

17 September 2020

Dear Nikki and Ed

RE: Letter of 14/9 concerning F2F appointments

Our constituents were dismayed to read media coverage this week referencing pre-released/ brief content from your (as yet unreceived) letter of 14 September.

Your commitment to, and expressed belief in the value of, face to face appointments is welcome. However it is disconcerting and, for frontline practitioners, disheartening to read broad anecdotal reference to patient dissatisfaction. Generated media coverage on the back of a template letter to all GPs addressing an alleged concern with a handful of practices paints a misleading picture of the vast majority of GPs whose diligence through the pandemic has often come at considerable personal cost to themselves and their families.

GPs are continually weighing up the need for a face to face consultation to make a safe diagnosis and management plan against the risks of bringing a patient in for a face-to face consultation, and this is how it should be. Indeed, our colleagues have been providing their care in full accordance with their contractual obligations, and NHSE/I's own mandated infection, prevention and control measures and Standard Operating Procedures issued, often at incredibly short notice. Such media coverage also risks increasing demand based on convenience rather than need, thereby overwhelming GP services for those who are most vulnerable or at risk.

For our part, Londonwide LMCs meets regularly with NHSE/I London counterparts to discuss areas of work and practice in need of LMC support. To date we have not been advised of any specific concerns regarding patients experiencing difficulty in accessing their GP for safe, clinically needed face-to-face appointments. As is our usual practice, we would ask that where there are clearly evidenced concerns about individual services these are presented to us so that we can help NHSE/I address and resolve them. Such concerns and issues are best addressed locally and collaboratively – mass communication via the media can, and will, have a detrimental impact on the morale of the committed GPs and practice staff whose work over the past six months has been heroic.


As we move to the next stage of this continuing pandemic, throughout the NHS we are facing an unprecedented challenge. Patients who have been trying to self-manage have now been presenting in large numbers to their general practices. This is in addition to the large numbers of patients whose care has been displaced from the hospital sector onto those very same practices. Practices whose staff capacity has, like hospitals, also been impacted by the need to self-isolate where required, and who also, for IPC and safety reasons, like hospitals, also need to manage their footfall and allow substantial additional time per consultation for the donning and doffing of PPE, wiping down equipment, furniture and rooms.

Put simply, the pandemic has not gone away. Numbers in London are now rising. And with primary care staff among the most likely members of the population to be infected, and the potential that they in turn knowingly or unknowingly becoming vectors of spread, many GPs and their teams face an ethical situation where going to work in a face-to-face environment with even minor respiratory symptoms may risk infecting countless vulnerable patients.

With demand for GP services growing even as hospitals are further limiting access to specialisms and A&E, it is even more critical that primary care staff are given access to testing to enable them to work and help patients as the second wave of the pandemic begins to grow.

I'm sure that we all have the best clinical interests of patients at heart and with all the operational and system challenges our colleagues now face, working collaboratively in a supportive system is critical to ensure that we are able to do our jobs effectively, not only within the confines of the GP contract, but also across primary, secondary care and all the other interfaces. Which is precisely what we at Londonwide are ready and eager to do.

Yours sincerely,

A handwritten signature in black ink that reads "Michelle Drage". The signature is written in a cursive, flowing style.

Dr Michelle Drage
CEO, Londonwide LMCs

Yours sincerely,

A handwritten signature in black ink that reads "Lisa". The signature is written in a cursive, flowing style.

Dr Lisa Harrod-Rothwell,
Deputy CEO & Lead Medical Director