## The stark reality of General Practice

- There were 500 fewer GPs in 2015
- 200 practices closed in 2015
- Another 900 practices are at risk of closure
- Over 1/2 of GPs over 50 are likely to quit in 5 years
- Over ¼ of GPs are looking to cut down from fulltime.

Locally, *the Midlands is the most under-doctored area in England*, with 65% of GP trainee positions vacant.

That is why we ourselves cannot find locums or doctors for more permanent posts.

## What does this mean for you as a patient?

It means difficulties getting an appointment, reduced satisfaction and more complaints. There will be stressed, overworked and tired GPs who make mistakes, and burnt out, demoralised staff who get sick.

## What's being done about it?

Having finally admitted problems, the government has promised funding. Unfortunately none of it is new money and *there is no direct help for practices to cope with the crisis right now*.

There is a continued push for 7 day services when there are still not enough staff and resources for 5 day working.

## What will happen in the future?

Sadly, more practices will go bust. Patients will lose their family GP and the long-term caring relationship built on trust.

There will be large areas of the country without a GP, and there will be larger outfits run by non-doctor staff following money-saving protocols, meaning private providers could step in looking to make a quick profit.

## Please know that we are doing our best

We know you're struggling to get in to see us, but we are not being difficult; we are working as best we can to provide a quality service in a broken system.

#### Practices all around the UK face the same struggles.

Just to confirm, we are not simply moaning or scaremongering, and we are not going bust, but we have created this leaflet because we feel we owe a duty to all our patients to tell the truth, and explain the wider picture with General Practice.

# What can you do to help?

Studies show that 25-40% of consultations with the doctor are unnecessary.

*Please try and self-care where appropriate,* try the NHS choices website and please only book with us if you really need to.

Do make yourself aware of what is happening in the NHS and General Practice in particular. Speak to the Patient Group and above all, write to your MP and get some answers to your concerns.

## More resources online

NHS Choices: <u>nhs.uk</u> and the <u>http://www.selfcareforum.org</u> National Problems in General Practice: <u>heatmaps.bma.org.uk</u> Contact your MP: <u>theyworkforyou.com/mps</u>

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# The State of General Practice



With thanks to Dr Michael Wong Ivy Grove Surgery

#### Let's be honest here...

Things are difficult in General Practice and we cannot hide it any longer, and no, it is not just your Surgery, it is a national issue affecting practices all over the UK.

## Why is there a crisis?

General Practice has seen an increase of 70 million consultations over the last 5 years, meaning GPs seeing over 1 million patients every day.

This represents the *largest increase in work in any part of the NHS*. It has not been matched by any increase in staff and resources to cope – in fact *less of the NHS budget is being spent on General Practice*.

Societal factors play their part: people have less tolerance for things going wrong; and want healthcare that they can access immediately. There is reduced ability to self-care and wait for natural recovery.

Politicians continually use the NHS to make promises for votes, but do not match these promises with additional resources:

#### How does General Practice work?

We know it's difficult to get an appointment, but in order to explain why, we need to first tell you more about how General Practice works.

Each practice gets a set amount of money to provide care for each of its patients per year. From this amount, the practice pays for all heating, lighting, staff wages, equipment and anything to do with patient care. Any money left over is shared between the partners who own the business. For this fixed amount, patients see us as many times as they need. And, for this, we don't just aim to provide a low-rate service, we aim to *provide high quality and safe care.* 

> GP practices receive, on average, £136 per patient per year

## How does this level of funding compare

- £136 is the cost of medical care for you for one year
- £150 is the price of the cheapest 4G phone contract
- £170 is a trip to the cinema every fortnight
- £240 is the cost of a basic Sky TV package
- £339 is the average cost to insure your dog

## £136/year doesn't actually go very far

Realistically, this fixed amount of funding *only pays enough for patients to see us twice a year*, but on average, patients see us at least six times a year, with some patients seeing us 10-15 times or more a year.

## Shall we talk shop?

The government often compares 'poor' GP services to the retail sector, so let's look at a comparison. Say you have a shop called *Tescburys*.

If *Tescburys* worked like General Practice, then the government would give *Tescburys* £3,000 a year (average spend on groceries in the Midlands); for this, not only could you get as much *Tescburys Supreme* quality food as you liked, but also go as many times as you wanted; we think *Tescburys* would be bust within a week; as it happens, General Practice works under this pressure every single day.

## That's why you can't get in...

Now, that is why you cannot get an appointment: demand is not being matched by resources, funding or staffing; appointments are being used up more quickly than we can provide them.

We also have lots of patients attending with conditions that would get better with self-care alone.

## What's a typical day for a GP?

12-14 hour days are typical, with increased intensity and complexity; there is more admin, box-ticking, paperwork; more targets, scrutiny and inspections; this means less time to do the job well.

# A simple mistake with any one of these could have drastic consequences.

Not surprisingly, no-one wants to be a GP any more.



