

GP Shortage is a Nationwide Issue

- **Daily Record – NHS responds to 'emergency only' GP practice in EK**
- **The Pulse - Practice open for emergencies only as widespread GP shortages 'bite'**
- GP leaders say they are aware of 'widespread calls for locums to support unfilled shifts across primary care settings' and that the ongoing problems in filling sessions is a sign of historic workforce shortages 'coming back to bite'.
- **The Pulse - GP practices could close or reduce services this winter as pressures mount, warn LMCs**

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- Devon LMC said it expected a 'significant rise' in GPs reporting their practice as reaching 'red' or 'black' alert status, which respectively mean they are either under significant pressure and require immediate action to stop services becoming unsafe, or it is unsafe to continue services.
- *I am emailing to let you know that we are almost at crisis point here at XXXX. We have a Partner who will be off on sick leave, effective immediately and we are already down on GPs. We are currently trying to recruit for a new Partner/Partners but so far have been unsuccessful. We are unable to get any locums to cover and we are looking to see if there is any help available to us? We also have a nurse on long term sickness so we are extremely pressured at the moment.*

GP Shortage in all areas of Lanarkshire

- *.....to discuss the precarious situation the practice finds itself in and to seek support. In addition to our GP recruitment issue, Dr XXX had suffered a period of ill health requiring hospitalisation. The practice has since experienced a number of additional setbacks which have had an impact on our ability to deliver a quality service to our patients. These include ill health episodes for all GP Partners and myself. These episodes of ill health are attributed to the stress of attempting to deliver a service with limited resources.*
- Just a quick email to let you know we have no GP cover today, Dr X and Dr Y both off sick. We have some locum cover tomorrow. We have one ANP on duty today and the other (on annual leave this week) is on her way in. We will do our very best to keep things going and keep things safe. Currently contacting every locum I can think of but don't hold out much hope.

Independent Contractors – the real front door of the Health Service

GP

- Worsening of the sustainability issues that were evident pre-pandemic
- Have been open throughout but new ways of working dictated centrally
- Many GPs reducing their hours so same head count but reduction in WTE
- Pressure from patient demand increase (30-50%) and also impact of the rest of the system working below previous capacity
- Backlog of unmet need



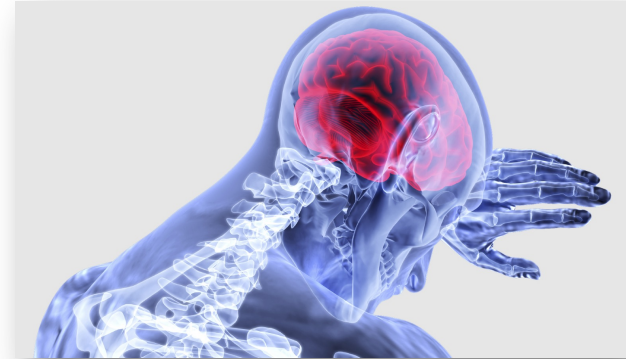
Public Dental Services

- John is a 40-year-old gentleman who has a severe learning disability, diabetes and is looked after in a Care Home. John was first seen by our service in April 2020 in his Care Home.
- At this time, he was experiencing pain and he was found to have multiple abscesses and required a full dental clearance. John required a General Anaesthetic to have his treatment completed as he was unfortunately unable to manage treatment more conventionally due to his learning disability.
- 16 weeks to receive treatment
- Diabetes uncontrolled
- Family struggling to cope



AHP impacts

- Stroke patients should be seen within 1 month in the community on discharge. Due to waiting times within ICST this is closer to 5 months. This will both slow and limit extent of recovery and potentially require increased care at home packages
- Impact of waiting lists, rehabilitation impacts on
- Other areas – respiratory, pelvic floor (60 +weeks), hand therapy



Joe's story

Joe has had back pain for over 18 months now. He normally would have self referred to a physio but the NHS 24 self management line was stood down. He has been back to his GP several times due to pain.

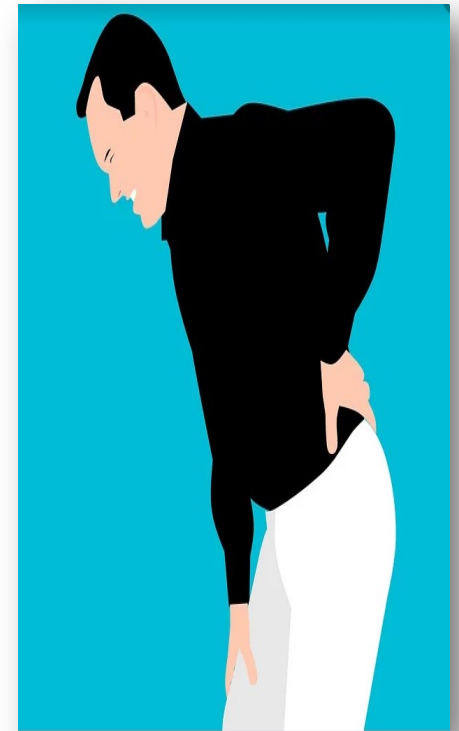
MSK waits are now considerable

He has been unable to work so is living off sick pay.

His mental health has been affected greatly due to the pain and inability to work so is also on a course of anti depressants.

His weight has increased and he has a history of diabetes so there is a potential risk he may develop that condition.

He and his family have been accessing the food bank on a regular basis through the pandemic.



Summary

- GP staffing is very difficult - nationwide
- Demand has grown on what was already a difficult position
- Complexity of impact of Covid is compounding the issue
- There is no 'quick fix'/silver bullet
- The vast majority of the demand issues are beyond the control of the practice
- We need to communicate issues more openly
- How can we be in a mutually supportive process?