



SPILSBY SURGERY

– CARE AS INDIVIDUAL AS YOU ARE –

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25 November 2016

Victoria Atkins MP
House of Commons
London SW1A 0AA

Dear Ms Atkins

General Practice in England is in crisis. Your letter of 4 November 2016 asks how we plan to solve this. On 10 November Spilsby Surgery welcomed an inspection team from the Care Quality Commission. Their enclosed report constitutes an independent, knowledgeable, forensic and above all realistic response to your question. They found our team to be well-led, responsive, effective, safe, and caring for all patient groups. This welcome acknowledgement of these qualities across all domains of their inspection remit is no reason for complacency, but our Practice Manager has explained to you that our nurses and doctors cannot work harder without compromising patient safety.

A two or more week wait for a routine GP appointment is not unusual in UK primary care in 2016 as the needs of an ageing population living with an increasing burden of chronic health conditions, and inexhaustible patient demand, outstrip investment in health care. We hope you would already be aware that these demographics are particularly marked in your East Lincolnshire constituency.

Our duty doctor or advanced nurse practitioner will speak to any patient who believes they need to consult us sooner than the first patient-bookable appointment. If a medical need exists, then the patient will be offered an expedited – often same day – consultation. This ensures we use a finite number of appointments as effectively as possible. We've worked our model of 'Doctor First' care safely and effectively for three years with the support of our Patient Participation Group. It is clearly explained on our practice website spilsbysurgery.co.uk. We find that patients with genuine medical need have no difficulty in understanding this system. The matter of patients sharing symptoms with our receptionists has already been addressed on the website. The ease with which patients can access prompt and safe healthcare via our duty clinician has had unintended consequences, as patients contact us in preference to self-care, NHS 111 or the local pharmacist. It is an increasing challenge to balance the needs of our many vulnerable patients with the few who shout loudest and most frequently.

Dr N I O'Kelly - Dr S J Savory - Dr J Howarth - Dr K Sharrock

Executive Partner: Mrs J N Bee - Practice Manager: Mr J P Longstaff - Advanced Nurse Practitioner: Mrs A Longstaff

In your letter you set out at length the resources you believe your Government has made available to avert a crisis in the NHS. Others hold a different view, and below we set out their knowledge and insights in similar detail.

In 2016, new recruits to GP speciality training received a £20000 inducement to train in Lincolnshire for three years, with a consequent and welcome rise in the number of doctors starting training in the county. Next year the money will be allocated to other areas. We anticipate that 2017 trainees will follow the money, and fear that we will return to a situation where two-thirds of GP training places in the county are unfilled.

You state your Government is investing an additional £10 billion over 5 years to improve access to NHS services across seven days. The Chief Executive of the NHS thinks a more honest figure is £8.4 billion. Sarah Wollaston MP, the Conservative Chair of the Commons Health Committee believes the sum to be £4.5 billion. Research by the independent health charity The Nuffield Trust puts the true figure at only £0.8 billion. Just last week the Chief Executive of NHS Providers, representing healthcare trusts, stated that key financial assumptions in the 2014 *Five Year Forward View* have turned out to be wrong.

Since 2010, NHS funding as a proportion of national income has fallen year on year. You state Sustainability & Transformation Plans will boost General Practice by £0.5 billion, when many commentators see STPs as a mechanism for attempting to achieve £22 billion savings. The £2.4 billion earmarked for GP services is likely to be spent by Clinical Commissioning Groups bailing out hospitals in financial deficit, but is anticipated that from 2018 CCGs will no longer be able to keep robbing GP Peter to pay Hospital Paul and balance the books.

The Estates and Technology Transformation Fund and mooted 2020 GP contract both bind resources needed by our patients today to a commitment by our already overstretched staff to work routinely over seven days. Spreading existing staff more thinly across seven days impedes effective communication and working between doctors and nurses, and between surgeries and hospitals.

The number of registered doctors has increased by 12% since 2010. The number of registered GPs has increased by only 9%. However, most now work part-time to mitigate work-related stress, or spend part of their week in management and administrative roles at the behest of the NHS. One in three GPs plan to retire by 2020. You write that your Government 'will deliver 5000 additional doctors working in General Practice by 2020'. It takes 10 years to train a GP. Only one in nine doctors presently in GP speciality training anticipates being able to work full-time in patient care. One in five plan to emigrate after training. How many

whole-time equivalent doctors 'working in General Practice' do you promise by 2020? How many of them will be *trained* GPs?

Your constituent wrote 'I wonder if you have tried to make an appointment at your local surgery at Spilsby to see a GP'. Twelve months after we first wrote to you, we renew our invitation to visit Spilsby Surgery to gain a fuller understanding of the challenges, complexity and constraints faced by our dedicated, safe, effective, caring and responsive team – and the leadership they demonstrate in the local health community. As a practice, we strive to be transparent about the care we offer our patients, and to explain the gap between political rhetoric and primary care reality. We look forward to sharing your reply with our team and our patients.

Yours sincerely

DR NI O'KELLY
GP Partner

DR SJ SAVORY
GP Partner

DR J HOWARTH
GP Partner

MRS J BEE
Executive Partner

cc Patient Participation Group, Spilsby Surgery
Lincolnshire Local Medical Committee