

GPs and NHS management

Yesterday I discussed the state of the GP service with some local doctors. They told me they are seeing substantially more patients now than just before the pandemic struck, as there has been a surge in demand. They see the majority of patients face to face. Some patients agree a remote consultation makes sense and may be more convenient for them. I have not been receiving complaints about this surgery and am grateful to them for the work they are doing.

They also drew my attention to the need to receive prompt confirmation of sufficient budgets for their patient list size and workload. There is a danger the new commissioners, the Integrated Care Board, will delay or misjudge the competing claims of GPs and hospitals. There is also a need for NHS England to limit the number of additional demands or changed commands they issue in year. There needs to be a clear understanding of the split of the workloads between hospitals and GPs where primary care effectively undertakes some of the work for the Hospital Consultant.

Good GPs are concerned about some of the commentary suggesting surgeries are not doing enough or are refusing to arrange easy face to face appointments. Those who allege this or circulate rumours need to be more precise over who they are criticising and what the evidence is. All GPs under contract to the NHS do have to run proper complaints procedures so people with a concern should use these.

It is important that the large sums approved for health in the last two years are directed to those in primary care and hospitals who can do most to provide great care and help clear the backlog.