**Pennines PCN GP Collective Action**

Dear Patient,

We would like to update you on plans for intended ‘collective action’ by GPs following the much-reported national ballot of GPs by the British Medical Association in which 98% of GPs voted for collective action. The ballot for collective action was in response to an imposed national contract forced upon GP Practices nationally which fails to keep pace with inflation and continues to undervalue the crucial role that General Practice plays in the NHS.

We always try to ensure that the care of our patients is paramount, as we value our patients, we also acknowledge that most of our patients value us too, especially when they rely on us to regularly use our services when they are unwell. As I’m sure you are aware, we can deal with most of your health problems, keep you out of hospital, and have your best interest at heart. However, there is a current problem with mismanagement of some NHS services.

Your GP is an expert in General Medical Practice. Each GP has trained over 10 years to deal with complex problems, spot serious symptoms, and decide when you need specialist help at the hospital.

General Practice has been significantly underfunded for many years, but we are now at breaking point. GPs want the same things as you do as we believe nobody should struggle to see their family doctor.

Collective action is not the same a strike and GPs will continue to offer all contracted NHS services to their patients. However, GPs are asked to provide several services which do not lie within the GP contract. This understandably, adds additional pressure onto the GP Practice which contributes to the reason it can sometimes be difficult to see a GP.

Pennines Primary Care Network have decided to collectively take the following actions:

* Patients who have attended hospital and require any additional blood tests, ECG, spirometry etc. will be referred to the hospital that requested the tests to have them done, as they have specific clinics for accommodate these tests to be completed.
* Patients requiring a sick note following hospital discharge should request this from the hospital team rather than their GP.
* If you are seen by a hospital doctor who feels another specialist opinion is required, we will ask that you are referred directly by the hospital doctor requesting the onward referral rather than this being done by GPs on behalf of hospital colleagues.

* Prescriptions that are issued by the hospital should be obtained at the hospital.

* Daily appointment numbers may be limited to bring them in line with British Medical Association guidance on the safe number of patient appointments each GP should offer per day.
* Requests from community Nurses to arrange any diagnostics should be directed to the hospital as this is the correct pathway for this work to be completed.
* Patients who have had tests within the hospital setting should not be referred back to GP for the results or repeat of the initial tests, this is the responsibility of the requester as they are clinically reviewing the patient via a separate clinical system to the GP.

Many thanks for your understanding and support

Pennines PCN

Littleborough Group Practice

Pennine Surgery

Trinity Medical Centre

Village Medical Centre

Milnrow Village Practice

Stonefield Street Surgery