UK doctors surgeries forced to close doors to all but urgent care needs

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Local doctors' surgeries across the UK face an ongoing crisis as coronavirus infection levels reach new heights. A record one in 13 people are infected with the virus, according to the latest Office for National Statistics figures.

The impact of the pandemic on doctors and other workers in local GP practices has seen some "struggling to maintain regular services", according to a recent article in health professionals' *Pulse* magazine. This has meant closing surgery doors to all but the most urgent cases.

Dr Dave Triska, a GP at a Surrey-based practice, told *Pulse* at the end of March that half his team of eight doctors were off and about one third of the overall staff.

"We've never had to restrict services like we've had to due to Covid," he said, "We just physically don't have the people to do it. There's a limit to how much you can do."

Describing the situation as "Russian roulette", as each day brought new absences, he said his surgery could soon reach "critical numbers". Those with overall responsibility for general practice, such as NHS England and the Clinical Commissioning Groups (CCGs), had "no backup plan".

"We're basically on our own, and we have to make do," Dr Triska said.

Similar COVID-related shortages are impacting GP surgeries across England, including in Cambridgeshire, Greater Manchester, Hertfordshire, and Yorkshire and the Humber.

Scotland, where the devolved Scottish Parliament has responsibility for health policy, has also seen several examples of local surgeries being forced to close their regular appointment booking service. The Mistylaw practice in Lochwinnoch messaged patients requesting that on three days this month they only contact the surgery if they have urgent care needs. While the surgery was still able to fulfil pre-booked appointments, it said extra appointments were very limited due to staff shortages.

In Wales, where the Welsh Parliament is responsible for health provisions, the Crickhowell doctors surgery had to cancel all routine appointments on Monday due to high levels of staff sickness.

As the *World Socialist Web Site* reported last October, beleaguered GPs suffered immensely in the latter quarter of 2021, as the pressure mounted to roll out the vaccine booster program aimed at combating the then-latest variant of COVID-19.

"The impact of COVID, the vaccine rollout and backlogs across the system are resulting in increased demand on a National Health Service [NHS] already barely able to cope. The crisis in primary care services, in which General Practitioners (GPs) play a vital role, is having a crippling effect."

The article also drew attention to a report highlighting how the GP workforce in England had shrunk by 1,904 since 2015, exposing the government's hollow pledges to recruit a further 5,000 GPs by 2020 and then—after failing to meet this target—6,000 by 2025.

The current situation is no less dire. A recent survey carried out by the Royal College of GPs (RCGP) found that at least a third were planning to retire in the next five years, leaving 14,000 fewer GPs than are currently working.

Doctors who work in local practice face a grinding schedule where they are officially only allocated 10 minutes to see a patient, one of the lowest appointment times among developed countries. Addressing the Health and Social Care Committee last month, retired GP Dr Andrew Green said, "We need to accept that 10-minute appointments are not safe. The only way that

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you can run a 10-minute appointment surgery on time is by cutting corners.

Dr Green added, “One of the things that made me finally give up normal clinical work was the feeling at the end of the day that I wasn’t happy with the work that I’d done because I couldn’t fit what the patients needed into the 10-minute appointments.”

The government’s criminal “herd immunity” policy, which has allowed the virus to rip through the population in successive and ever-higher waves of infection, has placed intolerable burdens on NHS hospitals. This has produced a monumental backlog of those waiting for vital elective procedures, which now exceeds 6 million. In turn, this increases pressures on GPs, who must manage patients on excessively long waiting lists, with some forced to live with excruciating pain or physically limiting conditions.

Dr Kate Fallon, a GP in Somerset, told the Health and Social Care Committee, “We have a 63-week wait to see a gastroenterologist at the moment. And what are all those patients doing? Well, we’re holding them, we’re taking the risk, we’re trying to support them through that.”

This caused “an awful lot more patient contacts,” while they waited for a surgery appointment. “It’s not just gastroenterology, but that’s the worst example,” Dr Fallon said.

“Learning to live with the virus,” as the government insists must happen, also impacts on nursing staff who work in local GP practices, where two thirds are expected to leave within the next year. Common reasons cited for wishing to depart included feeling exhausted, overworked, and underpaid, as well as having too little time to do their jobs to the desired standard.

A poll carried out by *Nursing in Practice*, surveying close to 400 practice nurses, found that 18 percent were considering early retirement, while 8 percent were looking to leave the profession. Altogether, only a third of those surveyed were planning to stay on as a GP nurse.

A nurse practitioner in northwest England explained, “I feel I am not given the time I need to do my job to the standard that I would like to. I feel undervalued”. Another in the East Midlands declared that they “cannot see any improvement on the horizon.”

The realities of being overwhelmed and understaffed are hitting numerous regions. To alleviate the pressures, drastic measures are being taken. Several London practices are training reception staff to double-up as phlebotomists and take blood from patients.

With all areas of the NHS suffering from decades of under-funding, further aggravated by the government’s malign neglect in face of the pandemic, it is hardly surprising that a recent survey found patient satisfaction with GP services had fallen by almost a third.

According to the 2021 British Social Attitudes Survey, only 38 percent of respondents were satisfied with NHS general practice. This is a thirty-point fall over the year and the lowest figure recorded since the survey began in 1983. Waiting times for GP and hospital appointments were cited as the main reasons for dissatisfaction with the NHS overall. The survey saw the lowest level of satisfaction with the NHS since 1997. More people (41 percent) were dissatisfied than satisfied (36 percent), a 17-point slump in this measure.

The government’s enforced collapse of free universal healthcare services will be used by it to push for the further privatisation of the sector. In an editorial on Wednesday, the house paper of the Conservative right-wing, the *Daily Telegraph*, attacked healthcare spending on an “unreformed, and increasingly unpopular, socialised behemoth that too often shows more interest in its staff than its patients.”

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