The NAGP is the largest representative body in Ireland for general practitioners.

Membership of the NAGP increased to almost 2,000 in 2016.

90% of all patient consultations take place in general practice.

63.1 GPs per 100,000 population in Ireland – way below OECD figure.

Twitter @NAGPIrl followers increased by 70 per cent in 2016 to more than 1500.
President: 
Dr Emmet Kerin

Vice-President: 
Dr Yvonne Williams

Chairman: 
Dr Andrew Jordan

Immediate Past President: 
Dr Conor McGee

Honorary-Treasurer: 
Dr Jim Stacey

Honorary-Secretary: 
Dr Mary Flynn

Chair of Communications: 
Dr Liam Glynn

Officer: 
Dr Stephen Murphy

Officer: 
Dr Ronan Fawsitt

NATIONAL EXECUTIVE:
· Dr Emmet Kerin, Limerick
· Dr Yvonne Williams, Clare
· Dr Andrew Jordan, Dublin
· Dr Jim Stacey, Waterford
· Dr Mary Flynn, Wicklow
· Dr Conor McGee, Clare
· Dr. Liam Glynn, Clare
· Dr Stephen Murphy, Dublin
· Dr Ronan Fawsitt, Kilkenny

NATIONAL COUNCIL:
· Dr Adrian O’Donovan, Cork
· Dr Tadhg O’Carroll, Waterford
· Dr Mary O’Donovan, Wexford
· Dr Daniel Crowley, Cork
· Dr Chris O’Rourke, Kildare
· Dr Michael Fay, Kildare
· Dr Michael McConville, Cavan
· Dr Maeve Hogan, Wexford
· Dr Lucia Gannon, Tipperary
· Dr Shane Corr, Monaghan
· Dr Maitiu O’Tuathail, GP Trainee
Message from the Chairman

Dear Colleagues,

So where is General Practice after eight years of “Doing less with less”? FEMPI commenced in 2009 and unfortunately the Government singled out General Practitioner Services for the most drastic cuts of all. This decision has had disastrous consequences for the profession, and for patients.

General Practice and Primary Care were identified as the solution to the problems with our healthcare system. The Primary Care Strategy was published in 2001 and outlined a strategy which placed General Practice at the heart of the solution. Other countries had already made the decision to resource GP services and Primary Care to address escalating healthcare demands.

No other Government in modern times has reduced funding in General Practice as a cost-saving strategy. It has proven to be an historical miscalculation. We now have hospital wards full of patients with multi morbidity and frail elderly patients. We have the highest per capita nursing home population in the OECD. We have 560,000 patients on waiting lists for OPD. We have 80,000 patients on surgical waiting lists. Hardly any elective work is being done in our public hospitals as beds are being filled by EDs. We have no statutory home care system in place. Young GPs are fleeing and do not see General Practice in Ireland as a viable career.

To compound things even further, an increasing number of our GP trainees are graduate entry candidates and carry large student debts in the order of €100,000 to €150,000. They simply cannot afford to stay here!

No sensible health economist would argue against the notion that General Practice and Primary Care is the solution to a lot of the problems in our Health Service. Contract arrangements between the state and the General Practitioners are archaic, and to people outside of medicine, seem laughable and unbelievable. Rural General Practice is failing. Remote areas are no longer guaranteed local GP services. Urban deprived General Practice is failing the most vulnerable people in society.

There is no vision. There is no plan. There is a lot of talk. The ten-year Future of Healthcare committee are due to give us their vision this month. I hope it will be properly costed and considered. The Dail will then have to discuss it and, finally, agree on it. Then we will have to live with it.

The policy of the NAGP policy is to advocate for patients, to “Put the patients first”. Our vision remains the same – we believe in patient centered, GP- led Primary Care, embedded in the community. We need to take ownership of General Practice and control the governance of GP services. It cannot continue that HSE management, with little understanding of the day-to-day challenges of GPs, should have control of how General Practice is managed.

General Practice is in crisis and a new contract will only materialise when the roadmap for the next 10 years is agreed. General Practice needs to be rescued urgently – for the sake of GPs who have dedicated their careers to the care of their patients; for the future of the profession; and in the best interests of the people of Ireland.

We need the immediate reversal of FEMPI in line with what is happening in other organisations. No further un-resourced work will be accepted by GPs.

We must see the reversal of FEMPI. We must negotiate a new GMS contract. Personally, I want to see the NAGP and the IMO present a united front to contract negotiations and work together for the betterment of General Practice and patient care.

It has been my privilege to work alongside colleagues in the NAGP who gave up their time and energy to represent General Practice over the past year.

Best wishes and good luck to everybody for 2017.

Thank you,

Dr Andrew Jordan

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45.4% of Irish people have a medical card

75% of GPs cannot provide same day routine appointments due to workload*
Message from the President

Dear Member,

It has been an honour to serve you as President for the last year and I look forward to the challenges of the year ahead. At the outset, I wish to acknowledge the talent, commitment and drive of the National Council. They have made a considerable contribution to the strength and dynamism of the organisation. I have to, in particular, acknowledge the dedicated work of our CEO, Chris Goodey, and the support staff in our Dublin and Kilkenny offices.

The core message of the NAGP has never changed and it was what motivated me to get involved in the NAGP in the first instance: General Practice is in crisis - and the NAGP are strong in our assertion that we cannot watch our profession be systemically degraded. Such is the reputation and standard of General Practice in Ireland that our existing, and established, GPs are being head hunted for overseas roles.

The last year has brought the issues General Practices faces to the fore of conversation in public awareness, the media and in political circles. The NAGP has been very active in seeking solutions to the provision of GP-led Primary care through its submission documents to the Joint Oireachtas Committee on Health; to the Oireachtas Committee on the Future of Healthcare; to the GP Out of Hours Review Group; our Pre-Budget Submission 2017 and our vision for the new GP Contract. The NAGP has been an active member within the Primary Care Partnership movement which is the only forum I am aware of that exists across all primary care health and social care professionals and groups. The second meeting of the Partnership was held in Croke Park this year and grew even further on last year’s success. One of the main ‘take home’ messages and action points, of many, in my opinion, was the need to support and grow the role of the Practice Nurse in General Practice. The NAGP are actively seeking increased Practice Nurses in General Practice from a half ratio to GP as it currently stands to a 2:1 ratio. I am very concerned with the proposal to make community nursing the first point of contact, without any relation to General Practice. It is clear that this will be a huge cost and that it will increase the work load on General Practice.

When I took up my post a year ago, I spoke about the importance of public education as to the realities of the crisis in General Practice as well as the need to be solution driven to address this. I feel we have made fair inroads in the last year, however it has become clear to me in the last year that having the political body moving in the same direction is essential. In the last few months, I have spent considerable time in Dail Eireann on this very issue. It is a slow process but essential. In my view, GPs need to step into the political space and advocate for change and their patients there. I frequently hear from colleagues that politics is not for them. We can spend all the time we want in isolation at conferences and meetings confirming how good we are at what we do. However, if we do that in isolation without influencing the political system and bring them along with our thinking, nothing much will change! I am not asking GPs to leave their clinical roles, but I am asking them to engage with their elected representatives.

In the last year, the NAGP sought healthcare reform using the platform, the Tallaght Strategy for Health, calling for a ten-year strategy which was removed from the political cycle. With the formation of the new Government, this ethos was included in the programme for Government. As I write this, the report from the Future of Healthcare committee is overdue to be published. The committee’s mandate is to put patient care above politics and to map out meaningful reform of the health service. It is my sincerest hope and wish that it delivers on this principle and does not slip into individual agendas or anecdotal reactions in providing for health care. We will examine its findings carefully and interact with our membership for opinions and direction.

It was the NAGP’s stated intention to engage with the HSE/DOH and the political body to be a strong voice in the negotiation of a new GP contract. I am glad to say we have reached that objective. However, we continue to seek immediate investment in General Practice to restore functionality to the service, address the manpower shortage and stem emigration.

I wish to recognise the strength of our membership numbers which made the omission of the NAGP in the negotiation process impossible. The reversal of FEMPI is very much to the fore of our thoughts especially when it is being unwound for civil servants. Prior to the FEMPI cuts, we had a viable GP service. We provided services above and beyond the scope of our GMS contract because that is what we do in the nature of being a General Practitioner. On the back drop of the austere FEMPI cuts, we had to rationalise services that we are providing for free and at the cost of running a practice and employing staff. Such was the impact that practices had to reduce staff hours and take on even more workload. I know this came at a huge cost to GPs in their personal and home lives and has been a cause of ill health and burnout. Those real stories have left a mark on me and drives the NAGP on in our work.

I want to reassure the NAGP membership while we are actively engaging in the process of shaping a new GP contract, we have not forgotten the ongoing crisis in General Practice which ultimately has an effect on patient care. For the first time, we have witnessed unfilled places on the GP training schemes – an indicator of the perceived viability of the profession. We will continue to lobby and apply pressure for immediate funding into General Practice.

Yours sincerely,
Dr Emmet Kerin
Message from the Chair of Communication

Dear Colleagues,

It has been an honour to serve on the National Council of the National Association of General Practitioners during the past year. Our membership has continued to grow and now exceeds 1900 of Ireland’s 3000 registered General Practitioners. We are now the country’s largest GP representative body and the only organisation solely representing General Practice. With this comes the responsibility to try to represent the needs and aspirations of all our GP members and this is why we have sought inclusion in the talks on the formation of our new GP contract. This presents the opportunity of a generation to cement the place of General Practice as the bedrock of our healthcare system and to make General Practice an attractive career for the next generation. We have a lot of work to do.

The reality on the ground is that every practice is overwhelmed and still trying to deliver a service in the post-FEMPI environment and for the first year ever GP training places in Ireland have gone unfilled. Nonetheless, I and my fellow NAGP council members are determined and committed to represent you, our members, in this difficult environment. The first step on this journey has been the inclusion of the NAGP in the talks on the formation of our new GP contract. In anticipation of this, we hosted nationwide clinical meetings and contract consultations for GPs in an effort to make sure we are representing the views of our members at the negotiating table. Although a welcome and historic first for our organisation, the initial meetings with the HSE and Department of Health negotiating team have been frustratingly slow and have not yet borne fruit in terms of the much needed increased resources for General Practice. While negotiating the new contract we will continue to seek immediate resources in the form of FEMPI reversal, expansion of special items of service and restoration of distance coding.

As Chair of Communications, it was a great pleasure to welcome members to the new NAGP website and blog in this past year. We have been working hard to deliver a new and improved website where you can find all the information you need as an NAGP member, public representative, journalist, healthcare colleague or patient. The new website was designed to be user-friendly and to be shared easily with your contacts and social media network across the relevant platforms, if required. For the first time, there is a members-only area where you will find the latest NAGP newsletters, magazines and other publications. There is also a message board where important messages for members will be highlighted. I hope this website is a positive reflection of the progress the NAGP has made over the last four years since its relaunch as the organisation that represents and fights for the interests and welfare of GPs and GPs only within our health service. It is crucial that we have no other mandate and no other conflict in terms of the GPs we represent.

There has been tireless work done in terms of articulating the challenges we face with capacity, resourcing and manpower to those in a position to influence health policy. Our Pre-Budget submission generated significant media coverage and NAGP council members have spoken on RTE News, UTV Ireland, Newstalk, Drivetime, Today FM, Morning Ireland and Sean O’Rourke shows, as well as many regional radio stations. This was in addition to giving many newspaper interviews highlighting the lack of resources in General Practice. Awareness campaigns carried out included highlighting the shortage of locums; a survey of GPs highlighting increasing patient waiting times; a survey of patients gaining their insights on General Practice services.

Nine editions of the GP Ireland magazine was delivered to every GP in the country in 2016. The magazine gives a detailed insight into the efforts of the NAGP on behalf of members while keeping colleagues updated on broader, relevant topics; clinical content and columns from the relevant platforms, if required. For the first time, there is a members-only area where you will find the latest NAGP newsletters, magazines and other publications. There is also a message board where important messages for members will be highlighted. I hope this website is a positive reflection of the progress the NAGP has made over the last four years since its relaunch as the organisation that represents and fights for the interests and welfare of GPs and GPs only within our health service. It is crucial that we have no other mandate and no other conflict in terms of the GPs we represent.

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our regular contributors. I hope that you find this a valuable addition to your reading materials.

A monthly e-newsletter was introduced in the summer of 2016 and gives members, and subscribers, an insight into the NAGP’s latest news, offers and events. Efforts to grow our followers on Twitter have resulted in a 70% increase. We now have more than 1500 followers.

The second annual Primary Care Partnership Conference took place in Croke Park on the 31st March and 1st April 2017 and was attended by among others, the Minister for Health, Simon Harris and the CEO of the HSE, Tony O’Brien. During this unique annual gathering in the healthcare calendar, there were many outstanding contributions including those from patient advocate, Olive O’Connor, and international health transformation experts from across the globe. The conference is the result of the tireless efforts of 15 partner organisations which include the NAGP. We are proud to play our part in the organisation of such a valuable event. Thank you to the members who attended and contributed to the discussion.

In February, we presented to the Joint Oireachtas Health Committee, another historic first for the NAGP. This meeting was a welcome first step in articulating a united front with our sister organisations which is even more necessary for the GP contract negotiations ahead. The NAGP and the IMO must work together as equals to forge the best contract possible. History will not be kind to us if we fail due to internal division. It is a moment to put the interests of General Practice above all organisational needs and interests.

We have continued to meet the Minister for Health and the HSE and DOH negotiating teams at every opportunity since then. We await with interest the report of the Joint Oireachtas Future of Healthcare Committee to be published in the next few weeks. All the indications are that all our work is paying off as GP-led primary care is increasingly being seen as providing many of the solutions to our beleaguered healthcare system. However, there are already huge risks to this and the new contract. The danger of an unintended increase in workload without resources is real unless we collectively negotiate the best contract possible. We need all hands on deck, and all eyes looking in the right direction. This simply will not occur without structured NAGP/IMO cooperation. So it is in the best interest of all our GPs and for the generations to come to make this happen. We in the NAGP are ready to work sensibly and respectfully with our sister organisations in the coming months and years to achieve this important mission.

Finally, I would like to welcome the many new members of our rapidly growing union, on behalf of my fellow NAGP council members. Coming together is simply the beginning, as Edmund Burke once said “No one could make a greater mistake than he who did nothing because he could do only a little”. We need now, more than ever, the energy, ideas and contributions of all our members in the journey ahead. I will finish by making a special appeal to all new members and indeed would-be members: this is your union so please get involved and contribute and, together, lets create a better health service for ourselves and our patients. It is nothing less than we, and our patients, deserve.

Thank you,
Dr Liam Glynn
Dear Member,

We are at a crossroads as regards the future of General Practice and Primary Care. The decisions to be made by Government and politicians over the next few years will shape care for patients and the workplace for GPs who provide that care. Is it going to be more of the same? Or a brave new future where GPs want to stay in General Practice because it is an attractive and rewarding career?

The report, due shortly, from the Future of Healthcare Committee should be a defining document but everything does not revolve around it. It will be a roadmap but will be worthless unless it is properly funded. There has been an awful lot of positive commentary about primary care and the important work of GPs as gatekeepers. If all of the words of support were turned into euro - we would probably have one of the best GP services in the world.

Now is the time for Government to act on its supportive words and recognise how GPs are the first line of defence for patients. If Government is serious, it must put in place a realistic transformational fund in the next estimates and provide this fund over at least five budgets. Clear, ring-fenced, investment must back-up the stated intent to have a decisive shift to GP-led Primary Care.

It’s not just about the future - the past matters also. The cuts to General Practice due to the FEMPI legislation must be reversed. Those cuts are a cause of lingering pain. The start of talks on a new GP contract is to be welcomed but the slow pace of those discussions must give us cause for concern. We have yet to see real intent on the part of health service management and the Government for a transformational contract. A proper timeline for talks is also needed to focus the discussions. That means there must be a target end date, that all sides agree to work towards. A sense of urgency is required.

US President Franklin D Roosevelt once said that the General Practitioner performs a service which we rely upon and which we trust as a nation. Recent opinion polls here show it is as true today as when he said it in 1940. Now is the time for politicians to step up to the mark and prove that they truly value this service.

Yours sincerely,

Chris Goodey

CEO’s Report

NAGP Meeting with the Minister for Health, Simon Harris.

Mr. Tony O’Brien addressed the Primary Care Partnership conference in Croke Park.
MEMBERSHIP
Membership grew by 43% in the period between AGMs. The NAGP now has almost 2000 members, representing the majority of General Practitioners working in Ireland.

GP CONTRACT NEGOTIATIONS
The NAGP made several representations to the Minister for Health, Simon Harris, to further the interests of members and ensure the inclusion of the NAGP in GP Contract negotiations. In August, the Minister announced that the NAGP would be officially engaged in the contract negotiation process. Unacceptable delays meant this process did not start in earnest until January 2017. The process is now underway and the NAGP negotiating committee have met with the HSE/Department of Health officials on numerous occasions.

The NAGP are clear that no additional work can be accepted without adequate resources. While our position is that GP-led Primary Care is central to any reform of the health system, General Practice must be resourced.

In May 2017, the NAGP held regional update meetings on GP Contract negotiations to keep members abreast of developments and seek their input.

The NAGP, with the support of the Joint Committee on Health, and various public representatives, continues to seek parity of both input and output in the negotiation process.

TALLAGHT STRATEGY FOR HEALTH
Following the passing of a motion at the AGM in 2016, the NAGP called on all party leaders and independents to form a cross-party consensus on health policy, to involve all the stakeholders in health to inform a consensus plan for health for the coming 20 years. The motion began an NAGP campaign to take the politics out of health and end the five-year electoral health cycle. Representations were made to public representations, HSE and Department of Health officials and the Minister for Health. Public meetings were held in April in Dublin, Cork and Limerick.

Following months of campaigning, the NAGP were pleased to acknowledge that their proposal for a ‘Tallaght Strategy’ for healthcare over a 10-year period and to develop an agreed framework for an efficient and effective health service. The Minister announced the establishment of a Joint Oireachtas committee on the Future of Healthcare on the 24th May. The all-party committee aims to devise cross-party agreement on a single long-term vision for health care and the direction of health policy in Ireland. The committees report is due to be published this month (May 2017).

SUBMISSIONS
In 2016/2017, the NAGP made submissions to the following:
• Submission to the Future of Healthcare Committee
• Submission of the Joint Oireachtas Committee on Health
• Submission to the GP Out of Hours Review Group
All NAGP submissions are available under Publications on nagp.ie
REPRESENTING GP TRAINEES
The NAGP has made significant progress in our efforts to represent the needs of GP Trainees. As we navigate this crucial period of contract negotiations, we want the voices of GP Trainees at the heart of the NAGP and we have taken steps to formalise our relationship with GP Trainees.

We have identified NAGP representatives on each of the GP Trainee programmes.

GP registrars and trainees can become members of the NAGP for free until they qualify. In addition, there is a reduced membership rate for newly qualified General Practitioners.

We want, and need, the voices of GP trainees in the NAGP, the only organisation solely representing the interests of General Practice. The NAGP believe that representing GP Trainee issues is crucial to ensuring the viability of General Practice in the future.

The NAGP has made representations on the key issues of graduate debt and the high levels of emigration.

The meetings also addressed several clinical issues including the extension of the childhood vaccination schedule, back pain and hypertension.

CRISIS IN GENERAL PRACTICE
The NAGP has consistently and repeatedly communicated the manpower crisis in General Practice and the need for resourcing. The NAGP’s position is that FEMPI must be urgently reversed in a manner similar to that being implemented for other employees and organisations.

In January of 2017 record numbers of patients on trolleys dominated the news headlines and the NAGP repeated its position that investment in GP-led Primary Care could alleviate pressure on EDs.

INCREASE IN RPA
The NAGP welcomed the announcement that the Rural Practice Allowance would be increased to €20,000 and said it was “vindication” for GPs. The numbers eligible to receive the RPA almost doubled under the deal.

PRIMARY CARE PARTNERSHIP SUBMISSION DOCUMENT 2016
Following the inaugural Primary Care Partnership Conference in January 2016, the resulting submission document was launched in April (2016). Launched at an event in Buswells, the document addressed a number of significant areas, including: How Primary care can better function through improved access to services; Data protection and technology; Access to rural medical services; General Practice, Emergency Departments and; Managing the patient overload. At the event, Dr. Ronan Fawsitt called for the instatement of a Minister for Primary Care.

PRIMARY CARE PARTNERSHIP CONFERENCE 2017
The Primary Care Partnership Conference took place on Friday, 31st March and Saturday, 1st April. The conference highlighted the crisis in the healthcare system, citing the 565 patients
Panel discussions at the Primary Care Partnership conference ensured engagement from all health and social care professionals

waiting for treatment on trolleys at the time. 15 Primary Care Partner organisations, including the NAGP, came together at the event to urge the Government to implement healthcare reform and prevent further escalation of the trolley crisis. Health and social care professionals working in Primary Care across Ireland attended to hear 32 Irish and International speakers including Minister Simon Harris and HSE Director General, Tony O’Brien.

INAUGURAL NAGP DR. FRANCIS RYND AWARD FOR INNOVATION
At the 2016 AGM, Prof. William Shannon was presented with the inaugural Dr Francis Rynd Innovation Award 2016 by Dr Emmet Kerin President of the NAGP. Francis Rynd AM, MRCS, MRIA (1801-1861) was an Irish physician, famous for inventing the hollow needle used in hypodermic syringes.

NAGP REPRESENTATIONS ON PROPOSED IMMUNISATIONS
The NAGP represented the interests of members throughout proposed changes to the schedule of childhood immunisations. The NAGP called on the Minister for Health to intervene in negotiations on resourcing due to fears the changes would be delayed. Following the Minister’s intervention, an acceptable agreement was reached between the HSE and GPs.

PRIMARY CARE RESOURCE CENTRES
The model for future Primary Care Centres should be revised, the NAGP said in August of 2016. The NAGP formally proposed to the HSE that the planned centres should resource all patients by serving as diagnostic and service hubs that support patient-focused care with the full engagement of all local GPs. This model would mean that, in future, Primary Care Resource Centres (PCRCs) in themselves may not always serve as locations for GP Practices, but would serve as resource centres for all GPs and patients in a designated catchment area, enhancing patient care in the community.

GALA CHARITY BALL
The National Association of General Practitioners’ Inaugural Gala Charity Ball raised more than €16,000 for Mid West Simon. The ball took place on the 24th September 2016 in the Strand Hotel, Limerick. Mid West Simon reaches out to people who are homeless, at risk of homelessness or experiencing housing difficulties.
NAGP WELCOMES SURVEY SHOWING CONFIDENCE IN GP
In October 2016, the NAGP welcomed an MSD Ireland/ Ipsos MRBI survey which found that GPs were the most trusted healthcare professional. In the survey of 1000 people, 86% said they had confidence in their local GP. 53% said they were ‘very confident’ in their local GP.

SURVEY ON PATIENT WAITING TIMES
A survey of GPs carried out by the NAGP showed patient waiting times are rapidly increasing year on year. The survey carried out in December 2016 reported that only 32% of GP respondents were able to provide an urgent appointment in less than three hours. This compares to 60% of surveyed GPs in October 2015 who were able to facilitate an urgent appointment in less than 3 hours. Five years ago, 73% of urgent appointments were seen within three hours, according to those surveyed. The survey received widespread attention in the media, highlighting the crisis in General Practice.

PUBLIC HEALTH (ALCOHOL) BILL
The NAGP lent its support to the Public Health (Alcohol) Bill and urged the Government not to bow to pressure from private interests. The union said the Legislative Bill puts health before profit. Family doctors, as the first point of contact for health advice, strongly support this approach.

NAGP SURVEY OF PATIENTS
A survey of 1,026 adults, carried out in December by Ireland Thinks on behalf of the NAGP, found that 68% of patients would prefer the Government invested more funding into family doctor services rather than receive tax cuts. 78% of respondents said they would prefer to receive their routine care for a long-term illness from their GP rather than in over-extended hospital out-patients. The findings of the survey supported GPs’ calls for health care reform with a decisive shift to GP-led Primary Care. In light of the results, the NAGP repeated its call for a transitional fund of €500million per year to be put in place to resource General Practice and keep patients in the community.

COMMUNICATION WITH MEMBERS
Redesign of nagp.ie
In October 2016, a complete redesign of the website nagp.ie was completed. The new website incorporates a members-only area and supports better social media integration. The website now also includes a monthly blog section.

NAGP Newsletter
The NAGP established a monthly e-newsletter to members in July 2016. The newsletter contains all the latest news and events for members along with exclusive offers.

Twitter
Twitter followers increased by 70% in the period from April 2016 – May 2017 to more than 1500.

GP Ireland magazine
A packed edition of the NAGP magazine, GP Ireland, was posted to each member on a monthly basis. The magazine includes features, interviews, clinical content and regular columns.

PRE-BUDGET SUBMISSION
The NAGP submitted their pre-budget 2017 submission in September. The organisation urgently called for an unwinding of the disproportionate FEMPI cuts introduced to general practice in 2011 and 2013. The NAGP submission contends that general practice is at crisis point and urged the Government to assign adequate resources to GPs in the upcoming budget. The submission is available on nagp.ie.

The NAGP submission states that it is clear that the GP sector has been expected to care for an increasing number of medical card, or GP-visit card, patients over the past 10 years. The strain of providing care to more patients with less funding is now showing in the sector.

EXCLUSIVE MEMBERS OFFERS
The NAGP has continued to grow our range of offers exclusively for members. In 2016, the NAGP secured deals with Three, Exceedis, IOCSave, JLT, Total Health Cover and the GMS Dashboard. Please see nagp.ie for more information and instructions on how to save.

Professor Brendan Drumm, Dr. Ronan Fawsitt, NAGP Council Member and Mr. Kieran Ryan then Chief Executive of ICGP addressed the Tallaght Strategy for Health public meeting in Dublin.
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<tr>
<td>Retained earnings at 1 January 2016</td>
<td>€ 28,256</td>
<td>€ 6,100</td>
</tr>
<tr>
<td>Retained earnings at 31 March 2017</td>
<td>(€ 33,521)</td>
<td>€ 28,256</td>
</tr>
</tbody>
</table>

The Income and Expenditure Account has been prepared on the basis that all operations are continuing operations.
NATIONAL ASSOCIATION OF GENERAL PRACTITIONERS COMPANY LIMITED BY GUARANTEE  
(A COMPANY LIMITED BY GUARANTEE AND NOT HAVING A SHARE CAPITAL)  
BALANCE SHEET  
AS AT 31 MARCH 2017

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>€</td>
<td>€</td>
</tr>
<tr>
<td><strong>Fixed assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tangible assets</td>
<td>26,507</td>
<td>38,359</td>
</tr>
<tr>
<td><strong>Current assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Debtors</td>
<td>189,889</td>
<td>159,114</td>
</tr>
<tr>
<td>Cash at bank and in hand</td>
<td>48</td>
<td>964</td>
</tr>
<tr>
<td><strong>Total Current Assets</strong></td>
<td>189,937</td>
<td>160,078</td>
</tr>
<tr>
<td><strong>Creditors: amounts falling due within one year</strong></td>
<td>(238,563)</td>
<td>(148,089)</td>
</tr>
<tr>
<td><strong>Net current (liabilities)/assets</strong></td>
<td>(48,626)</td>
<td>11,989</td>
</tr>
<tr>
<td><strong>Total assets less current liabilities</strong></td>
<td>(22,119)</td>
<td>50,348</td>
</tr>
<tr>
<td><strong>Creditors: amounts falling due after more than one year</strong></td>
<td>(11,402)</td>
<td>(22,092)</td>
</tr>
<tr>
<td><strong>Net (liabilities)/assets</strong></td>
<td>(33,521)</td>
<td>28,256</td>
</tr>
<tr>
<td><strong>Reserves</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Income and expenditure account</td>
<td>(33,521)</td>
<td>28,256</td>
</tr>
</tbody>
</table>

The financial statements were approved by the board of directors and authorised for issue on 26 April 2017 and are signed on its behalf by:

James Stacey  
Director

Andrew Jordan  
Director

A full copy of the financial statement has been made available to members on nagp.ie