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## “Our plan for patients”—neither bold nor a plan

Politicians need to understand that we need urgent action to protect general practice, writes Martin Marshall

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There might have been some patients who were pleased to see headlines such as “*An end to the 8am Glastonbury-esque scramble for GP appointments*” that heralded Thérèse Coffey’s first major announcement since taking up the health and social care portfolio in the new Cabinet, but I suspect most were underwhelmed.

And the reaction from GPs was, yet again, deep frustration at the implementation of arbitrary targets, imposed without any warning, without any recognition of the support needed to achieve them, and absolutely no understanding of the huge workload and workforce pressures that are the real reason why patients are facing such long waits to see a GP.

What is especially disappointing is that the new health secretary did not contact the College—representing over 53 000 GPs and GP specialty trainees—before making such a public statement. If she had, we could have informed her of what is really needed to ensure a GP service that meets the needs of the patients and communities that practices serve.

Prime minister Liz Truss talked repeatedly about her “bold plan” during the recent Conservative leadership hustings, but last week’s announcement was neither bold nor a plan, and it will only serve to add to the intense pressures GPs and their teams are facing, while having minimal impact on the quality of care for patients.

The two-week appointment “expectation” and strong indication of “league tables” for general practice came across as yet more gratuitous criticism of GPs, at a time when it feels like general practice is running increasingly on goodwill and very little else.

Once again, GP access was prioritised when it is only a starting point to ensuring our patients receive the safe, personalised, and appropriate care they need. Yet again some politicians seem to regard access as care, rather than a prerequisite for care.

Of course, GPs share patients’ frustrations when they cannot deliver the care they want and are trained to deliver in a timely way. But general practice is caring for an increasing number of patients, with increasingly complex health needs, and carrying out more consultations every month than before the pandemic—yet with fewer qualified, full-time equivalent GPs than in 2015.

The reality is that despite the pressures, the stats suggest that general practices are doing remarkably well at providing reasonable access for their patients: 85% of appointments are already happening within

two weeks of being booked, with 44% being delivered on the day they are booked—both higher figures than in 2019—and those taking longer than two weeks after booking may be routine or regular appointments for which the timing is therefore appropriate.

While the College strongly supports transparency, we strongly caution against the creation of league tables which we know from international research evidence do not work in improving access to or standards of care in any sustainable way.

General practice is the bedrock of the health service with GPs and their teams delivering the vast majority of NHS patient contacts and thereby alleviating pressures across the health service, including in A&E. Yet successive governments, of all persuasions, have failed to invest in general practice for over a decade and we are now seeing the consequences, with patients and GP teams bearing the brunt.

Politicians need to understand that NHS pressures are not confined to hospitals, and that we need urgent action to protect general practice for the sake of our patients and the wider NHS.

The RCGP’s *Fit for the Future* campaign clearly sets out the bold, but realistic plan that our service needs—including the implementation of a new recruitment and retention strategy that goes way beyond the target of 6,000 GPs pledged by the government in its election manifesto; for general practice funding to be returned to 11% of the total health spend; investment in our IT systems and premises, and steps to cut bureaucracy so that we can spend more time delivering the care our patients need and deserve.

Following last week’s announcement, we have an additional suggestion for the new health secretary: please talk to the College and the people who know and work in general practice before making populist statements that fail to meet the real needs and expectations of patients and leave dedicated but demoralised GPs seriously questioning their future.

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