



Londonwide LMCs

The professional voice of London general practice

GP Workload Survey Results

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GPs in London are under more pressure than ever to deliver on an ever expanding range of services and like all of the NHS general practice is feeling the strain. As the professional voice of general practice in the capital we undertook a survey of GPs in the city to identify whether doctors are feeling the strain and what the primary causes might be.

The following document includes the key findings from this research and, perhaps unsurprisingly, illustrate that general practice is under unprecedented stress caused by a wide range of issues.

Response rate and make-up of respondents

666 London GPs responded to this survey, of which two thirds were partners and one third were sessional. The highest response rate was in Barnet and KCW, with the lowest being Waltham Forest and Hammersmith and Fulham.

I feel my daily workload is manageable...

Of the 666 respondents who answered this question, 86% disagreed with this statement, with 43% disagreeing strongly.

The key themes in the free text comments were as follows:

- Increase in non-clinical admin
- More work coming out of secondary care
- Not enough resourcing for the extra workload
- Patients expectations are very high
- Increased complexity of patient needs
- Impact of aging population
- Days average 12-14 hours, plus work at home at weekends and evenings
- Not enough patient time
- Increase in work off the back of GP commissioning – meetings etc.

Examples of free text comments:

- 'It was manageable right up to when additional non-clinical work was added by bureaucrats who want to micromanage our referrals and prescribing in ways that reflect the interests of institutions not patients.'
- 'Just one more hour a day please!'

- 'What I have to do in a 10 minute consultation with increasing demand is simply not sustainable. The admin and additional work generated by CCGs and commissioning groups is simply over the top and I spend less and less time with patients.'
- 'I dislike admitting this and historically I have been able to soak up whatever was demanded from me – I have thoroughly enjoyed my career as a GP, I enjoy my contact with patients, but the current demands of boxes to tick and non-patient facing tasks is overwhelming and ultimately unmanageable.'
- 'There is so much administrative work and more and more meetings to attend, that it seems less time is available for patient care.'
- 'We are also spending increasing amounts of time involved in commissioning and more bureaucratic and administrative burden – one needs to care deeply about patients, not let clinical work suffer at the hands of these competing pressures.'

I feel my workload is unsustainable...

83% of respondents agree with the statement: 'I feel my workload is unsustainable'. Over half strongly agree with the statement and the key themes as to why this is the case mirror those in question one, however there were a few additional topics:

- It is sustainable if you are a freelance GP and therefore do not have to take on as many of the pressures of a salaried or partner GP
- Resourcing needs to improve
- Burnout of GPs – increased stress and dissatisfaction.

Examples of free text comments:

- 'There is only so much a human being can tolerate until their physical health and mental health suffer. The strain on family life, the health of my children and my relationship. I would encourage Jeremy Hunt to sit with me in a week to observe what I do.'
- 'Who would choose to stay as or become a GP under these circumstances?'
- 'New harder to achieve targets. Also a continuous message from the government and the press to patients that they should be able to see their GP whenever they want. Result is patients considering that all problems, regardless of actual severity, need to be assessed by a doctor and need to be assessed today. We need to be able to work with our patients and that includes sharing some honest truths with them.'
- 'The box ticking culture and use of templates has shifted the focus of care away from the patient onto the computer and this is to the detriment of care.'
- 'I am at the end of my tether.'
- 'Can rarely do anything but urgent work, so pile of routine follow ups etc never gets done.'

Patients are discharged from hospital too soon...

60% of respondents agree with this statement, although only 20% strongly agree.

Patients are discharged from hospital with poor or no clinical information...

Over two thirds (74%) of respondents agree with the above statement.

Patients are discharged from hospital with insufficient medication...

59% of respondents agree with this statement, with a further 21% answering neutrally.

I have patients coming to see me within 5 days of an outpatient consultation with poor or no clinical information...

90% of GPs that answered the survey agree or strongly agree that patients present within 5 days of an outpatient consultation with poor or no clinical information.

Patients are sent back to the practice for re-referral after non-attendance, triggering a further consultation and additional bureaucracy...

A huge 96% of GPs who responded to the survey agreed that the present system of re-referring when a patient doesn't attend a secondary care appointment causes additional bureaucracy.

Patients are advised to contact their GP for further treatment or advice, but the information supplied by the hospital necessary to enable GP follow-up is inadequate...

A massive 86% of respondents agree or strongly agree with this statement.

In an average week, roughly how much time does your practice team spend following-up referrals to secondary care and the necessary discharge information/appointments?

No time – less than 1%
0-5 Hours per week – 24%
6-10 hours per week – 33%
11-15 hours per week – 20%
16-20 hours per week – 12%
21 hours or more – 10%

How often do your consultations feel too short?

90% of people that respondents often or very often feel that their consultations are too short.

If your consultations are too short, why?

In order of preference respondents chose the following:

- Complexity of patient's case
- Administration and bureaucracy during face-to-face consultation
- Consultation period is simply too short

In the option for 'other' respondents listed a number of reasons including:

- Language barrier
- Interruptions on the telephone
- Patient expectations
- Too much QOF
- Emotional and psychological problems take time

If your practice has seen a reduction in income, please indicate, on average, how much it has reduced in the last year?

Less than 10%	19.67%
10%	25.23%
15%	29.43%
20-24%	18.32%
25-50%	6.31%
More than 50%	1.05%

On average how much of your time is spent on bureaucracy?

83% of GPs spend 20% of their time on bureaucracy

Do you feel you need more staff?

90% would like more staff in their practice

If yes, what are the barriers to employing more staff?

87% thought funding is a barrier to employing more staff. Whilst 28% of respondents thought that premises size and finding trained staff were also

blocks to employment. Only 2% didn't feel there were any blocks to employment.

Summary of findings

The results of this survey clearly illustrate that general practice, like a lot of the NHS, is under increasing pressure to perform an ever increasing number of services. But it also indicates that there are clear areas of strain for GPs in today's profession, which are outlined by the following four themes:

Theme 1: Increase in administration and bureaucracy

The majority of GPs do not feel that the current quantities of bureaucracy are sustainable, nor do they feel they are beneficial to patient care. Many respondents suggested that increased levels of non-clinical paperwork is robbing them of time with patients, which they feel is negatively impacting on the service that can be provided to patients.

Theme 2: Workload related to poor communication from secondary care

The results of the survey suggest that there is a lack of clear and timely communication from secondary care to GPs, and to the patients themselves, when they are discharged. In fact, 90% of GPs agree that they have patients coming to see them within 5 days of being discharged with little or no clinical information available for use in the follow up GP consultation.

Theme 3: Increasing patient demand

Some GPs commented that increasing patient expectations, fuelled by Government promises, mean that consultations are often complex and take longer than the 10 minute consultation. A number of respondents felt patients expectations of care could not continue to be met due to a lack of resources and staffing. GPs felt that they could not provide the standard of care that they felt their patients wanted and quite rightly deserve.

Theme 4: Lack of resourcing

79% of practices have seen a reduction of between 10% and 50% of their income in the last year alone and this lies in sharp contrast to the level of service that is expected of practices. GPs felt that they needed more staff, but cited funding as one of the key issues for not employing more staff. In addition, they suggested that both the size of their premises and the lack of trained staff played a significant role.