

Family doctor services “under severe threat of extinction” in Britain

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The Royal College of General Practitioners (RCGP), the professional membership body for family doctors in Britain, is warning that the future of health care provided by General Practitioners (GPs) is “under severe threat of extinction”.

RCGP president Dr. Maureen Baker told the *Guardian* that the GP health care service, which is the bedrock of the National Health Service (NHS) and accounts for 90 percent of all patient contact is “in crisis”. “GPs and practice nurses can’t keep doing more for less now that funding for general practice in England has slumped to just 8.5 percent of the NHS budget”, reported the *Guardian*. Spending on the service has been cut in real terms by £9 billion since 2004/2005 at the same time as patient consultations have skyrocketed.

The pressure on smaller surgeries is also set to increase now that, beginning this month, the Minimum Practice Income Guarantee (MPIG) is being replaced by the new General Medical Service contract (nGMS). The MPIG is a safeguard introduced in 2004 as a means to ensure the survival of small practices by guaranteeing a minimum level of funding irrespective of the number of patients on their books. Some 98 GP surgeries have already been placed under risk of closure as a result of the introduction of the nGMS.

The warnings made by the RCGP have been echoed by other health professionals. Dr. Chaand Nagpaul, chairman of the British Medical Association (BMA) GP committee, recently told medical news outlet *Commissioning.Gp*, “It is clear general practice is facing a workload disaster that is threatening its long term future”.

“We are seeing morale dip to a level that I cannot remember in my 25 years as a GP”, said Dr. Nagpaul, adding, “GP practices are facing an unprecedented

combination of rising patient demand, and declining resources”.

At last year’s BMA local medical committees conference, Liverpool GP Andrew Taylor warned that “general practice is dying”, pleading with delegates, “Don’t let deceitful, duplicitous politicians and governments destroy the GP jewel in your NHS crown”. Newcastle GP Gerard Reissmann likewise insisted, “This isn’t our doing, we are watching this car crash and we are saying this is happening”.

The seventh National GP work-life survey (2013), conducted by Manchester University, revealed that 86 percent of GPs reported rising pressure from increasing workloads. Eighty-one percent of GPs reported increased paperwork, and 78 percent noted lack of time to carry out their job. GP job satisfaction in 2012 plummeted to its lowest point since 2001, with stress among GPs currently reaching a 15-year high.

While the RCGP report emphasised that GP funding faces a greater proportional decline relative to funding for hospitals, this should not obscure the reality that the Conservative/Liberal Democrat coalition government is slashing the overall NHS budget. This is central to its strategy to liquidate what remains of free, public health care provision in the UK.

Almost a third of the NHS budget is set to be wiped out by 2021 through the imposition of so-called efficiency savings, a euphemism concealing deep structural cuts of £30 billion to services and jobs, alongside sweeping privatisations.

One consequence of the cut in GP funding has been increasing pressure on Accident and Emergency (A&E) departments. Longer waiting lists for GP appointments and severely curtailed patient-GP contact times have been a major factor for the increasing numbers of people being forced to go to A&E instead.

At the end of last year, Professor Sir Bruce Keogh, medical director of NHS England, seized on the A&E crisis to make a cynical call on GPs to relieve the pressure on A&E departments, and for more A&E work to be carried out by private providers. This underscores that it is not various parts of the NHS that are being cut to the point of extinction but the entire NHS itself.

Since 2010, some 60,000 front-line nursing-related posts have been cut, along with the closure of 54 NHS walk-in centres. Nationally, more than 34 A&E units have been earmarked for closure since 2010, with 70-100 units set to be downgraded to ordinary non-specialist Emergency Centres.

Of the 58 NHS Mental Health Trusts in England, almost half are currently running at 100 percent occupancy for mental health beds, well above the 85 percent recommended by the Royal College of Psychiatry. The situation is made worse by the cut of 2.4 percent, in real terms, to the mental health budget over the last two years. This has led to a reduction of 1,711 mental health beds in the NHS.

At the end of March, Britain's leading brain doctors sent a damning letter to NHS executives protesting the planned closure of 18 brain cancer specialist units. The letter, which was leaked to the *Daily Mirror*, was signed by 13 leading clinicians attacking plans to reduce the number of specialist units from 25 to 7 and restrict access to advanced radiotherapy treatments.

The letter was written by leading consultant neurosurgeon Matthias Radatz, who described the changes made to the NHS as "draconian". "To the layman it's appalling. To the expert it's appalling", he said.

Radatz, chair of the Radiosurgery Clinical Review Group, said NHS England—the body created to drive through the coalition's assault on the NHS as set out in the Health and Social Care Act 2012—was "acting out of spite or ignorance". The letter warned strongly at the "potential risk of harming individual patients due to delayed treatment".

No trust whatsoever can be placed in Labour to reverse the attack on the NHS. It was the previous Labour government that drew up proposals for the unprecedented £20 billion cut to the NHS budget, which is now being ruthlessly implemented by the present government. Closed-door talks are taking place discussing how to increase these cuts to £30 billion by

2021.



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