

Transcript – 29/09/2022

[Presenter] This is quite alarming actually, an unpublished report by the Royal College of General Practitioners, which is being seen by the BBC, has found that more than 4 in 10 GPs in England are likely to leave the profession within the next five years. Now, the Royal College is warning that if those doctors do stop practicing, a service that, as we know, is already in crisis, could collapse altogether. The Department of Health say that a record-breaking number of GPs started training last year, but that takes time, doesn't it? And what could this mean for you, for me, for people who are vulnerable heading into winter and how easy is it for you at the moment to get a face to face appointment? I'd like to try and gauge this across the county this morning - if you're listening to me, wherever you're listening to me from, have you tried to get a face to face doctor's appointment in the last couple of days, the last couple of weeks and what happened? What were you told? 0800 141 2121. Let's see what the situation is like in Suffolk. Have you tried to see a doctor face to face because you're feeling a bit poorly? Were you knocked back, did you get one pretty quick?

Dr Lindsey Crockett is a GP at the Peninsula Practice covering Alderton and Aldeburgh, and joins us on the line now. Lindsey, good morning.

[Dr Crockett] Good morning, Wayne.

{Presenter} Now, we've covered this story an awful lot on the programme and I've a lot of it at first-hand experience here on the Wayne Bavin show team not being able to get to see a doctor and that's down to workload and that's down to the fact that it's just not enough of them. And then we get this information that 4 in 10 GPs are likely to leave within the next five years. That's going to be catastrophic, isn't it?

[Dr Crockett] It absolutely will be catastrophic. As you say, we're all feeling the absolute pressure and workload. I mean, you know, don't get me wrong, being a GP is a fantastic and rewarding career, and a great privilege, and what we all want to do is provide a safe and caring and effective service.

[Presenter] You will chat to other GPs - what would you think are the main reasons for this, why are people not wanting to stay in the profession?

[Dr Crockett] I think particularly when it comes to the more senior and experienced GPs, the responsibility with the lack of capacity to perform that and honour that responsibility is increasingly stressful and there are alternative job roles as a doctor elsewhere that people can approach without having to necessarily retire. But that is the main reason why

we're losing GPs from the workforce. I mean if I can just give you an example, patients often asking, you know, why it's so difficult to see me and it's because there are so many other things that I have to do behind the scenes which directly impacts on patient care but as a senior GP and partner of the practice, I am taken away from those roles. For example, arranging investigations for patients, referring them on for further care, receiving letters from hospitals and ensuring that diagnoses are acted upon. The list is endless and additional to that, there is extra bureaucracy coming down the line where we again have to be taken away from patient direct care and look at the contractual obligations to fulfil.

[Presenter] What's gone wrong here? I remember when I was a teenager, not that long ago, 20 odd years, quite long I suppose, you could get a doctor's appointment the same day, you could get a doctor come out to your house if you were feeling that poorly. What's gone wrong?

[Dr Crockett] I think that the important thing to say is that should still be the case; so if a patient calls our surgery I would be very keen to know why they weren't able to get the appointment when they needed it. Now sometimes that takes an approach of understanding what is the need: if it's an urgent and necessary presentation of a clinical thing then that will be seen, you know, the patient will be seen that day and it might include a visit.

[Presenter] I know you can only speak from your practice, but I would disagree with that. I've run up my doctor a few times in the last couple of years and I get a receptionist asking me what my symptoms are and they're judging whether or not I should see a doctor.

[Dr Crockett] Yeah, so this is where our receptionists are now being trained as navigators and they're sign posting because of the GP workforce issues and that there aren't enough GPs for everybody to see. We are also recognising that actually the GP isn't the only person that a patient needs to see, and so we are asking our navigators nationwide to inquire the nature of the problem. That enables the patient to see the appropriate person at the right time, so nobody should be blocked from seeing or speaking to a GP at least, if they have a clinical need that they're worried about and I think we need to do a lot of communication work between us and I'm really interested to hear what your listeners are saying as to the reasons because I think we really all need to understand how the system works. We certainly don't intend for our navigators or receptionist to clinically triage, that's not, that shouldn't be happening.

[Presenter] I think possibly that's a conversation for another day. Let's get back to this report, this unpublished report that the BBC have looked at and read through. So, 4 in 10 GPs could leave the profession within the next five years. If that happens, Lindsey, what does that mean for patients?

[Dr Crockett] Well it means a very different NHS, I would say. I mean, I can't imagine managing with less clinicians than we already have. I mean, you absolutely need to have GPs but also the senior experienced GPs as well because things become very complicated especially as one ages and their needs are multiple and complex so I just can't imagine how the NHS service can sustain general practice if there are even less GPs than we have now.

[Presenter] If this report is right, it's 40% isn't it?

[Dr Crockett] Yes, it is.

[Presenter] That's nearly half of all our GPs. Now, the Department of Health are saying that there's a record-breaking number of GPs who started training last year. We don't have any figures on this, but how long does it take to become a good GP? Because surely once you come out of your training it's like driving a car, you kind of learn on the job once you get the qualification, once you pass your tests, if you will.

[Dr Crockett] Absolutely, I mean it takes 8 years as a minimum to become what we call a baby GP, you know just fresh out of having that training it is an 8 year course and that's eight years from year one of university, of course. And then, like you say, then you start to learn the ropes, then you had the wisdom to the experience and that can take years and years and years. So we're talking a long time ahead if we are even able to recruit new doctors that want to become GPs and of course once you become a qualified basic registered doctor that's when the choices come of what profession you want to join in the role of doctor and I can't imagine many people finding the GP role as an attractive career path at the moment.

[Presenter] And that was going to be my next question really, you know, how do you attract more people to it? It's not an attractive job role, it's in the press were talking about it every other day about the shortage. They did try to do something last week, the government, Therese Coffey, the health secretary did say that she would put some of that burden, that workload, will pass that onto pharmacists but as we chatted last week that's not going to work.

[Dr Crockett] Well, yeah, I mean there are some good initiatives to actually increase the workforce in different healthcare professional capacities, for example, as you mentioned pharmacists. But the pharmacists are only able to do so much and yet again it will come to the GP to make decisions and take the authority and the liability and the accountability that then takes a GP away from face to face patients, and you can see then the cycle, so the process. It's also the case that we really do need those other members of the workforce we have physios and just going back to when the patient rings and might want to see a

doctor, if a navigator ascertains that patient for example has some back pain, they can actually see a physio the same day and this is the sort of approach that this extra work that Therese Coffey is talking about, can support general practice which translates to supporting our patients. But a lot of work needs to be done in understanding when it comes to that supervised accountability, the buck stops with the GP and the funding and the flexibility of the bureaucracy is not following at the moment.

[Presenter] Why do you think, Lindsey, that when you sign up to be a GP, that you have a certain duty of care to the public? So, GPs who are looking at leaving the profession, they are making the situation worse, or do you fully understand why they are?

[Dr Crockett] I think for years and years and years, GPs have tried really hard to understand, you know, if the bureaucracy is coming their way, how can we translate that into benefiting patient care. And I think if you get absolutely worn out and tired, and if you can't physically manage, mentally manage the responsibilities, probably shouldn't be in the profession. So, yes, I hear, you know, perhaps you're suggesting there's a duty of care to continue, but not if you're not feeling that you're, you know, safe and resourced, and able to meet the demands. Not if you're working regularly 50-60 hour weeks, not if when you're on holiday you're continuously expected to respond to emails. Almost yesterday, you know, throughout the covid vaccine strategy, you know, we had to be answerable within minutes of some of the decisions that we had to make, and that was regardless of whether we were at work or not. Those sorts of things you can imagine will burn somebody out and wouldn't be the person I would choose to see with a condition that needed treating.

[Presenter] Look we're heading into winter, the flu virus we're being told is going to come earlier this year, that there's still covid knocking around, covid cases on the rise again, 4th booster jabs being given out as well. As we head into the winter, how's it looking in GP surgeries in Suffolk, Lindsey?

[Dr Crockett] Well I think we're fairly on top of things, as much as we can be, and, as you say, this additional work again comes to us to have to organise and manage. But we're very well versed in managing flu clinics and our practice has already gotten going with that: we're offering covid vaccines at the same time as flu for people who want them. So, we're doing our very very best, you know, with a very responsive alliance commissioning group as well to help us. But things do get in the way and it's often the bureaucracy and we really could do with more workforce but we particularly want our patients to understand, you know, that the best routes of getting to be seen by the right person, and will do as much as we possibly can to make that happen.

[Presenter] Can I ask how you feel? You don't have to answer, I understand it's difficult for you in your position, but do you see your future as being a GP or if somebody offered you another job in a couple of month's time, would you seriously consider it?

[Dr Crockett] Honestly, I feel it's an absolute privilege to be working as a GP for the NHS. And every contact I have with a patient feels to me as a worthwhile thing to be doing, so I will carry on, I will find the energy and the strength, and I'm very fortunate to have a lot of that so far, I'm 54 and I'm not planning on going anywhere because my patients are what empower me in my own life

[Presenter] My goodness.

[Dr Crockett] An honest response from me.

[Presenter] We need those 4 in 10 that are leaving to be replaced by another Lindsey, I think, and they will be absolutely fine. Listen, Dr Lindsey Crockett, thank you so much for chatting.