



## General practice contract changes 2014-2015

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### Frequently asked questions

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#### Are my seniority payments stopping from April 2014?

No. Seniority payments are being removed over a six year period, not ending immediately. GPs in receipt of the payments on 31 March 2014 will continue to receive them over the six year period and as part of the agreement, progress as set out under the current rules. There will be no new entrants to the scheme from 1 April 2014, however.

As part of the agreement, there is also a requirement for the total payments from the seniority funding pool to fall by 15% each year during the six year period. If the rate of those retiring annually means that this 15% is not reached, we will need to reach an agreement with NHS England on action to achieve this. There will be no data available on whether the 15% has been reached until two years after the start of the six year period, so no such action will be needed until that point.

All money subsequently released each year from the seniority pot will be added to core general practice funding and redistributed to all practices, as will the remaining money when the scheme ends completely on 31 March 2020. We reached this agreement faced with a government that is committed to ending age-related pay progression across the public sector. Our agreement means that none of this resource will be lost to the profession and that GPs will be able to benefit from the funding throughout their career rather than after a set number of years.

#### Publication of GP earnings forms part of the agreed changes to the GP contract. Does this mean that I will have to publish all of my earnings immediately?

Changes to the contract on publication of earnings are proposed to commence on April 2015 and practices do not have to publish any GP earnings until that point.

The agreement we have reached means that only GP NHS net earnings relating to the contract will be published. The calculation and publication of GP earnings will also be on a like for like basis with other healthcare professionals. Published earnings will therefore not include many income streams (including private income) that are included in current, often quoted, headline figures.

A working group is being set up to determine exactly how the earnings figures will be calculated and published, and there are no further details of how the earnings will be calculated at this stage.

## **Does the agreement on a named GP for patients over 75 mean 24 hour responsibility for these patients?**

No. The agreement relates to services provided under the GP contract and will not change GP core hours or alter their responsibility for patients outside of these hours. It also does not imply personal availability for GPs throughout the working week.

Additional wording for the GP contract will be agreed with the GPC. We will be issuing more detailed guidance once that wording has been finalised.

## **Does the extension of the choice of GP practice scheme mean the end of practice boundaries?**

No. The extension is a roll out of already-existing pilots. It simply means that practices will, if they wish to participate in the scheme, be able register patients from outside of their practice area. As with the pilots, participating practices will be able to refuse registration for patients unsuitable for remote registration.

The scheme remains voluntary for practices, and patient registration rules for those practices not participating in the scheme remain the same. Practice and patient participation in the pilots for the scheme was very low.

There is no requirement on practices participating in the scheme to make home visits to patients registering from outside of their practice area. NHS England will be responsible for arranging such visits. Similarly, there will be no requirement for practices not participating in the scheme to take on patients previously registered with them, who have now registered with an out-of-area practice, as temporary residents.

The extension to the scheme is occurring despite our concerns, because the government is committed to rolling the scheme out nationally.

## **What does the agreement on monitoring out-of-hours quality mean for practices?**

The agreement means that practices will report concerns about the quality of out-of-hours services for their patients to NHS England, having regard to feedback from patients.

There will also be requirements on co-operating with requests for information and reviewing details of out-of-hours consultations received from out-of-hours providers, typically within the same working day.

Most practices already meet these requirements and in line with the recommendations from the Francis Report, we believe it is good practice to highlight concerns about poor quality services provided to patients.

## **Will the money transferred to core general practice funding lead to a reduction in my correction factor payments? Will it be subject to the 6% out-of-hours deduction?**

No. As part of the agreement we were able to ensure that all practices, including those with correction factor, will receive the transferred funding. The transfer of money to core funding will not lead to any change in the level of correction factor payments, with the correction factor "floating on top" of the other funding received by practices.

We were also able to secure an agreement that the funding transferred to practices will not be subject to the 6% deduction that is usually applied to core funding for those practices who have opted out of providing out-of-hours services.

## **How will the value of the 238 QOF points transferred to core funding be calculated?**

The majority of QOF indicators being retired were introduced before 2013-2014. For those indicators, the transferred funding will be based on a national average of QOF achievement for 2012-2013. The funding will be transferred as a total to core funding, not to individual practices based on their own QOF achievement.

For indicators introduced in 2013-2014, the transferred funding will be based on 100% QOF achievement, again as a total to all practices.

## **What do the agreed changes to the contract mean for PMS practices?**

The government has assured us that the details of the agreement will be equally and consistently applied to PMS practices, as has occurred with previous agreements on changes to the contract.

We are lobbying NHS England to provide details of how this will happen as quickly as possible.