

BMA Election Manifesto 2024

Patients need doctors





This election is a chance to turn around a health service in crisis. Doctors are exhausted after years of being stretched beyond breaking point. They have been pushed to take industrial action following years of real terms pay cuts leaving them feeling undervalued, working in a health service in the midst of a staffing crisis.

Every day doctors have to deal with the legacy of funding failing to keep pace with demand, cuts to services across the board, and the distress of working in a broken system – knowing they cannot provide the level of care that patients deserve.

The next Government cannot allow our health services to continue this way: all parties must make the health of all their top priority, so we can give the public the care they deserve.

The incoming Government must:

1. **Value** the vital role doctors play across all health services and restore their pay.
2. **Protect** doctors from any further erosion of their professional role and employment rights.
3. **Train** and provide jobs for the next generation of doctors needed to meet demand.
4. **Fund** the services needed for the future of the health service.
5. **Safeguard** the public's health and wellbeing, prioritising preventative care.

Patients need doctors.



Professor Phil Banfield
BMA council chair

Value

Restore doctors' pay to value their expertise and knowledge, helping us to retain those doctors we are already losing and at risk of losing.

Doctors' pay has been eroded significantly since 2008. Pay restoration for all doctors is crucial in recognising their value and in sustaining our NHS workforce.

- Restore doctors' pay by addressing the years of sub-inflationary uplifts; deliver pay increases which truly value our medical workforce.
- Deliver a reformed and truly independent pay review body (DDRB) process able to address historic underpayments for doctors.

Remove the barriers preventing doctors from taking on additional work.

Doctors trying to reduce waiting lists must not face punitive financial penalties in the form of tax charges.

- Guarantee that the punitive impact of the Lifetime Allowance (LA) and the Annual Allowance (AA), which has forced thousands of doctors to retire early or reduce their working commitments to the NHS, will not return.
- Remove the personal and AA tapers and childcare eligibility threshold to ensure that doctors are not penalised for taking on additional overtime.
- Cut red tape to allow practices to hire GPs and reduce GP locum unemployment.



Protect

Stop the substitution of doctors with medical associate professions (MAPs). Halt the recruitment of 'associates' and give medical teams genuine 'assistants'.

The use of MAPs, including Physician Associates, must not come at the expense of skilled and expert doctors. MAPs are not doctors and cannot take on the role of doctors. The patient safety risk this is causing must be addressed immediately.

- Regulate MAPs by the Health and Care Professions Council; amend the legislation which regulates them by the General Medical Council (GMC), the doctors' regulator. Legislate to protect the titles 'assistant' and not 'associate'.
- Halt the unsafe substitution of doctors by other professionals in medical care and pause any further recruitment of MAPs until the medical profession's patient safety concerns are fully addressed.

Ensure a supportive NHS culture that listens to and protects staff raising concerns.

Raising concerns about services, safety or discrimination should be welcomed in the NHS but too often this is not the case. Openness and transparency must start at the top and doctors should never be targeted for raising concerns.

- Enhance legislative whistleblowing protections for NHS and health service staff who raise concerns, prevent the misuse of the GMC processes, and regulate NHS managers to better hold them to account.
- Establish inclusive environments for doctors and medical students ensuring they do not face disadvantages due to background or protected characteristics.
- Address sexual misconduct, ensure fair career progression, and strengthen legal protections against discrimination.

Revoke draconian anti-trade union laws, including the Strikes Minimum Service Level Act, to protect unions', and their members', right to take legitimate industrial action.

Governments should seek partnership and agreement with trade unions and staff groups, not ever-increasing restrictions on their legitimate representative functions.

- Revoke the Strikes Minimum Service Level Act.

Protect patient care by legislating for safe staffing across the NHS.

When services are understaffed, patient safety and doctors' wellbeing are compromised. Safe staffing levels are vital to protect both patients and doctors.

- Legislate to enshrine government accountability for safe staffing levels across UK health services.



Train

Expand the number of doctors by increasing undergraduate training places and postgraduate jobs for doctors.

In the face of an increasingly sick population, the resources, capacity, and academic doctors required to train more doctors is lacking.

- Guarantee the medical workforce increases in parallel with the rising demand for care while maintaining the rigorous training standards of the traditional medical degree.
- Deliver existing promises to expand undergraduate medical education and postgraduate medical training, and, critically, fund the medical educators and facilities required to realise these promises.
- Guarantee jobs for all UK medical school graduates and improve the job allocation process for newly qualified doctors.
- Overhaul the medical students' NHS bursary scheme, which has significantly eroded in value since 2012, to ensure future doctors can afford to complete their medical degree.

Fund

Ensure all UK health services have the necessary funding they require to deliver high quality, patient-centred care that meets the needs of their local communities.

The health and care system is under significant financial pressure; overall investment must be increased to meet rising demand across all health and care services so that doctors can deliver the services they so desperately want to provide.

- Provide the additional staff and services the public deserve by increasing funding for primary, secondary, community and public health services across the UK, including respective Barnett formula increases, via a multiyear settlement at least in line with historical averages, alongside additional funding for pay restoration.
- Deliver new GP contracts for England, Northern Ireland and Wales that safeguards sustainable NHS GP partnerships to deliver better services for patients. Governments must work in partnership with GPs across the UK in securing GP contract reform where mutually required.
- Invest in NHS infrastructure, with a capital funding injection to fix the maintenance backlog, improve community and GP estates, upgrade digital and IT systems, invest in research, innovation and new technology, and invest in hospitals.



Safeguard

Get the country well again by prioritising measures to boost prevention of ill-health.

Prioritising prevention is not only the right thing for the public and its health outcomes, but also for the NHS and the Treasury.

- Increase the public health grant in England to at least 2015/16 levels, with equivalent funding for each other UK nation, and increase numbers of public health specialists, to give local public health teams the means to provide vital preventative services.
- Tackle health inequalities across the UK by implementing robust public health and preventative measures to address harms caused by smoking, climate change, obesity, alcohol use, drugs and gambling.
- Prioritise preventative mental health policies to meet the increasing needs of the public, including investing in mental health services and staff.
- Guarantee resources to improve pandemic preparedness, resilience, and response, implementing the UK and Scottish COVID-19 inquiries' recommendations.
- Ensure access to occupational health services for all workers to ensure staff wellbeing is supported in all workplaces, including the NHS.



