

**National Assembly for Wales / Cynulliad Cenedlaethol Cymru**  
**[Health and Social Care Committee / Y Pwyllgor Iechyd a Gofal](#)**  
**[Cymdeithasol](#)**

**[Inquiry into the GP workforce in Wales / Ymchwiliad i'r gweithlu](#)**  
**[Meddygon Teulu yng Nghymru](#)**

**Evidence from Royal College of General Practitioners – GP 02 /**  
**Tystiolaeth gan Coleg Brenhinol yr Ymarferwyr Cyffredinol – GP 02**

**Briefing paper for the Health and Social Care Committee inquiry into the GP**  
**workforce in Wales**

The general practice workforce across Wales and the UK faces significant challenges due to the following key factors:

- Increasing size of workload i.e. increasing number of consultations
- Increasing complexity of patient illnesses – an ageing population, many with long term conditions and multi-morbidities
- Ageing workforce: a significant proportion of the workforce – among both GPs and Practice Nurses in the difficult to recruit areas are over 55
- Prolonged period of underinvestment – funding for general practice in Wales has been decreasing year on year and now receives 7.7% of total NHS funding compared with 8.5% in 2005/06.
- Training places have had a reduction in applicants and a growing number of qualified GPs are choosing to emigrate, retire early or change medical specialty. In 2014, 45 Welsh medical graduates chose to practice outside the UK.
- Onerous returner scheme requirements and lack of single medical performers list

There is growing evidence that the capacity of the general practice workforce to meet the changing and increasing demands of patients is under threat. Firstly, demand for general practice is increasing and this is causing additional workload pressures for GPs and their teams. There is also strong evidence that the care general practice is required to deliver is

becoming more complex as we are becoming an ageing population.

The general practice workforce is ageing. In Wales, over 23% of our GPs are over 55 and many are choosing to retire early, often due to work pressures and stress.

Wales ranks third in the UK in GP coverage per population and RCGP Wales estimates that we will need an additional 95 GPs this year just to reach the UK average. We will need even more to replace those who leave and far more to meet the needs and challenges ahead.

The RCGP's Put Patients First: Back General Practice campaign focuses on the need for urgent additional resources as well as focusing on the key themes that are inhibiting GPs from building on the excellent quality of care they currently provide despite these challenges.

The new Primary care plan is a step in the right direction but without a robust GP workforce, RCGP Wales questions how we will be able to match the aspirations set out in the plan.

As well as restoring funding levels, there is an urgent need to:

- Improve recruitment into general practice
- Retain doctors within general practice
- Support those wishing to return to general practice

## **The solutions:**

### **Improving recruitment/training capacity in general practice**

The Welsh Government must help fund additional training places for general practice and help ensure a more positive experience for medical students and foundation year doctors within general practice.

A positive marketing campaign would be beneficial to raise Wales' profile as a great place to live and work. The Scottish Highlands recently launched a new ad campaign targeting medical students in parts of England with the aim of attracting them to work in the Highlands. We have also seen similar activity to promote parts of Cumbria to medical students.

## **Retaining doctors within general practice**

Incentives are needed to attract GPs to under-doctored areas such as parts of south west Wales/north west Wales.

Improved conditions should result in retention of more GPs in Wales, particularly among those who are currently looking to retire early but we also need newly qualified doctors to consider moving to these areas to work as family doctors.

## **Easy return to practice**

RCGP Wales has met with the Welsh Government to discuss the Returners Scheme. Urgent change is needed if we are to see a significant number of GPs return to the profession after an extended period of leave e.g. assistance with the cost of returning, creating an all-Wales performers list.

## **The role of the GP**

Enhancing access to the range of care available in our communities is vital if co-production is to be more than just an aspiration. GPs are eager to play their part. Here are some of the developments already taking place, albeit to a limited degree, in our profession but could become more standardised and widespread following increased investment in general practice:

- Ability to routinely structure care around multi-morbidity, as well as individual conditions
- Take on extended roles in areas of clinical care that require the skills of a GP practitioner
- Work with GPs from other disciplines to deliver coordinated care
- Lead service planning and quality improvement

- Develop extended roles in areas such as public health, community development, education, training and research
- Offer continuity of relationship between GP, the wider healthcare team, the patient and their carers over time
- Coordinate services around the needs and shared decision of patients and carers
- Deliver health promotion and disease prevention strategies to identified populations
- Act as a gatekeeper and navigator to specialist services, to ensure effective resource utilisation and coordination

## **LHBs**

Resources are tight across the entire NHS and local health boards are facing the difficult challenge of ensuring proper investment in a range of services whilst balancing an extremely tight budget. In the context of an ageing population with patients increasingly living with multiple long term conditions, we believe there is a strong case for investing in the generalist skills that GPs and their teams provide. That is why RCGP is campaigning for a wider shift of investment towards the front line of care in the community to help reduce the burden on hospitals and the NHS as a whole.

We hope that local health boards throughout Wales will be convinced of the need to reverse the decline in investment in general practice. A boost in investment for general practice is vital if we are to meet the changing needs of patients, reduce pressure on the rest of the NHS and place our health services on a stronger long-term financial footing. Whilst GP workloads are increasing, funding for general practice in Wales has been falling year on year in real terms, from £451.3m in 2009/10 to £438.0m (HSCIC, September 2014 and Autumn Statement, December 2014) in 2013/14, with total investment falling by 2.9%.

This is having a concerning impact on patients – with as many as 650,000 people finding it difficult to get an appointment to see a GP in Wales last year.

In closing, the Royal College of General Practitioners believes that for general practice to play its critical role in caring for patients in the future NHS, it is important that there are enough GPs; that these doctors have sufficient time, both in and outside the consultation, to provide the interventions needed; and that they receive sufficient training to develop the capabilities required to deliver the high quality services that patients, carers and families rightly expect.

The pressures on general practice to deliver effective care are mounting, as is the need to deliver continuity of care and accessible services. The crisis of demand versus capacity in the health service is not new; it has not arisen overnight and neither can it be solved quickly. Sustainable solutions must be found to increase workforce capacity and enable general practices to continue to deliver the level of service that their patients expect now, as well as taking on the challenge of providing more complex care, spending longer with their patients and communities and taking on new roles and responsibilities.