

## Y Pwyllgor Deisebau

### Petitions Committee

## Senedd Cymru

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## Welsh Parliament

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0300 200 6565

Mark Drakeford AS

Ysgrifennydd y Cabinet dros Gyllid a'r Gymraeg

Llywodraeth Cymru

Tŷ Hywel

Bae Caerdydd

CF99 1SN

Copi at Russell George AS, Cadeirydd y Pwyllgor Iechyd a Gofal Cymdeithasol

6 Rhagfyr 2024

Annwyl Ysgrifennydd Cabinet

**Deiseb P-06-1400 Adnoddau teg a digonol ar gyfer practisau cyffredinol yng Nghymru**

Bu'r Pwyllgor Deisebau yn trafod y ddeiseb uchod, a gyflwynwyd gan Lewis Williams o BMA Cymru, yn ei gyfarfod ar 18 Tachwedd.

Nododd y Pwyllgor y ddadl ar y ddeiseb hon yn y Cyfarfod Llawn ar 6 Tachwedd, ac y bydd gwaith manwl pellach ar y mater yn parhau i gael ei wneud gan y Pwyllgor Iechyd a Gofal Cymdeithasol.

Cytunodd yr Aelodau i rannu pryderon y deisebydd gyda chi, a chydag Ysgrifennydd y Cabinet dros Iechyd a Gofal Cymdeithasol, yng ngoleuni'r broses graffu bresennol ar y Gyllideb Ddrafft. Rwyf wedi anfon copi o'r llythyr hwn at Gadeirydd y Pwyllgor Iechyd a Gofal Cymdeithasol, a bydd y Pwyllgor Deisebau yn cadw'r ddeiseb ar agor hyd nes y daw ymatebion. Gweler gohebiaeth atodedig gan y deisebydd i chi ei hystyried.

Mae'r manylion llawn am drafodaeth y Pwyllgor ar y ddeiseb, gan gynnwys yr ohebiaeth a'r camau y cytunwyd arnynt gan y Pwyllgor, ar gael yma: P-06-1400 Adnoddau teg a digonol ar gyfer practisau cyffredinol yng Nghymru.

Byddwn yn ddiolchgar pe gallech anfon eich ymateb dros e-bost at y tîm clericio yn deisebau@senedd.cymru.



Yn gywir,

Carolyn

Carolyn Thomas AS  
Cadeirydd

Croesewir gohebiaeth yn Gymraeg neu Saesneg.

We welcome correspondence in Welsh or

English.



## BMA Cymru Wales comments on debate held on Petition [P-06-1400 Fair and Adequate Resourcing of General Practice in Wales](#)

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### Introduction

The BMA is a professional association and trade union representing and negotiating on behalf of all doctors and medical students in the UK. It is a leading voice advocating for outstanding health care and a healthy population. It is an association providing members with excellent individual services and support throughout their lives.

### Comments

We are pleased to see this petition debated in the Senedd, and are grateful to the Petitions Committee for its work on the petition to date. Furthermore, we are delighted that the Health and Social Care Committee will hold a Senedd Inquiry on the topic in 2025.

We thank all those who supported and signed this petition. We thank Members from across the Senedd for their contributions to the debate, and it was encouraging to hear some acceptance from the Cabinet Secretary for Health and Social Care of the concerns illustrated by the BMA Cymru Wales's Save our Surgeries campaign, on behalf of GPs, their staff and patients across the country. However, there was little to suggest Welsh Government will be taking any meaningful action within the required timeframe to safeguard the future of General Practice given the focus remains on prioritising funding of secondary care and waiting lists. This is regrettable and may destabilise the entire foundation of an effective NHS, free at the point of use in the future, if not addressed urgently.

Two further issues have arisen over the last fortnight which regrettably will further impact on the financial viability of GP practices in Wales.

#### 1. Rejection of GMS Contract offer

The Committee will be aware of the recent news that BMA Cymru Wales' GP committee, GPC Wales voted unanimously to reject the Welsh Government's GMS Contract offer for General Medical Services (GMS) for 2024/25. GPs in Wales will now be given the opportunity to vote on whether to accept or reject the contract in a referendum which will open later this month.

- Read our press statement [here](#)
- Read Dr Gareth Oelmann's open letter to GPs in Wales [here](#).



## **2. Impact of National Insurance Employer Contributions upon GMS practices**

Following the announcement of the latest UK Government Budget, the GPC Wales has commented on the detrimental impact increasing employer National Insurance Contributions (NICs) will have upon GMS services in Wales. On Friday 8 November, Dr Gareth Oelmann, Chair of GPC Wales wrote to the Cabinet Secretary to raise this issue. Read the letter [here](#).

Unfortunately, if not addressed, the above issues will result in wider matters raised by the petition getting worse. As such, the BMA Cymru Wales and GPC Wales will continue to call on Welsh Government to address the ever-increasingly urgent concerns raised in the Save our Surgeries campaign to prevent the further practice closures and restore and sustain general practice in Wales to support a Healthier Wales. We would wish to see a continued political focus on the plight of General Practice and thank the petitions committee for prioritising the petition for a debate.

The BMA Cymru Wales will continue to keep the Committee, and its members informed of our ongoing work in this area and would welcome any opportunity to further brief Members of the Senedd who would like to support our campaign and amplify our calls to Welsh Government.

### **Comment on the debate response from the Cabinet Secretary for Health and Social Care**

We acknowledge the Cabinet Secretary for Health and Social Care's comments on the petition, in particular his recognition of the 'concerning aspects' highlighted by the Save our Surgeries campaign.

The Cabinet Secretary stated surgeries in Wales see around 1.5 million people every month. It is in fact over 1.6 million appointments per month the equivalent of 50% of the population of Wales will receive an appointment at their practice each month.

This contrasts with a monthly average of just 11,000 patients receiving care at the 16 Urgent Primary Care Centres (UPCCs) across Wales. In contrast to the UPCC initiative, which has received significant funding over recent years yet is not available in all parts of Wales and remains unevaluated, GMS provision offers universal, unfiltered, holistic and equitable care with the added value of improved continuity and relationship-based care. This undoubtedly adds value for money to investment in longitudinal GMS care.

The staggering number of appointments being provided reflects delivered activity only and does not represent the totality of patient demand. Practices handled 29.1m telephone calls – approximately 120k per working day – and 5.1m digital requests during 2023-24. Equally, it does not reflect the crucial business and educational functions practices must provide.

While the BMA supports the important role of the multi-disciplinary team, and the investment which the Cabinet Secretary pointed out, we still need to train higher numbers of GPs to deliver upon the policy goals of A Healthier Wales, to deal with patient demands, and to accommodate the increased preference for less than full time working and portfolio careers. Compared to other NHS staff groups and other branches of medical practice, the relative headcount of fully qualified GPs has stagnated since 2009. There has only been a 1.8% increase in GP headcount since 2009, compared to a 44% increase in the total consultant headcount. As of January 2024, Wales needs 718 extra GPs to match the average number of GPs per 1000 population in other European countries. Restoring appropriate levels of funding and resourcing to General Medical Services, and ensuring we are recruiting and retaining GPs to work in Wales is a cost-effective investment into a sustainable general practice and the future of the Welsh NHS.

The lack of direct investment into GMS has meant that since 2012, the total headcount of GPs has only gone up by 2%, with 23% fewer full-time equivalent GPs working at practices in Wales. Despite

the figures, general practice has had to cope with a 35% increase in the number of patients per full time GP.

Finally, due to the time restrictions on the plenary schedule, the Cabinet Secretary appeared to be cut off from finishing his response to the debate. We would welcome an approach to the Cabinet Secretary from the Petitions Committee to enquire as to whether there were other remarks he wished to make but did not have the opportunity to do so.