



NORTHERN
IRELAND

70 YEARS OF BEST PRACTICE

Assembly Election Manifesto May 2022

A Prescription for General Practice



General practice at the heart of our community

For many years, GP surgeries have been the beating heart of their communities across Northern Ireland, striving to provide compassionate and high-quality care for patients.

Unfortunately, decades of underinvestment in general practice have left our practices struggling, with demand consistently outstripping capacity. GP surgeries did not go into the pandemic in a strong position and the Covid-19 pandemic has exacerbated these difficulties, with a subsequent unprecedented demand for GP services. This has left GPs and practice staff burnt out and demoralised, with many contemplating leaving the profession for good. As a result, year on year, more practices are closing, and communities are left without this vital service.

The Royal College of GPs is asking all political parties in Northern Ireland to make investing in general practice a key priority in their election manifesto. It is essential that we have political support to redress years of underfunding to support GPs and our practice teams to deliver patient care in the community, tackle worsening health inequalities and meet the real and urgent needs of our patients in our community.

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Increase investment in general practice

General practice provides around 95% of the care people need throughout their life¹, yet it receives only approximately 8% of the health budget². Successive expert reviews, including Professor Donaldson's report³, Transforming Your Care⁴, and Professor Bengoa's review⁵, of health and social care in Northern Ireland made clear the need to invest in primary care, so that more care for patients could be delivered closer to home. Unfortunately, the resources needed to deliver any of these recommendations have not followed.

Adequately resourcing general practice will improve patient care and access, secure the future of the profession, and improve the efficiency of the health service as a whole, by treating patients in the community.

The Department of Health must ensure that it allocates at least 11% of its budget to meet the needs of general practice.

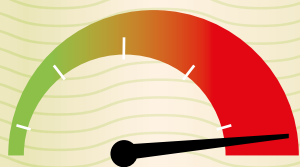
Rollout of the Multidisciplinary team model



The Multidisciplinary Team (MDT) model, which sees mental health workers, social workers, physiotherapists, and other healthcare professionals embedded in GP surgeries is a foundation stone for the transformation agenda in health and social care. This will enable direct patient access to these healthcare professionals. Despite the clear and demonstrable benefits to patient care and outcomes, this programme has been allowed to stall and stagnate. This exacerbates the already deep inequalities in healthcare provision across Northern Ireland. Making the necessary £113 million annual funding available for this programme and ensuring there are no barriers to staff working in the community setting must be a key priority in the next Assembly mandate and budget.

All political parties in Northern Ireland must commit to rolling out the Multidisciplinary team model across Northern Ireland at pace, to ensure all patients have equal access to the enhanced primary care service that this provides.

Tackle unsustainable workload in general practice



Workload challenges mean that GPs are struggling to provide the personalised relationship-based care that patients expect and value, when clear evidence shows it improves patient outcomes, satisfaction levels and reduces hospital attendance. There is a clear demand and capacity mismatch in general practice and as a result, workload for GPs and practice teams is unmanageable. Covid-19 has exacerbated these pressures and left our staff exhausted and burnt out. A GMC survey⁶ of staff considering early retirement suggests that stress is a key factor, with 42% of respondents citing burnout. Not only is this unacceptable, but it is also unsustainable for the profession.

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There is a clear need for political and public recognition of the pressures in general practice and support to address this. There must be a commitment to build capacity in general practice and to utilise technology effectively to improve patient experience and reduce workload.

All political representatives must commit to taking action to tackle this unsustainable workload.

As hospital waiting lists continue to grow, GPs are often the only available healthcare professional to support patients on these long waiting lists, many of whom suffer from deteriorating health while they wait for specialist care.

In the next Northern Ireland Assembly mandate, our unacceptable waiting lists must be addressed and a key part of this must be investing in general practice, to support patients in the community.

Expanding the GP workforce

GPs in Northern Ireland are exhausted with many suffering from burnout and considering leaving the profession. The workforce situation is unsustainable, with more than a quarter of the GP workforce over 55 and approaching retirement. According to an RCGP member survey, 25% of respondents said they intend to retire within the next five years.⁷ If action is not taken, we will continue to haemorrhage GPs from our already scarce workforce with massive implications for patient care and the wider health service.



The number of GP practices in Northern Ireland has decreased by almost 10% since 2014⁸. If more GPs and other members of the practice team are not recruited and if the workforce challenges are not addressed, the ability of our service to meet the needs of our patients will continue to decrease year on year. It is imperative that a comprehensive workforce review is undertaken in primary care, which includes consideration of the role of primary care nursing and other multidisciplinary professionals. Sustainable healthcare provision necessitates training more GPs in Northern Ireland.

All political parties must act to ensure GPs have dedicated time and resource to train medical students, as the future generation of doctors across all medical specialities.

In addition, GP surgeries need to be fit for purpose to train an increasing number of students from the Graduate Entry Medical school in the University of Ulster and new C25 curriculum in the Queens University, Belfast. It is essential that GPs have dedicated time and resource to train medical students, as the future generation of doctors across all medical specialities.

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Improved physical and digital infrastructure

Inadequate premises affects patient care and service delivery so this must be rectified through urgent investment. In addition, to house the Multidisciplinary Team model and effectively train GPs and medical students in practice, capital investment in our local surgeries is required. It is also important that any capital investment in GP premises is cognisant of the climate emergency, with an investment in green infrastructure.

Digital infrastructure in primary care is too often inadequate. Many of our GP practices are trying to run a twenty-first century service using twentieth century technology. It is not working and causing both frustration for practice staff and distress for patients, who often cannot get through on the phone. Meaningful investment in GP telephony and digital infrastructure would improve efficiency and patient access. Ensuring fit for purpose digital infrastructure must be a priority for political representatives.



Ensuring physical premises and digital infrastructure in general practice are fit for purpose for patients and staff must be a key priority for the next Assembly mandate.

How you can help!

Join the conversation on Twitter #GPatheart

Want to learn more about our campaign?

Email: cliona.mccarney@rcgp.org.uk

Royal College of General Practitioners
4 Cromac Place, Belfast, BT7 2JB
Telephone: 020 3188 7722

Website: www.rcgp.org.uk



Facebook: [facebook.com/rcgpni](https://www.facebook.com/rcgpni)



Twitter: [@rcgp_ni](https://twitter.com/rcgp_ni)

References

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