

From: COhman@bma.org.uk
Subject: GPCE OFFICIAL INFO: 2023/24 DDRB general practice salaried staff pay award
Date: 02 October 2023 16:26:49

Dear Colleagues

We are writing to update all colleagues to share [the outcome of negotiations relating to this issue](#).

Colleagues will recall that for this year, 2023/24, the Doctors' and Dentists' Pay Review Body (DDRB) recommended a 6% award to Salaried GPs, and indeed other branch of practice doctors such as consultants and junior doctor colleagues. The latter groups have received this salary uplift, but in the context of continuing industrial action. This communication focuses on the outcome for general practice.

The general practice salaried GP uplift recommendation of 6% was higher than the 2.1% uplift already included in the contract funding for 2023/24; [the Government were also pressed to announce a more general uplift to the GP Contract to provide funding for all salaried general practice staff, not just salaried GPs](#).

Colleagues should note this is separate to the Agenda for Change (AfC) 5% uplift, which has already been agreed and has been incorporated into the average Additional Roles Reimbursement Scheme (ARRS) funding for those staff roles resourced under the ARRS Scheme in 2023/24.

The GP contract is notionally divided into three elements: GP contractor income, other staff expenses and other expenses. As part of the five year contract investment framework, the other staff expenses element was agreed to be 44% of Global Sum (GS), and NHS England have agreed to apply the 6% uplift to this part of GS, as this reflects the NHS income practices receive to cover these costs. NHS England has confirmed that this element of funding is calculated to contribute to both the costs of salary, and on-costs, such as Employers' National Insurance contributions, Employers' Superannuation payments – into their employees' pensions – and other staff benefits.

GP employers will continue to pay 14.38% of pensionable pay to the NHS Business Service Authority with the remaining 6.3% funded centrally.

Given that the other staff expenses element has already been uplifted by 2.1% [actually 2.064%], which provided an £80.21 million from April 2023, this element of the GS will now have a further additional 3.9% [actually 3.936%] uplift, representing £152.93 million. **This means the 2023/24 uplift will be a total of £233.14 million.**

The capitated GS for 2023/24, which was £102.28, therefore rises to £104.73. It will be backdated to April 2023, and a seven-month payment should be made in October 2023 (April – October inclusive).

GPC England (GPCE) also requested that the Trainers' Grant, which did not form part of the DDRB recommendations this year, was uplifted by 6% – this has been agreed. A further GPCE request to uplift the SFE payment levels for sickness and parental leave was not agreed.

Clarification on these arrangements

GPCE and the Sessional GPs Committee have received a number of requests to clarify these arrangements:

Salaried GPs should have a contract of employment reflecting the [BMA Model Contract](#), which should be used by GMS and (since 2015) PMS (primary medical services) contract holders. The BMA Model Contract specifies an annual salary uplift linked to annual DDRB awards and a date at which the uplift should be applied. If no such date is stated in the Salaried GP employee's contract, both committees believe the default uplift date should be 1 April. If the BMA Model Contract has been amended by the practice and employee by mutual consent, for example, where different terms are stated, contractors should comply with the terms of the employment contract. If no uplifts are referenced within an

employee's contract, then the employer has discretion, but we encourage practices to pass on the uplift they receive for the purpose it is intended.

Both committees agree that it is highly unlikely that any employee's contract will reference any date of central NHS payment to contractors. Indeed, until this year, the contract GS uplifts within the multi-year 2019-24 contract investment framework were not linked to DDRB award figures at all.

This supplementary uplift is being paid via the Global Sum and is not, therefore, tailored to the individual staff expenses of each practice. These will be dependent on their own staffing structures. There is no England-wide GP contractual option that allows an individualised practice uplift; however, increasing investment in GS is a key GPCE policy, which ensures this in-year uplift is recurrent and locked-in for future years.

GPCE have also accepted an uplift proposal to the dispensing fee scale. NHS England will apply an increase of 4.24% to the profit element of the fee scale. This funding is reflected in the October release.

GPCE believes the decision to further uplift this year's GMS GS, providing an additional contribution towards practice staff costs, is helpful: we know investment in staff is a key priority for GP Contractors. This is the last year of the agreed 2019-24 contract investment framework, and the first in which a supplementary uplift has been agreed in-year. It further increases GS by £2.45 per weighted patient (£104.73 compared to £102.28) and means that the payment per weighted patient (PPWP) has risen by 5% in 2023/24 compared to the previous year (**£104.73 compared to £99.70**). As a reminder, this uplift is now embedded for future years.

It is also the first time in recent memory that a proposed staff pay uplift has been directly linked to Pay Body recommendations, which GPCE believe signals a recognition of both the cost pressures on practices, and also the key value of rewarding all members of the practice team for their hard work in maintaining high-quality patient care as patient demand and workload continue to rise.

Should you have any questions or queries about any of the above, please contact info.lmcqueries@bma.org.uk

Read a [summary of the changes](#)

Dr Katie Bramall-Stainer, Chair, GPC England

Dr Mark Steggles, Chair, Sessional GPs Committee

Dr Julius Parker, Deputy Chair, GPC England

The BMA is a trade union representing and negotiating on behalf of all doctors and medical students in the UK.

A leading voice advocating for outstanding health care and a healthy population. An association providing members with excellent individual services and support throughout their lives.

This email and any attachments are confidential and intended solely for the addressee. If you have received this email in error please notify postmaster@bma.org.uk. Email sent or received by the BMA is monitored.

The British Medical Association.
Registered as a company limited by guarantee in England and Wales under registered

number 00008848.

Registered office: BMA House, Tavistock Square, London WC1H 9JP

<http://www.bma.org.uk>

This email has been scanned for spam & viruses. If you believe this email should have been stopped by our filters, [click here](#) to report it.