THANKS

Conference would like to thank Dr Alan Stout and Dr Frances O’Hagan for their outstanding leadership over the last year and their professionalism shown in their multiple media appearances.

This conference commends and wishes to officially thank the staff at BMA Northern Ireland for their support to NIGPC, office bearers and members as well as other branches of practice committees over the covid pandemic.

PUBLIC AND MEDIA PERCEPTION

This conference

i congratulates all the staff of General Practice in Northern Ireland (and throughout the UK) for their phenomenal efforts in response to the pandemic, in providing the great majority of patients contacts during the crisis

ii strongly condemns and refutes the allegation that practices have been “closed”

and

iii calls upon the Department of Health, HSCB and public representatives to join NIGPC in proactively ensuring that the public know that their practices are, and have been, open.

This conference notes with dismay the repeated defamation of the primary care workforce in sections of the popular press (particularly in GB) and on social media, and media and

i instructs NIGPC/BMA to continue to engage with other bodies to ensure that the reputation of primary care is restored

ii thanks the HSCB and Department of Health in Northern Ireland for their public support during the pandemic (in contrast to NHS England and the UK government) and

iii calls upon all public representatives to consider the impact on health and care staff when commenting on the many problems in the health service, while acknowledging that many local politicians have been engaging positively with general practice.

This conference notes with concern the increase in defamation of GPs and their staff on social media, particularly in the comments section of Trust messaging, and

i calls on Trusts to work collaboratively with LMCs to mitigate this effect and to ensure a consistent message that both primary and secondary care are working hard

and

ii calls on the HSCB to provide clear guidance to practices in managing situations where patients defame and/or threaten practices and staff online.
COVID/POST COVID

This conference deplores the recent delays in payments to GP practices in Northern Ireland and instructs NIGPC to undertake a review of GP funding and payment processes with the Department of Health and HSCB.

This conference condemns the delay in the payment of the COVID bonus to all primary care staff that has resulted in a demoralising effect on staff working at the front line throughout the pandemic.

This conference recognises the enormous work of NIGPC, Federations and platforms such as GPNI in connecting, updating and informing the primary care community during the COVID-19 pandemic – we urge NIGPC to lobby HSCB and FSU to continue to fund and support these platforms to ensure they are able to continue to support general practice and practitioners.

This conference insists that practices retain autonomy in deciding how best to deliver services for their patients in the aftermath of the pandemic.

This conference notes that the failure to encourage self-care along with the mandated IPC guidance in Covid times meaning all practices providing greater telephone and net access has opened a Pandora’s box of demand. This has compromised the ability for practices to manage chronic disease and complex patients and will compromise any effort to return to previous contract business as usual.

GMS CONTRACT

Regarding the GMS Contract from April 2022, this Conference instructs NIGPC to negotiate

i the protection and enhancement of core funding for practices

ii resourcing of the additional staff and infrastructure required, such as premises and telephony

iii a reduction of bureaucracy and “box-ticking” required for the management of Chronic Disease Management, to include either significant simplification or abolition of QOF

iv consideration of incentives for recruitment and retention of GPs, particularly in remote rural areas.

FLU VACCINATION

This conference calls on the Department of Health and PHA to start planning for the Flu vaccination programme earlier in the year and issue timely guidance to practices in order that they can adequately prepare to ensure continued excellence in delivering this enhanced service.

NO MORE SILOS

This Conference actively supports the ethos behind No More Silos and believes that

i its implementation must be consistent and not confined to the “silo” of urgent care

ii DoH must ensure that Trusts reprofile services from existing budgets, rather than delaying reform by awaiting “new money”

iii GP involvement must be conditional on clear and written agreements on governance and budgets
iv GP involvement must be fully resourced including employers’ superannuation contributions

and

v experience to date suggests that engagement between clinicians is key, and therefore we welcome secondary care colleagues to visit our practices at every opportunity – as a reference

ICS

This conference calls for proper representation from general practice when and if the “new” ICSs are set up.

The conference believes that Integrated care systems run the risk of being more of the same unless they are give appropriate scope to be able to influence change through adequate commissioning powers including budgets and accountability.

OOH

This Conference notes with concern that OOH services in Northern Ireland continue to fail to provide a safe and effective service and calls on NIGPC to continue active engagement with the Department of Health and others to develop satisfactory solutions.

MHO

This conference believes that the current role of the GP in assessing individuals for detention under the mental health act is no longer sustainable and directs NIGPC to work with DoH to move this duty to dedicated community based teams.

SECONDARY CARE/WAITING LISTS

This conference directs NIGPC to call on DOH to hold Trusts to account for the increasing workload which is being transferred to practice without agreement, particularly bowel prep, peri-procedural meds such as Synacthen, BZDs, Med3 for inpatients and onward referrals.

RECRUITMENT/RETENTION

This conference directs NIGPC to work with NIMDTA, HSCB and DoH to scope an up to date GP workforce assessment particularly with regard to the attrition rate resulting in lost numbers of GPs within NI.

INDEMNITY

Delays to patient care across Northern Ireland, delayed secondary care services and absence of a solution to NI state back indemnity scheme create a toxic working environment for GPs across Northern Ireland.

Conference directs NIGPC to work with DoH to provide an urgent and timetable of resolution around GP indemnity.
TRAINED

This conference calls for NIGPC to advocate for ongoing funding and support to provide high quality online learning resources developed locally and relevant to local health populations and infrastructure as started in the pandemic with the GPNI Webinar website.

This conference demands funded education for practices in quality improvement methodology and funded time for quality improvement activity in order to allow more meaningful projects to be undertaken at a practice level.

This conference calls for an immediate replacement for the sub-deanery project.

SICK DOCTORS

This conference directs NIGPC to work with PHA and DoH to secure adequate and recurrent resources for the establishment of a discrete self-referral service in NI for all Drs to access early healthcare for mental health and addiction issues.

GP NURSING

Conference Demands that NIGPC negotiate a GP nursing training fund to employ, train and develop the future practice nurse workforce, in line with the primary care nursing career pathway, as the current investment in GP nurse training is woefully inadequate.
MOTIONS CARRIED AS A REFERENCE (means that motion so accepted does not constitute conference policy but is referred to NIGPC to consider how best to procure its sentiments).

PRESCRIBING

This conference recognises that the hospital responsibility around patient monitoring for medications subject to shared care guidance such as ADHD medication or methotrexate is far from optimal. In light of this it demands the following:

1- That HSCB scope the scale of this problem.
2- That NIPGC seeks support for practices who are unable to safely prescribe in accordance with shared care guidelines.

PENSIONS

This conference notes that many of us will see on our annual pension statement that with 10 or more years left in practice that we have almost reached or indeed already breached the lifetime allowance. Conference insists on a comprehensive solution to the lifetime allowance situation.

NO MORE SILOS – part v

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