the NHS
  - ii) Treasury controls everything - £26.2bn over next 2 years for nhs – how it is allocated should be up to the health secretary. Will have to unallocate their allocations – they have now done this. KBS hopes solutions to recent problems will be found. However, there is no point sorting National Insurance Contribution issue and the living wage pressure of there is no contract uplift. Any solution now cant be the uplift for 25/26 – must not be wrapped up in contract decision
  - iii) GPC want a new contract – Rachel Reeves no incentive to approve a new contract – never have GPs done so much for so little- the status quo is ideal for Treasury. Only leverage GPs have is to do less.
- o General Practice is now 5.2% of total spend – was 11%. All we can do is reduce services, activity and staff.

Note:

- You wont get something for nothing!
- It's a new government but the same civil service.
- If you are hoping can avoid collective action there is a need to think again.
- LMCs have to decide about relationships with ICBs - this will be challenging.
- Don't get distracted by NIC– the national contract is the bigger issue.
- Wont get something for nothing.
- We started Collective Action in August – some GPs said a pause was needed for a new government, however we have lost 1 in 5 Practices and unemployed GPs
- We need to protect practices and staff to protect patients. If you work for free then there will be no change
- We wont get anywhere if we just keep going as we have
- We need to see April tax pressures to resourced in full
- Funds must be shifted to core
- Look at out of hospital not in hospital - money is attached to solutions

! ! ! \*If not now when?\* ! ! !

Sent from my iPhone