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Covid inquiry: Doctors felt like “disposable commodities” during pandemic, says BMA chair

Matthew Limb

Doctors felt overwhelmed, frightened, undervalued, and disposable during the covid pandemic, the BMA’s chair of council has told the UK Covid-19 Inquiry.

Appearing before the inquiry on 28 October, Philip Banfield was asked whether the medical profession as a whole had felt overwhelmed, both personally and professionally, during the pandemic.

“The feedback that we’ve had is that many people did feel overwhelmed—sickness rates went up, and that sense of burnout lasts to this day. We’ve seen a large number of people leave the service early because of the effects of that,” said Banfield.

He added that doctors had been exposed to the virus more readily than the general public, many had died, and many hundreds had acquired long covid. He said that many doctors on the front line had been “frightened of what was about to come and then frightened about being put in situations that they were unfamiliar with, untrained for, [that] might put them at risk.”

He added, “We went into the pandemic with very poor occupational health services, very under-resourced mental health services. In the BMA across 2019 to 2021 we saw a 343% increase in people contacting our wellbeing services. Doctors felt very undervalued during the pandemic, and in fact many times in our calls for evidence we’ve had comments back about how doctors felt as if they were disposable commodities.”

Lack of data

Banfield told the inquiry that it was very difficult to ascertain just how many healthcare workers had died from covid-19.

“Even throughout the pandemic we were getting data from individual doctors—people were finding out who had died from a press release rather than there being any central data,” he said. “If you have a look at the first 100 healthcare workers’ deaths [as reported in the press] what was striking was there were no deaths recorded from any anaesthetists or intensive care. But they were from the wards. Of course, anaesthetists and intensive care had FFP3 respiratory protection.”

Banfield said that he saw how medical school students wanted to help as cases increased. “They asked what they could do to help, they went out onto the wards with flu resistant surgical masks, and they all caught covid straight off,” he said. “If that had been tracked and if the deaths had been tracked earlier we would have known: less doctors, less healthcare workers would have caught covid, fewer would have died.”

Asked whether many patients had lost confidence in GPs because they felt unable to get appointments during the pandemic, Banfield replied, “I think a lot of the loss of confidence was driven by the Department of Health and Social Care and NHS England appearing to blame GPs for the lack of contact, and I think that got picked up in the media.”

He said that very early on in the pandemic the NHS had instructed GPs to switch to remote working, which they did “remarkably efficiently and in a very short timescale,” but throughout the pandemic more than half of appointments were still face to face. He added, “I would not blame GPs for the lack of contact. We know that general practice is under-resourced for the work it has been asked to do. Significant investment in GP infrastructure and GP estates would help enormously.”

Next pandemic

On the question of what was required for the NHS to be able to cope with a future pandemic, Banfield said, “It doesn’t feel as if much has changed at this point in time.”

He told the inquiry, “Valuing the staff and enabling them to get on with the job that they’re there to do would be helpful. We went into the pandemic with no capacity to expand, and at the same time now we’re being expected to address the large backlog—and it would seem sensible to invest quite heavily expanding that capacity now that could then be utilised for a future pandemic.”

“The medical profession as a whole still feels that its worries about infection control and respiratory protection, ventilation, the hospital estates are still unheeded, and therefore we’re unready for the next pandemic.”