Dear Dr Jones

General Medical Services Contract: 2018/2019

I am writing to confirm the agreed changes and commitments to the General Medical Services (GMS) Contract for 2018/2019.

The agreed financial changes to the GMS contract are set out below:

i. An uplift to the General Medical Services (GMS) contract for 2018/2019 of £11.67m. This uplift is to cover:
   a) An uplift of 1% for pay and a 1.4% increase for general expenses (excluding indemnity which is being treated separately). The increase will be applied to global sum and the enhanced service for vaccinations and immunisations. This is to be paid directly to practices through the core contract.
   b) An uplift of £2.7m towards the rising costs of professional indemnity for GPs and practice teams. This is an interim solution whilst there is ongoing consideration to progress the indemnity situation during the next year. This is to be paid directly to practices through the core contract.

ii. As agreed during negotiations between GPC Wales, Welsh Government and NHS Wales, the following changes or activities were agreed for General Medical Services for 2018/2019:
   a) Improved baseline for Welsh Language provision:
      • To the testing of Welsh language provisions at a cluster level to improve understanding of Welsh services.
• To the standards in the Welsh Language Regulations being placed on GPs (which also apply to the other Primary Care contractors) to improve the quality of Welsh language provision across Wales.

b) Retainer and Returner scheme evaluation:
• The Deanery will be commissioned with specific work to evaluate the retainer and returner schemes. The outcome of the evaluation will determine what action should be undertaken.

c) Improved mentoring and coaching arrangements:
• Access to the Academi Wales coaching collaborative, as well as the bursary (at 50% of course fees) for the ILM Level 7 Qualification in coaching and mentoring through Academi Wales, has been agreed and will be encouraged within the GP profession.

d) Recruitment Offering:
• A commitment to explore access to Health Board employment benefits to improve the recruitment offering available to GPs, such as childcare vouchers and relocation expenses.
• Work will be taken forward in 2018/2019 to assess the merit, scope and financial implications of any other enhancements.

e) Workload and system change:
• System change: A set of standards for clinical behaviours and communication across the primary secondary care interface, informed by the report by the Academy of Medical Royal Colleges Wales and Communications Standards established by Cwm Taf University Health Board, have been discussed with Health Board Medical Directors. These will now be finalised in agreement with GPC Wales and published by CMO as a set of national standards along with recommendations for implementation and monitoring.
• Interface issues: CMO will issue a letter re-iterating the policy position on ‘fitness to work’ notes and ensure unnecessary referrals are not being made for ‘fitness to work’ notes.

f) Improve access across Primary Care:
• GPC Wales are already positively engaged in the Transforming Primary Care Group, of which access is a key aspect. We have separately agreed that GP practices should continue to optimise the availability of consultations during core house, standardise messaging to patients out of hours and for each practice to review access and agree its position on the telephone first and clinical triage component of the model. Welsh Government and GPC Wales will continue to work together with Health Boards to take this forward.
• Continue to contribute to a national action to develop a shared understanding of ‘what good access looks like’.
g) Indemnity barrier for recently retired GPs:
   - A commitment to explore barriers currently faced by those who have recently left the GP workforce, including indemnity barriers.

h) Reduced Quality and Outcomes Framework (QOF):
   - To reduce the operation of QOF to disease registers and two flu indicators, alongside the cluster network domain to be simplified to 5 engagement meetings during the year. This will alleviate workload pressures and allow clusters to mature in line with their own development needs.

i) Influenza outbreak prescribing Direct Enhanced Service (DES):
   - To extend the enhanced service for influenza outbreak prescribing for 2018-2019.

j) IT Migration:
   - Migrations for practices will commence in January 2019. A Stakeholder Reference Group has been established by NHS Wales Informatics Service (NWIS) to determine what support is required during and after migration. Commitment is made to consider any implications for the support once that has been determined.

k) General Data Protection Regulations (GDPR):
   - With GDPR implementation in May 2018, a discussion will be held to consider the opportunities and threats that GDPR presents in light of access to data and the new roles/responsibilities.

I would like to take this opportunity to thank you and your colleagues at GPC Wales for their ongoing engagement. As you know, we have commenced an ambitious programme of reform for the GMS contract to address a range of issues, whilst delivering against a number of policy aims. Whilst there’s a substantial body of work ahead, I am confident that we can work together to achieve the much needed reform.

Yours sincerely,

Frances Duffy
Cyfarwyddwr, Gofal Sylfaenol Ac Arloesi
Director, Primary Care and Innovation