

## **Statement on the Contract Imposition 2024/25**

The Institute of General Practice Management has collated the views of members since the announcement of the latest GP contract last week. We have been inundated with comments from members about the risk that this contract poses to the stability of General Practice and we urge the government and NHSE to reconsider.

Funding for GP services in the last four years has dropped to around 7.5%. However we regularly see funding increased to other parts of the healthcare sector around us. General Practice is the front door of the NHS, seeing 90% of patient contacts, 20% more than pre-pandemic and the only part of the health system with an increase in activity. It is also the most cost effective part of that system – practices cannot run at a deficit. The vast majority of practices in England are rated as Good or higher by the CQC.

There is funding for a 2% uplift. The increase to the National Living Wage in April is 9.8%. It is astonishing that the government recognises the need for lower paid workers to have an increase, but that they refuse to fund this mandated change in public services. One member has confirmed that to uplift all staff to the NLW and to pass on 2% to all other salaried staff would cost an additional £6,000 per month. The 2% uplift constitutes a £1,998 per month uplift. The practice is now facing having to find an additional c.£4,000 per month to cover staff costs. The practice has had to make the decision to freeze recruitment, despite being currently understaffed, and may have to consider redundancies in the future.

The cost of gas and electricity has tripled in some areas and the cost of supplies, consumables and expenses has all increased with inflation. Practices are solely responsible for these costs. The remuneration for locally enhanced services, and nationally directed enhanced services, has also not risen with inflation. Practices are therefore having to manage these rising costs with stagnant budgets. Many practices are now closing as a result, displacing tens of thousands of patients who then have to register at other already over-stretched surgeries. The practice referenced above has over 13,000 patients who will be without their surgery, 70 staff who will be out of work.

The government seem to have an agenda for General Practice that they seem unwilling to share or understand. If their intention is its ultimate demise then they are well on the way to achieving this. The contract's offer of increasing aspiration payments and protecting QOF income is simply kicking the can down the road – practices struggling to offer a good level of service will find it harder to prioritise any work other than dealing with urgent care. This impacts on disease prevention, health promotion and continuity of care – all elements that NHSE have previously lauded as key areas in supporting the health of our population.

We strongly encourage the government and NHSE to reconsider their offer, to work with the General Practice Committee (GPCE) to find a sensible solution to the problems we are facing, and to show support for General Practice, as was outlined in the Health & Social Care Select Committee Report on

the Future of General Practice (October 2022) – a report co-authored by our current Chancellor, Jeremy Hunt.

The future of General Practice currently looks very bleak.

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