



Llywodraeth Cymru
Welsh Government

Dr Gareth Oelmann
Chair, GPC Wales

By email only

15 November 2024

Dear Gareth,

In response to your letter of 11 November, I have included further information regarding the Welsh Government offer of investment into GMS for 2024-25.

The Cabinet Secretary has emphasised that he wants to see the areas set out below progressed through the GMS Reform Working Group by 1 April 2025, to support the any future investment into GMS and this year's investment offer as confirmed in our letter of 30 October:

Access Standards

To review and amend the practice requirements and measures under the Phase 2 GMS Access Standards for 2025-26, and to make a recommendation on future contractual change that embeds the Access Commitment and Phase 2 standards into the core contract from 2026 onwards.

Anti-viral medicines

Change to the treatment pathway that will enable eligible patients to contact their GP practice (or the GP Out of Hours Service) when/if they test positive for Covid, to be clinically assessed, and for Paxlovid to be prescribed and dispensed from within primary care, if deemed appropriate.

Repeat prescriptions

Adoption of longer prescribing intervals, where clinically appropriate for the patient, in all non-dispensing GP practices. Typically, this would be consideration of a 56-day

prescribing interval, however longer intervals for individual patients may be clinically appropriate.

Continuity of care

Practices adopt the RCGP Continuity of Care Toolkit and calculate continuity of care at practice level using agreed measures, uploading this data monthly via PCIP. This data would be shared with health boards as part of the activity data metrics.

Frailty and ethnicity

A contractual requirement for GPs to include agreed equalities data questions (using consistent ethnic group categories) within their new patient questionnaires, and to record this information on the patient record.

Practices to also proactively identify people who are living with severe or moderate frailty using an evidenced based tool.

Learning disabilities

To agree a definition of learning disabilities (LD) that qualifies a person to be on the GP LD register and to describe in the GMS contract regulations the primary medical services that all people with LD should expect to receive under the unified contract.

This includes, as part of unified services an offer of an annual patient care review that should be conducted by the contractor.

Additional Capacity Fund

A rapid review of the Additional Capacity Fund to determine funding from 2026 onwards. This review should consider whether the £12 investment to date has had a positive impact on access to appointments and has been utilised to support the delivery of services.

This year's investment offer into GMS conditional on these areas of work being progressed with information and guidance issued to practices on any subsequent contractual changes:

- A 6% pay uplift to GP pay, extended to all practice staff.
- £1.8 million for other practice expenses.
- An extension of the Additional Capacity Fund for 2025-26, meaning an additional £4 million investment next year.

I hope the information in this letter provides your constituents with the information necessary to make an informed decision when engaging with the planned referendum.

Yours sincerely



