



UCLH positive response to reducing inappropriate transfers of activity

Leaders from University College London Hospitals Foundation Trust have written to consultants and GPs following representation from LMCs. Their letter includes this advice:

"Please actively have conversations with patients in order to maintain public confidence in primary care. There are other practical ways UCLH can help too, including supporting our teams to organise tests in UCLH or moving forwards community phlebotomy clinics, referrals, follow-ups, or check results at UCLH, rather than asking GPs to do this. Making the whole system work together more efficiently will improve patient experience.

"We appreciate there are huge pressures on UCLH services too, and we are already asking an enormous amount from our teams, but by everyone in the NHS working together we will be in a much stronger position to deal with the challenges ahead. So we ask our UCLH teams to bring primary care into our #oneteam and give them our support."

The full letter can be read [here](#) and was issued following a presentation by Dr Tina Agrawal, Chair of Camden LMC, on behalf of LMC chairs in North Central London (NCL).

Dr Agrawal's presentation covered:

The unseen pressures on general practice which patients and clinicians working elsewhere in the system are often unaware of.

The record numbers of GP appointments being provided, including NCL GPs offering 28% more than pre-pandemic levels.

Reminding the Trust of areas of activity that are its responsibility, rather than that of GPs, and praising those areas where the Trust was meeting or exceeding these requirements.

This is part of a wider, pan-London area of activity by individual LMCS and Londonwide LMCs to reduce inappropriate transfers of activity from trusts to GPs, and the corresponding additional work for GPs and distress for patients this causes. This activity also aims to ensure that all parts of the medical profession speak positively about each other when dealing with patients, acknowledging the systemic pressures on everyone.

Contact details for individual LMCs can be found [here](#), they are always keen to hear concerns from constituent GPs and practice team members.

Following contact from LMC reps and other GPs, Prof Alistair Chesser, Group Chief Medical Officer for Barts wrote to consultants in November 2021. His letter included these requests:

"We can help primary care in many ways. Please actively support our GP colleagues when speaking to your patients - our problems lie in the demands on our systems not with individual doctors and nurses. And please act as an ally and call out and challenge any 'anti GP' statements if you hear them. Such talk can only be harmful as well as being unfair, disrespectful and most likely untrue.

"And please also avoid asking GP surgeries to do things if possible if they lie outside the bounds of the GP contract. In essence, if we can more easily do the test/ follow up/ check the result / make the referral and it will be better or as good for the patient if we do, then do so. There is a net saving of work for the system and for the patient, and by doing so we are protecting each other. We are looking at how we can keep patients on the waiting list informed without involving our clinical staff when possible."