## Written Ministerial Statement

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## Health, Social Services and Public Safety

## **General Medical Services Contract 2013-14**

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**Mr Poots (The Minister of Health, Social Services and Public Safety):** I wish to make a Statement to the Assembly on the outcome of the consultation on proposed revisions to the General Medical Services Contract for 2013/14.

The General Medical Services (GMS) Contract is a UK-wide contract and has been in operation since April 2004. It was introduced to provide a more flexible delivery of services, improved quality, and more modern infrastructure. It aims to promote better quality and more responsive GP services and at the same time provide an adequate level of remuneration for the profession with incentives for enhanced care. Since its introduction the Contract has delivered significant increases in investment in primary care general medical services, and patients have benefited directly from this investment.

Each year there is a negotiation of revisions to the General Medical Services (GMS) Contract involving the four Health Departments in the UK, the NHS Employers and the General Practitioners Committee (GPC) of the British Medical Association (BMA). Unfortunately, an agreeable settlement was not reached through the national negotiating process last year in regard to changes to the General Medical Services Contract for 2013/14. Since October 2012 each of the four Health Departments in the UK has engaged directly with their respective GPCs on changes to the Contract.

The proposals for changes in Northern Ireland were the subject of a consultation exercise with General Practice which commenced on 29 January 2013 and concluded on 22 March. The proposals included increased levels of investment in General Practice; the delivery of equitable funding across GP Practices; and amendments to the Quality and Outcomes Framework (QOF) of the Contract, including the introduction of new National Institute for Health and Care Excellence (NICE) recommendations, and the removal of a number of indicators which were considered to reflect basic standards of good organisational practice.

Following the consultation I am informing the House that agreement was reached with the Northern Ireland General Practitioners Committee (NIGPC) on changes for 2013/14. The agreement includes increased investment in General Practice with a 1.5% uplift overall for GP pay and practice expenses, and taking account of the Executive's policy on pay increases. Additional investment will also be made available through the increase in the value of a QOF point such that GP practices have the opportunity to receive through performance achieved against the QOF indicators an additional £3.5m in 2013/14. This investment is being provided on the basis that a detailed analysis will be undertaken with NIGPC of the current and anticipated workloads in General Practice and how practices are organised and prepared to meet effectively and efficiently the challenges, and deliver best value for money from the resources available. The Department and the Health and Social Care Board will be engaging shortly with NIGPC to take forward this review.

The majority of new or replacement clinical indicators as recommended by the NICE will be introduced for 2013/14 and the lower and upper thresholds for 13 existing QOF indicators will be increased for 2013/14 to promote improved quality of care for patients. The increases to the upper thresholds for QOF indicators will be capped next year at 90%. Indicators which related to the organisational arrangements in practices will be discontinued as these indicators basically reflect standards of good organisational practice which should already be in place.

There is a need to ensure that the finite resources available are distributed equitably across practices in line with patient needs. During the consultation exercise some concerns were raised about the potential sustainability of some practices if there was a redistribution of resources through the methodology as set out in the proposals. Following the consultation it has been agreed that work will be undertaken this year with NIGPC on a detailed assessment of the issues and potential implications for individual practices.

We need to have safe, sustainable and resilient health and social care services to meet the needs of the population and to continue to improve the quality of patient care. This is at the core of Transforming Your Care. The agreed changes to the Contract and further work as outlined in this Statement should help support improvements in patient care and services and address the main concerns that were raised by GPs during the consultation. The involvement of General Practice is essential to the successful implementation of Transforming Your Care, the shift in service provision, and the goal of ensuring that all patients and service users receive the right care, at the right time, in the right place and provided by the right person. It is essential that every part of our Health and Social Care services plays a full and active role in achieving the best possible outcomes for patients. GPs have an invaluable contribution to make to this essential reform. I am pleased to acknowledge the support that the Northern Ireland GPC has given to Transforming Your Care and I expect that GPs will play a full and active role in helping now to deliver its effective implementation.