



WORKLOAD

GUIDANCE

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Approved by: Grampian LMC on 15 April 2024

The BMA has revised its guidance on Safe Working in General Practice. The purpose of this guidance is to support GPs and their practices in these difficult circumstances to safely manage their workload to a reasonable level. It can also be used as a guide by all practices to assess whether their level of service provision and patient access is consistent with the BMA's recommendations. It is hoped that this guidance will help practices to establish a reasonable and safe workload – to protect GPs, their staff, and patients – and ultimately help maintain GP services in the long term.

As independent contractors, you can implement this guidance to an extent that you see fit (or indeed not at all). Your contract contains a large amount of flexibility around how you deliver patient care. You do not need permission from anyone to make these changes – your focus should be on providing safe and effective patient care. None of these measures put you in breach of your contract.

<https://www.bma.org.uk/advice-and-support/gp-practices/managing-workload/safe-workload-guidance-for-gps-in-scotland>

You may find this extract from the BMA guidance useful:

Until there is better support and funding to reverse the sustainability crisis, GP practices must be prepared for increasingly difficult circumstances and further workload challenges. Many practices will need to protect themselves and their patients from the unsafe consequences of excessive workload.

In many practices the workload crisis is so severe that we recommend practices take urgent action to preserve patient care and their own wellbeing. Practices will need to decide how to prioritise care and day-to-day activity accordingly. These actions will inevitably result in some patients waiting longer, or issues that do not need to or cannot be dealt with in general practice being directed elsewhere.

GPs are reminded that HBs (health boards) are ultimately responsible for the provision of primary medical services for patients. While HBs contract with GP practices to deliver this responsibility, GP practices are not a safeguard for all NHS services or providers of last resort – and they cannot be expected to operate beyond the terms of their contract or undertake a workload that is unsafe.

Key Guidance for GP Practices With Excessive Workload

GP practices can limit their workload and direct patients to other NHS services:

GP practices can limit their workload, consistent with the advice that follows, to protect themselves, their staff, and patients. It is acceptable for GP practices, where they have reached their safe working limit, to direct patients to other HB (health board) services. If other HB services are unable to see patients – that is not the responsibility of the GP practice.

Practices can direct emergency and urgent problems to other health board services including NHS 24 (111), accident and emergency, and the Scottish Ambulance Service.

Practices usually start the working day with capacity to deal with new problems, however if demand is higher than expected some practices may reach a stage where they consider that they have reached their safe maximum activity for that day. If they determine that taking on more clinical activity is a greater risk they may decide that the safest option is to divert their telephones to answer machine with the following message, which is approved by the BMA.

BMA approved message to patients where safe practice capacity has been exhausted:

"The practice is currently experiencing unmanageable demand for urgent care. Taking account of our practice team's safety and the availability of other options for patient care we are not able to manage any more patients today. We are sorry for this inconvenience, which is beyond our control. If you have an urgent medical problem that you believe cannot wait, then you should seek help from other NHS agencies including NHS24 on 111 or through accident and emergency."

Text messages:

We do not advise practices substitute this message with a text message to all patients – this message is intended for patients phoning the practice only.

It is unknown how often the call diversion action will be necessary for practices, but it is hoped that these are exceptional circumstances and will be rare – we advise any practice who takes this action to notify their HB (health board) so that they can better monitor the pressures in general practice and can look to offer additional assistance to that practice going forward to avoid the need for the action to occur again. Your local medical committee can provide details of the most appropriate health board contact.

An alternative to diverting to an answering message is for reception staff to inform patients that a safe capacity has been reached, the practice is unlikely to be able to see them, and if they do not hear back from the practice before the end of practice opening hours (and their condition cannot wait) to contact NHS 24. Practices will want to choose a system that will work best for their own circumstances and ways of working.

Many practices already complete the GPAS reporting, and if you are citing patient safety concerns as the reason to alter how you deliver care, we strongly recommend that you do this. When a practice completes GPAS reporting, you are encouraged to contact the LMC if you need any support. Please do this via our email office@grampianlmc.com highlighting your current difficulties and we will contact you ASAP to offer LMC support, guidance and signposting.

You may wish to consider the following actions for GPAS GREEN

Safe working capacity, normal running and sustainable.

- Continue with normal surgeries.
- Monitor Full Time Equivalent/patient ratio and patient contacts per day.
- CTAC and pharmacotherapy tasks are no longer contractual for General Practice and are now the responsibility of the Health Board. You may find the BMA's CTAC and Pharmacotherapy guidance helpful: [bma-guidance-on-practice-responsibilities-and-pharmacotherapy-and-ctacs-services.pdf](#)
- Manage inappropriate transfer of work via discussions with Secondary Care, reporting the instances to the LMC and using the resources available on the LMC website www.grampianlmc.com.

You may wish to consider the following actions for GPAS AMBER

Moderate to severe working pressure, sustainable only in the medium term.

- Liaise with your cluster, neighbouring practices, your H&SCP and the LMC for support.
- Consider increasing remote working e.g. e-consults.
- Explore locum cover and additional staffing.
- Review appointments according to workforce availability.
- Consider formally applying to close your list.
- Consider BMA informal list measures if your application to close your list is denied (see more information later in the document).
- Consider writing to your H&SCP to outline pressures and request support.
- Consider using the workforce specialist service if your professional staff are feeling overwhelmed and concerned about their health.

You may wish to consider the following actions for GPAS RED

Significant pressure leading to potential changes in services to allow safe working, sustainable only in the very short term (less than a month).

- Inform your H&SCP and NHS Grampian that you are only able to offer an emergency service for ongoing care. If this is likely to be more than a few days, NHS Grampian may ask you to complete the escalation framework paperwork.
- Reschedule non-urgent routine appointments and triage urgent patients via your care navigators/reception staff.
- Request temporary branch closure or reduce hours of branch opening to match clinical capacity.
- Additional triage of F2F appointments to prioritise clinical need until maximum number of appointments has been reached.

You may wish to consider the following actions for GPAS BLACK

Practice in distress, unsafe to continue beyond 14 days and without support, contract hand back is extremely likely.

- Urgent communication to your H&SCP, PCCT and cluster that your practice is not able to provide urgent care due to being at GPAS Black. If this is likely to be more than a few days, NHS Grampian may ask you to complete the escalation framework paperwork.
- Urgent request for system support via PCCT to redirect patients requiring urgent appointments to urgent care – this is when you are unable to provide the 25 patient contacts per clinician at all.
- Implement a temporary suspension of service (e.g., non-urgent routine appointments) – if you can no longer add patients to a waiting list for routine appointments, you should suspend the service.

You may wish to consider managing your patient list:

The BMA's guidance is intended to help GPs decide whether they should formally apply to close their practice list, or if informal list measures would be better suited to their situation:

<https://www.bma.org.uk/advice-and-support/gp-practices/managing-your-practice-list/closing-your-patient-list>

Practices have the contractual right to put into place informal list measures as advised by the BMA, without having to go through the formal process of list closure, and without requiring approval from the Health Board. However, this does not confer protection from assignation of patients from the Health Board. Furthermore, practices should not refer to their list as "closed" if implementing these informal measures.

We are aware that some practices in Grampian may decide to implement the above informal list measures. The LMC would strongly recommend advising your local H&SCP if you do feel the need to implement informal list measures and would also advise that the preferred route for list management would be to apply to the Health Board for a formally closed list due to the additional protection this confers.

Summary:

The above recommendations are not exhaustive and should be tailored at practice level. We would encourage you to contact us should you wish to discuss any of these measures.

There are additional resources which can be found on our website: www.grampianlmc.com.

We know that making these decisions may be challenging for practices. Please be aware that the LMC can offer pastoral support as well as contractual advice. We also recommend the Workforce Specialist Service for GPs and other healthcare professionals concerned about their wellbeing: <https://wellbeinghub.scot/the-workforce-specialist-service-wss/>.