

Chair's engagements

Dear colleagues

As with my previous updates on executive engagements, to ensure that I am able to be as open with you as possible regarding those meetings, I ask that you please consider this update to be confidential to the LMC.

Given that you will now be receiving these updates on a more regular basis I am sure that you will be relieved that this update is much shorter as it only covers one week.

Since I last wrote to you, on Tuesday 15th of November, I attended a **BMA funding Project workshop** which was designed to look at how general practice and secondary care can work most efficiently and productively within overstretched budgets. The meeting was not intended to address the wider political issues regarding NHS funding, but to look at whether there are ways to optimise the way we currently work, to reduce bureaucracy and workload pressures. This was a workshop style meeting, in which chairs of other branches of practices were also present. I was part of a panel discussion, in which I presented ways in which general practice is trying to cope with pressures using new ways of working such as the use of skill mix (and gave an account of the use of a practice pharmacist in my practice), practices working in collaborative structures, and managing demand by reducing inappropriate workload transfer.

On Wednesday 16th of November, I attended **BMA council**, which is an important opportunity to both understand the realities and perspectives of colleagues working across other branches of practice, but also to articulate the issues affecting general practice to the wider BMA. That afternoon, Gavin Ralston (GPC executive), Brian Balmer (Past GPC executive) and I attended a meeting with NHS England to specifically discuss our urgent prescription proposals for safe working and locality hubs. As you are aware, we recently published a paper on this subject. We have at the outset been clear that locality hubs are not a panacea for all localities and circumstances, but we do believe they have the potential to place limits on practice workload, by absorbing overflow work. The meeting was constructive, in which we discussed some of the feedback we have received regarding hubs, such as ensuring equitable use of hubs between practices, and the need for hubs to complement and support practices rather than undermine them. We discussed the need for the GP forward view transformation funds to pump prime the development of locality hubs, which we feel is consistent with NHS England's own proposals for collaborative working.

On Thursday 17th of November, we had the first meeting of **GPC England**. You will be aware it was a GPC review recommendation to resurrect GPC England, which will meet as a national committee four times a year, and which is complemented by two UK GPC meetings a year. The three devolved nation GPC chairs were also in attendance, to ensure that a UK perspective continues to be heard within our discussion and debate. Details of the GPC meeting have been provided in the main body of this edition of GPC News.

I had to excuse myself from the GPC England meeting that afternoon, with Richard Vautrey deputising as chair, in order for me to attend an important **BMA symposium**. This closed meeting was arranged following the ending of junior doctors industrial action, and to which Jeremy Hunt had been invited, with the purpose of discussing the future of patient care in England and how the NHS can continue to provide high-quality care across the week, with the aim of having an honest and evidence-based discussion to inform policy with leading voices from the medical and clinical professions.

The meeting was closed to invitees, and skilfully led by an external moderator. Although I am not able to divulge details (the BMA will be writing a report on outcomes from the Symposium shortly), I can say that there was at least an honest debate regarding the realities of current NHS funding, and what a service across seven days can/should provide within this reality. The fact there were a range of stakeholders helped that the argument was not only a BMA one.

The role of primary care and general practice was discussed, and I feel satisfied that I expressed the reality facing GPs and the case for general practice loud and clear, and made it worthwhile and important that I attended.

On Saturday 19th November, Simon Poole and Farah Jameel attended **RCGP Council** as GPC observers, at which Helen Stokes-Lampard officially assumed her position as Chair, succeeding Maureen Baker. It is both welcome and important that we should have formal dialogue with RCGP, and be kept abreast of our respective work on behalf of the profession, as well as being able to contribute our own perspectives to each other. We also have RCGP observers who attend GPC meetings. There are in addition GPC/RCGP liaison meetings held regularly, and I also have regular meetings with the RCGP chair.

I hope you have found this update of engagements useful. If you have any comments or questions, please contact Nikki McIntosh on nmcintosh@bma.org.uk.

With best wishes

A handwritten signature in cursive script that reads "Chaand".

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