

GP contract update 2020-21

Richard Vautrey
Chair, GPC England



ARRS funding update

Allocation	19/20	20/21	21/22	22/23	23/24
Original ARRS allocation (£m)	110	257	415	634	891
New General Practice Workforce Package (£m)	0	173	331	393	521
Total	110	430	746	1,027	1,412

Impact for the average PCN

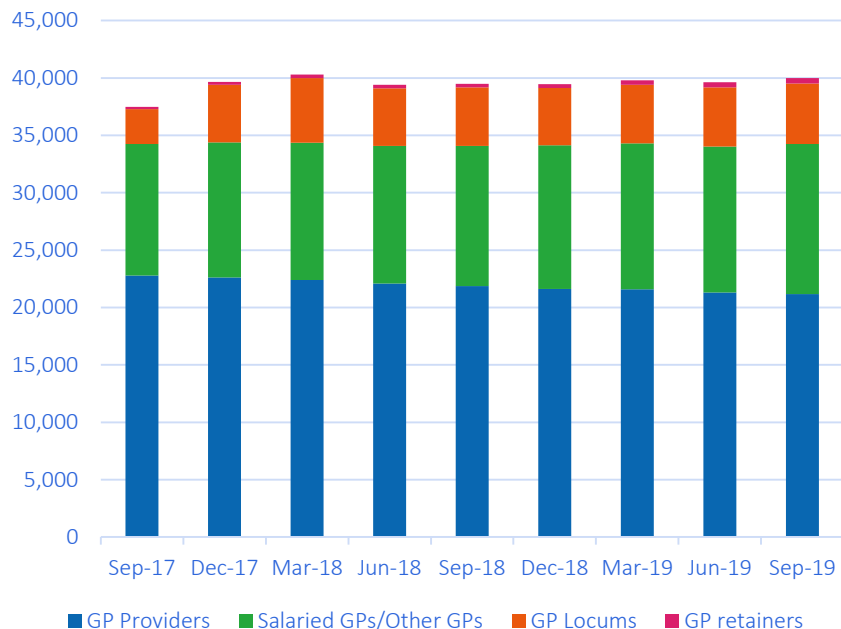
	19-20	20-21
Total funding per av. PCN	£236,977	£441,260

Role	Illustrative FTE
Clinical pharmacists	6
Pharmacy technicians	2
First contact physiotherapists	3.5
Physician associates	2.5
Social prescribing link workers/health and wellbeing coaches/care co-ordinators	5
Paramedics and other AHPs	2
Total (by 2023/24) at no cost to practices/PCN	21

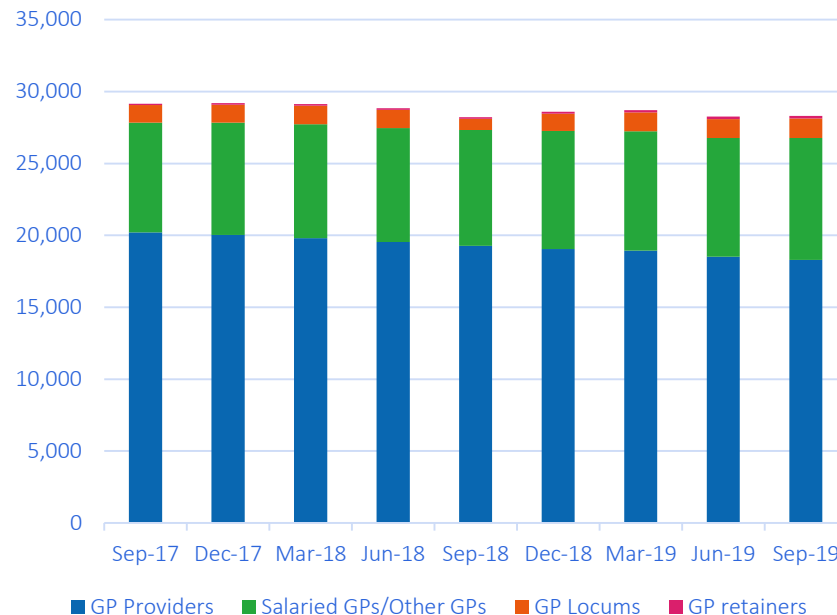
PCNs will also benefit from the input of community MDT for assistance in delivery of the PCN services (ie increasing the time the PCN staff can provide to core general practice work)

GP workforce (exc. trainees) – Sept 17 to Sept 19

GPs (Headcount)



GPs (FTE)



- **Additional investment**
 - Additional investment of £94m, £117m, £114m and £103m in respective years for GP recruitment & retention
- **Supporting the partnership model**
 - £20,000 + on costs partnership loan – to be retained after 5-6 years; available to all new partners
 - £3,000 for the new partner for training
- **Supporting return to work**
 - Childcare costs (up to £2,000 per year) to support GPs returning to practice with children under 11 as part of I&R scheme. £1,000 for the portfolio route due to shorter length of placements
- **Supporting locum GPs**
 - Locum support scheme, with 1 session a month CPD for a minimum contribution of sessions
- **Supporting practice staff**
 - Core staff offer to recommend to practice for their staff

- **Enhanced Shared Parental Leave**
 - Committed to agreeing arrangements for Enhanced Shared Parental Leave for salaried GPs as soon as possible in 2020/21
- **Gender Pay Gap**
 - Committed to investigate the gender pay gap in general practice with a view to agreeing in the next round of negotiations a set of initiatives to reduce it; this will require further improvements in data collection of WTE earnings
- **Pensions**
 - NHS England will be writing to all practices to inform them that NHS England will act on their behalf to cover the annual allowance tax charge for all GPs opted into scheme pays. When that individual retires and claims their pension, the NHS will pay off the tax charge for 2019/20 (including interest accrued)
 - Increased employer contribution for NHS pensions will be met centrally as per last year, and that this will be the case for at least the duration of the GP contract deal (i.e. to March 2024)

Reducing bureaucracy and workload

- An amendment to regulations to allow other clinicians to be able to complete fit notes
- DHSC will initiate a full cross-government review of bureaucracy in general practice (e.g. blue badges, sick notes for missing school exams, legal aid applications etc)
- NHSE and GPCE will work together to agree other initiatives to reduce bureaucracy (e.g. workload transfer from hospitals, national training standards, appraisal and revalidation)
- CCGs required to provide annual primary care funding report to LMCs

Funding changes for 2020/21

	2019/20	2020/21	Increase	
Global Sum price per weighted patient	£89.88	£93.46	£3.58	4.0%
Value of QOF point	£187.74	£194.83	£7.09	3.8%
Out of Hours adjustment (%)	4.82%	4.77%		
Out of Hours adjustment (£ amount)	£4.33	£4.46		

Impact for average practice

	19-20	20-21
Practice contract baseline	£8.116bn	£8.323bn
Total funding per average practice	£1,189,693	£1,220,066
Year on year growth per av. practice	£15,900	£30,373
Cumulative growth av. practice	£15,900	£46,363

The above is made up of:

- Increase to global sum
- Network participation payment (£1.76pp)
- S7a V+I increases
- QOF increase

In addition to this, practices will be able to make use of:

- £120 per bed, care home payment
- IIF outcome funding
- Potential access incentive payment