



14 September 2020

Dear Colleagues

## **Provision of Face-to-Face Appointments within General Practice**

In the light of recent publicity about the provision of face to face (F2F) appointments within General Practice, I am writing to advise all colleagues of the professional and contractual position.

The contractual position is that GPs should provide medical services in a manner determined by the contractor's practice in discussion with the patient [GMS Regulations Part 5 Para 17(4)(c)] and with a physical examination undertaken as part of any consultation, if appropriate, for the purposes of identifying the need, if any, for treatment or further investigation [Part 5 Para 17 (5)(a)]. PMS practices have the same clauses. This means that General Practitioners can use their clinical judgement when deciding the manner of any consultation that occurs, including its timescale, but should discuss this with the patient involved.

At the start of the Covid19 incident NHS England issued guidance encouraging all General Practices to operate a 'total triage' model whereby no F2F consultations could occur without a preliminary remote [telephone, video or on-line] consultation. In the 'Phase3 Recovery' letter, NHS England confirmed that a triage approach should continue, but that all GP practices should offer face-to-face consultations if appropriate. This guidance really restates and supports the continuing contractual position but addressed the concern that a very small number of GP practices across England appeared to have withdrawn F2F services to patients, or patients believed this was implied by the practices information for patients

For those colleagues who have been able to retain a sense of irony, the Secretary of State's comments recently included:

"From now on, all consultations should be tele-consultations unless there's a compelling reason not to, and there needed to be a shift towards more "Zoom medicine". In addition he stated there had been a "hugely positive" response to virtual appointments during the coronavirus pandemic"

There has been an escalating number of complaints within the NHS regarding perceived access to F2F GP services; however, NHS England has not suggested, nor should colleagues accept patient commentary to the contrary, that a default F2F General Practice service is being reinstated. Instead patients should continue to be advised that they should not attend GP practices unless they already have a pre-booked appointment; this may have been arranged after a remote consultation or via certain on-line appointment types that may now be available (such as for immunisations). The LMC also recommends practices liaise with their PPGs in terms of what services are currently safe and appropriate to offer at their practice.

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No colleague should feel under pressure to offer F2F consultations on request; this is not an option that has ever been available to registered patients under the GMS/PMS contract and it is not now. In addition colleagues have ben asked by NHS England and local CCGs to prioritise the delivery of certain services, such as QOF and Locally Commissioned Services, to vulnerable or at risk patient groups, and to prioritise, for example, the flu immunisation, cervical screening programme, and Learning Disability Health Checks. As there is limited capacity within General Practice, this will mean only limited further services can be offered, with GPs prioritising F2F consultations for patients whose need for treatment and further investigation can only be safely established in this way.

With best wishes

Julius

Dr Julius Parker Chief Executive