

## Londonwide LMCs' Workforce Survey

Wave 14, November / December 2022

Selected slides for LMCs (include comparisons from earlier survey waves)



#### **An Additional Note on Methodology**

- Patients: In places where we have made reference to an estimated number of patients, figures have been
  calculated using the list size as provided by member practices. Where these figures are mentioned, we
  have taken the mid-point of the stated list size to estimate the number of patients in a given category.
  These figures are an estimation and, particularly where base sizes are small, should be taken as indicative
  rather than representative.
- GP positions: In places where we have made reference to an estimated number of GPs, figures have been calculated using the number of WTE roles for all GP positions, as provided by member practices. Where these figures are mentioned, we have taken the WTE figures provided by respondents to estimate the number of GPs in a given category. These figures are an estimation and, particularly where base sizes are small, should be taken as indicative rather than representative.
- Non-GP positions: In places where we have made reference to an estimated number of non-GP staff, figures have been calculated using the number of WTE roles for all non-GP positions, as provided by member practices. Where these figures are mentioned, we have taken the WTE figures provided by respondents to estimate the number of non-GP staff in a given category. These figures are an estimation and, particularly where base sizes are small, should be taken as indicative rather than representative.
- For this wave, rather than marking statistically significantly different changes between the current and first wave of this research per slide, as we have done previously, we have created a slide (4) to show specific changes over time.



#### Methodology

The Londonwide LMCs' Workforce Survey was completed by Practice Managers and Principal GPs from member practices across London. This survey was conducted by Savanta ComRes on Londonwide LMCs' behalf.

The survey was conducted online between 22<sup>nd</sup> November – 12<sup>th</sup> December 2022, with a total of 321 responses from 270 individual member practices. Of Londonwide LMCs' 1,116 member practices that were invited to participate in the research, this represents a response rate of 24%. Of Londonwide LMCs' total universe of 1,119 member practices, this represents a response rate of 24%. The previous waves of this research were conducted between 15th June - 5th July 2022, 29<sup>th</sup> November – 17<sup>th</sup> December 2021, 8<sup>th</sup> June – 27<sup>th</sup> June 2021, 24<sup>th</sup> November – 14<sup>th</sup> December 2020, 18<sup>th</sup> November – 13<sup>th</sup> December 2019, 28<sup>th</sup> May and 21<sup>st</sup> June 2019, 21<sup>st</sup> November and 13<sup>th</sup> December 2018, 6<sup>th</sup> and 25<sup>th</sup> June 2018, 6<sup>th</sup> December 2017 and 5<sup>th</sup> January 2018, 31<sup>st</sup> May and 20<sup>th</sup> June 2017, 25<sup>th</sup> November and 12<sup>th</sup> December 2016, 25<sup>th</sup> May and 10<sup>th</sup> June 2016 and 23<sup>rd</sup> November and 8<sup>th</sup> December 2015.

The data have been weighted so that in total each practice counts as one response. Please note that the quoted base sizes refer to the number of practice responses, rather than the number of individual responses.

Area	# of practices that responded
North East	46*
South West	21*
South East	64
North Central	52
North West	87
TOTAL	270**

\*Where the number of practices in a group mentioned in this report is below 50, findings are marked with an asterisk (\*). These results should be treated with caution and should be considered indicative rather than representative. Figures with two asterisks (\*\*) should be treated with extreme caution as they denote a base size of less than 10.

\*\*Methodological note on data disparity: in this report, the specified total # of practices that responded (270) can differ slightly from the manually calculated sum of the individual STP area totals. This reflects the rounding used by the survey to accommodate multiple practice responses and is **NOT** an error.



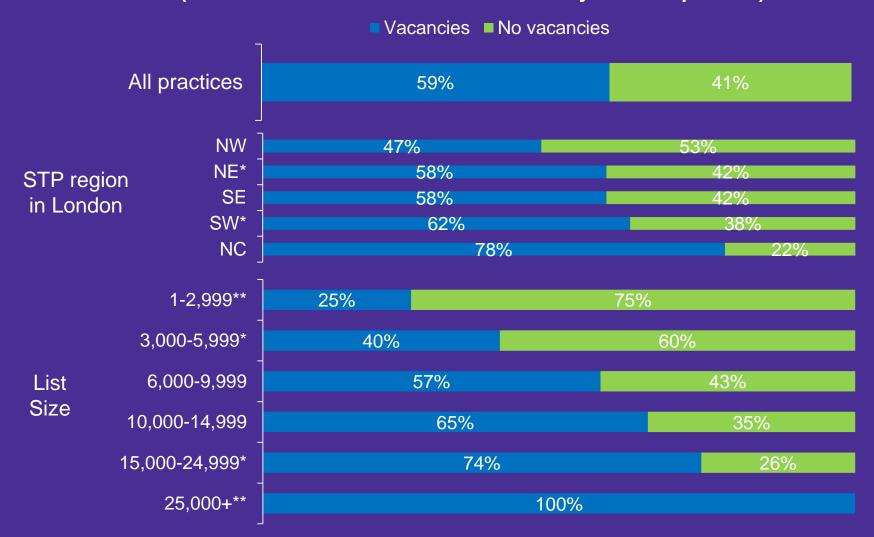
# Approaching all practices are PCN members, and almost two thirds are GP federation member practices. Three in five, respectively, have an active and engaged Patient Participant Group and are a training practice.



In total, 160 of the member practices that took part in this survey say they have an active and engaged patient participation group; in total these practices have approximately 1,872,881 registered patients.



Three in five practices have current vacancies. Vacancies tend to be more likely in the North Central and South West STP regions, and among practices with 25,000+ patient lists (to be taken as indicative due to the very low sample size).

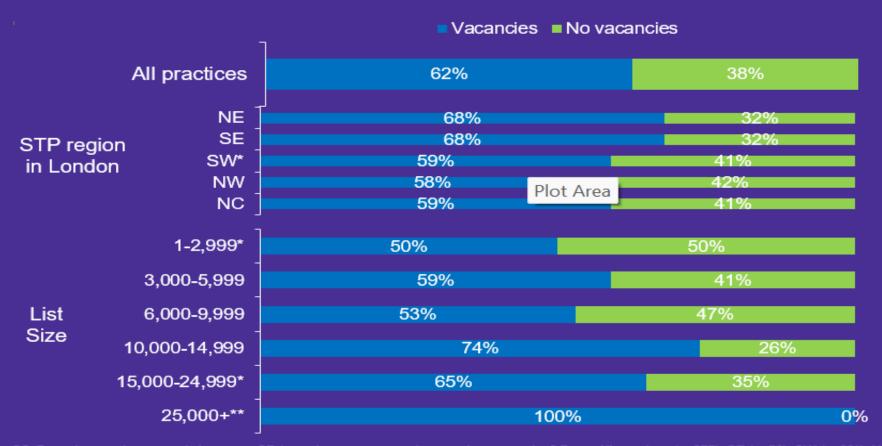


Q5. Does the practice currently have any GP / practice nurse vacancies, or other vacancies? Base: All practices (n=270), SE (n=64), SW (n=21\*), NC (n=52), NW (n=87), NE (n=46\*), 1-2,999 (n=4\*\*), 3,000-5,999 (n=42\*), 6,000-9,999 (n=112), 10,000-14,999 (n=64), 15,000-24,999 (n=44\*), 25,000+ (n=3\*\*)



#### Compare previous slide - December 2022 With this slide - June 2021

Approaching two thirds of practices have current vacancies. Vacancies tend to be higher in the Eastern STP regions, and among practices with 10,000+ patient lists.

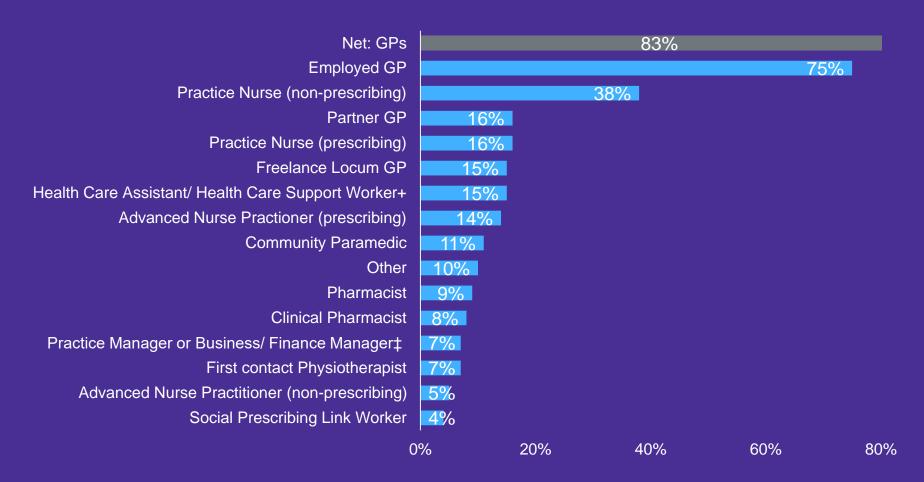


Q5. Does the practice currently have any GP / practice nurse vacancies, or other vacancies? Base: All practices (n=277), SE (n=56), SW (n=29\*), NC (n=50), NW (n=96), NE (n=46\*), 1-2,999 (n=10\*), 3,000-5,999 (n=49\*), 6,000-9,999 (n=104), 10,000-14,999 (n=78), 15,000-24,999 (n=31\*), 25,000+ (n=5\*\*)



# Current vacancies are most common among employed GPs and non-prescribing practice nurses, with over four in five practices reporting any type of GP vacancy.

Showing most common unfilled posts among practices that currently have vacancies



Q6a. What positions, if any, are currently vacant at the practice? Base: All practices that have current vacancies (n=159)



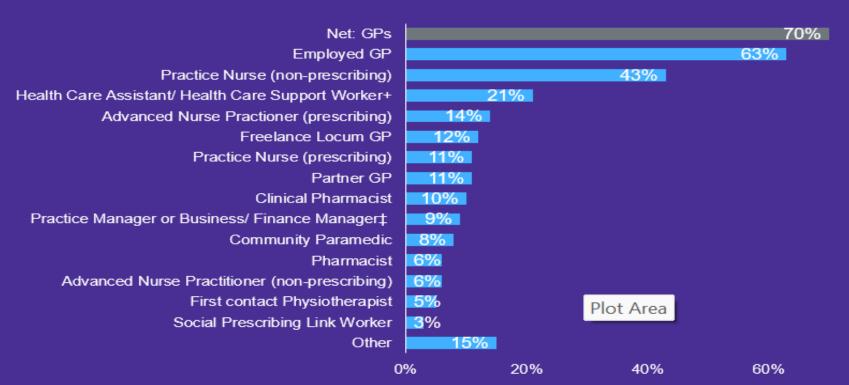
<sup>&</sup>lt;sup>+</sup> Updated from 'Health Care Assistant' to 'Health Care Assistant / Health Care Support Worker' in Wave 7

<sup>‡</sup> Updated from 'Practice manager' to 'Practice Manager or Business/Finance Manager' in Wave 8

#### Compare previous slide - December 2022 With this slide - December 2021

Current vacancies are most common among employed GPs and non-prescribing practice nurses, with over two thirds of practices reporting any type of GP vacancy.

Showing most common unfilled posts among practices that currently have vacancies



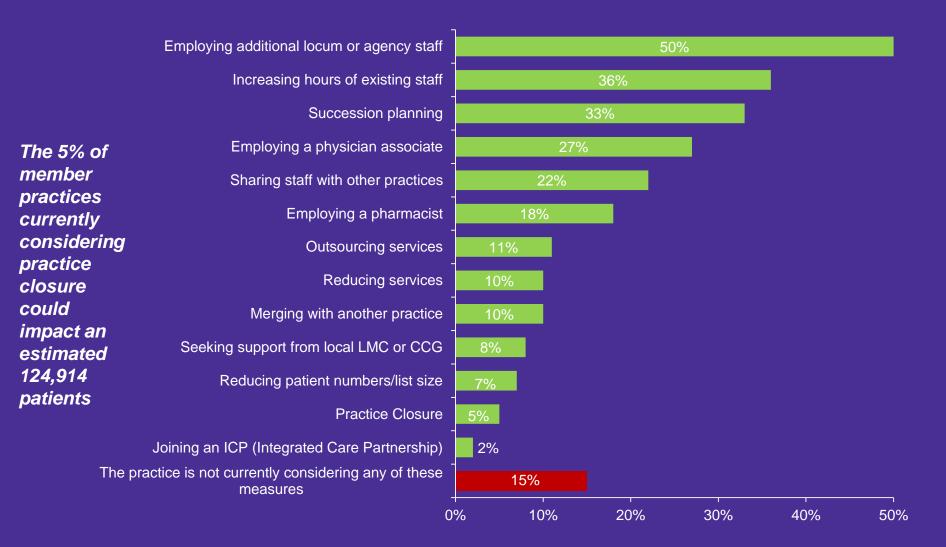
Q6a. What positions, if any, are currently vacant at the practice? Base: All practices that have current vacancies (n=172)



<sup>\*</sup> Updated from 'Health Care Assistant' to 'Health Care Assistant / Health Care Support Worker' in Wave 7

<sup>1</sup> Updated from 'Practice manager' to 'Practice Manager or Business/Finance Manager' in Wave 8

Half of practices are considering employing additional locum or agency staff to manage future and current vacancies, with one in six practices not considering any of the provided measures.

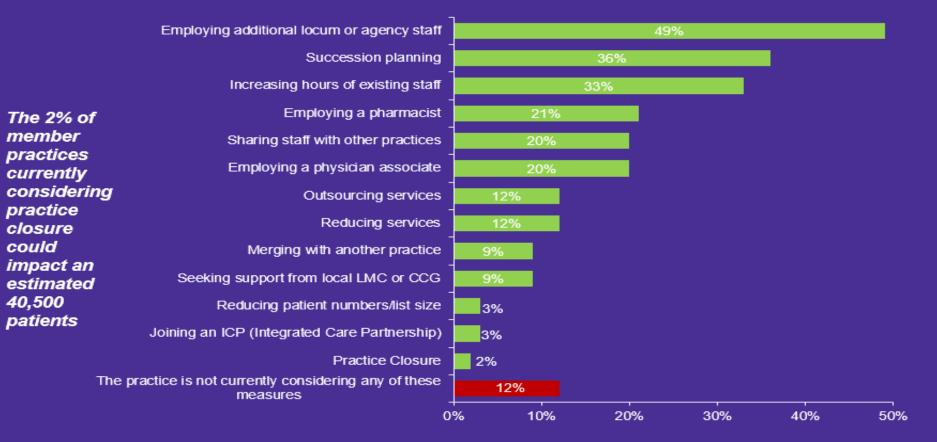


Q7. What actions are currently being considered within your practice to manage current and future vacancies? Base: All practices (n=270)



### Compare previous slide - December 2022 With this slide - December 2021

Half of practices are considering employing additional locum or agency staff to manage future and current vacancies, with more than one in ten practices not considering any of the provided measures.



Q7. What actions are currently being considered within your practice to manage current and future vacancies? Base: All practices (n=277)



#### There are 13 practices which say that they are either considering closure or planning to terminate their GP contract in the next 3 years, with 7 in North West and 3 in North East STP areas.

Borough	# Practices Considering Closure	# Practices Planning to terminate GP Contract in next 3 years	# Practices Considering Closure OR Planning to Terminate GP Contract
Barnet	1*		1*
Bexley	**	**	**
Brent	3*	1*	3*
Bromley	*	*	*
Camden	*	*	*
City & Hackney	1*	*	1*
Ealing	1*^	*	1*^
Enfield	**	**	**
Greenwich	1*	*	1*
Hammersmith & Fulham	**	**	**
Haringey	**	**	**
Harrow	**	**	**
Hillingdon	1**	**	1**
Hounslow	1*	1*	1*
Islington	1*^	*	1*^
Kensington & Chelsea	* <b>^</b> ^^	*	* <b>^</b>
Lambeth	*	*	*
Lewisham	*	*	*
Merton	**	**	**
Newham	**	**	**
Redbridge	**	**	**
Southwark	*	*	*
Sutton	**	**	**
Tower Hamlets	1**	**	1**
Waltham Forest	1*	1*	1*
Wandsworth	*	*	*
Westminster	1*	*	1*

		# Practices	
		Planning	# Practices
		to	Considering
			Closure OR
			Planning to
	# Practices		
_	Considering		GP Contract
Area	Closure	years	
SW	_*	_*	_*
NC	2	-	2
NW	7	2	7
SE	1	-	1
NE	3	1*	3*
TOTAL**	12^^	3	12^^

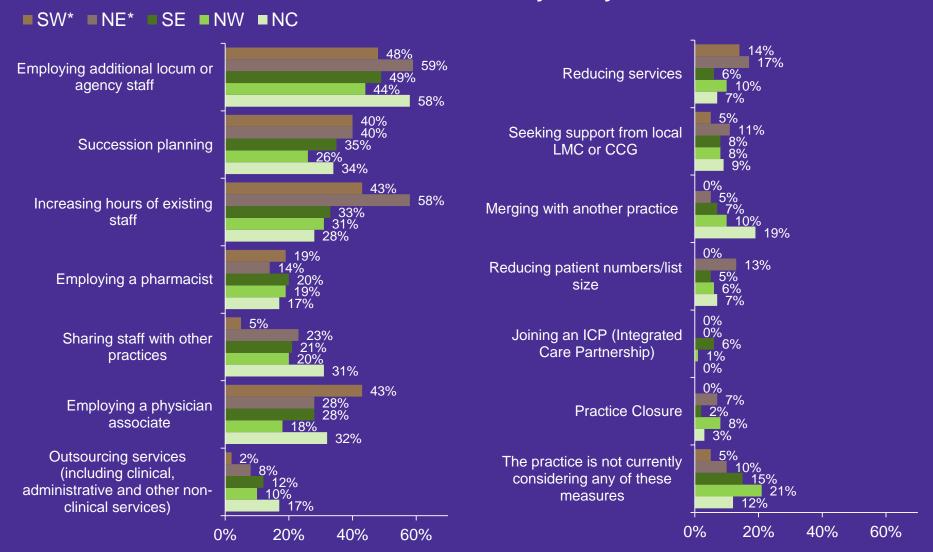
Q7. What actions are currently being considered within your practice to help manage current and future vacancies? Q9. Does the practice have plans to terminate its GP contract in the next three years?

Base: practices in; Barnet (n=17\*), Bexley (n=5\*\*), Brent (n=17\*), Bromley (n=13\*), Camden (n=10\*), City & Hackney (n=11\*), Ealing (n=19\*), Enfield (n=6\*\*), Greenwich (n=12\*), Hammersmith and Fulham (n=6\*\*), Haringey (n=7\*\*), Harrow (n=7\*\*), Hillingdon (n=6\*\*), Hounslow (n=11\*), Islington (n=12\*), Kensington & Chelsea (n=10\*), Lambeth (n=13\*), Lewisham (n=10\*), Merton (n=5\*\*), Newham (n=6\*\*), Redbridge (n=8\*\*), Southwark (n=11\*), Sutton (n=6\*\*), Tower Hamlets (n=7\*\*), Waltham Forest (n=14\*), Wandsworth (n=10\*), Westminster (n=11\*), SE (n=64), SW (n=21\*), NC (n=52), NW (n=87), NE (n=46\*)

\*\*Please see methodological note on data disparity (slide 3) ^ N.B. Figures rounded up to 1 from 0.5 as a consequence of weighting

consequence of weighting

^ N.B. Data disparity due to weighting and rounding ^ N.B. Figures rounded down to 0 from 0.33 as a The professional voice of London general practice Practices in the South West STP area are least likely to say they are <u>not</u> considering any of the actions tested as a way to manage current and future vacancies; those in the North West area are most likely to say this.

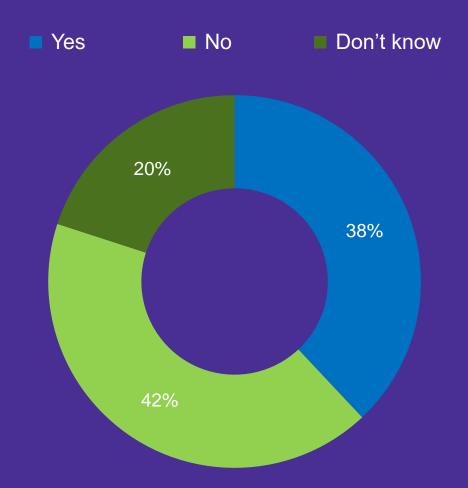


Q7. What actions are currently being considered within your practice to manage current and future vacancies? Base: SE (n=64), SW (n=21\*), NC (n=52), NW (n=87), NE (n=46\*)

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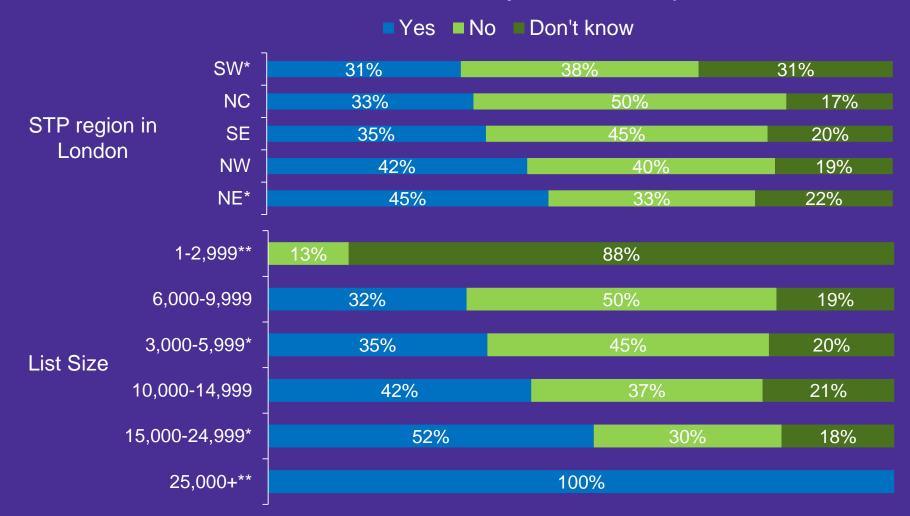
Two in five practices have GPs planning to retire in the next three years, while a similar proportion say they do <u>not</u> have any GPs planning to retire.



Q8a. Does the practice currently have any GPs planning on retiring in the next 3 years? Base: All practices (n=270)



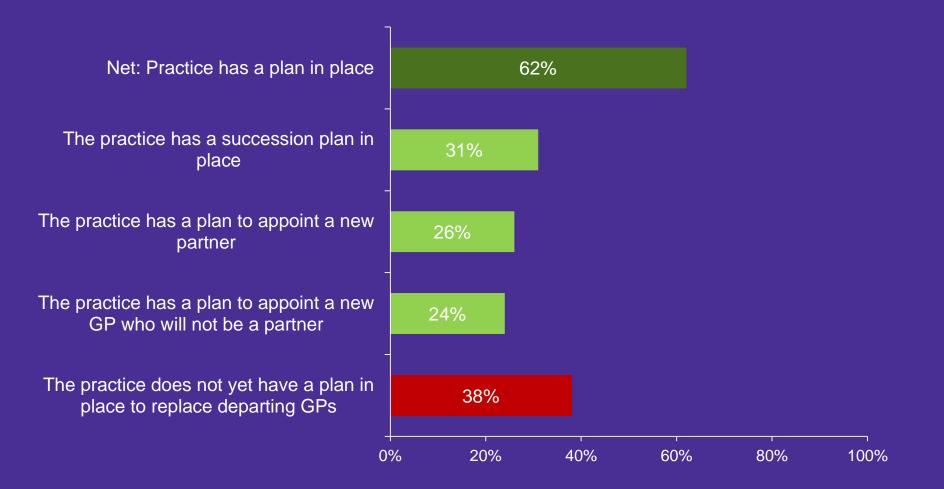
Practices that have GPs planning to retire in the next 3 years are most likely to be in the North East STP region and tend to have larger list sizes (though these practices with larger list sizes have low to very low base sizes).



Q8a. Does the practice currently have any GPs planning on retiring in the next 3 years? Base: All practices in; SE (n=64), SW (n=21\*), NC (n=52), NW (n=87), NE (n=46\*), 1-2,999 (n=44\*), 3,000-5,999 (n=42\*), 6,000-9,999 (n=112), 10,000-14,999 (n=64), 15,000-24,999 (n=44\*), 25,000+ (n=3\*\*)



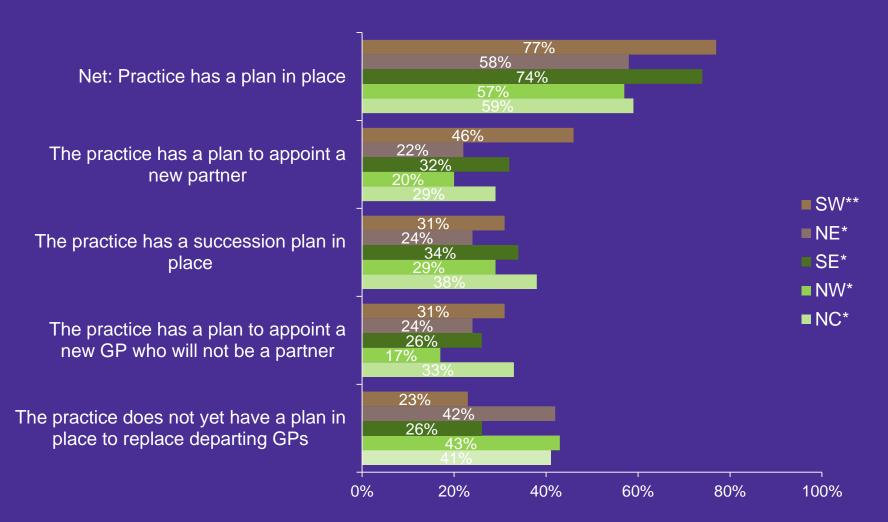
The majority of practices in Wave 14 say they have some kind of plan in place to replace GPs retiring within the next 3 years, although two in five do not have a plan in place yet.



Q8b. You said that the practice currently has GPs who are planning to retire within the next 3 years. Which of the following apply to the practice? Base: All practices who said they have GPs planning to retire in the next three years (n=103)



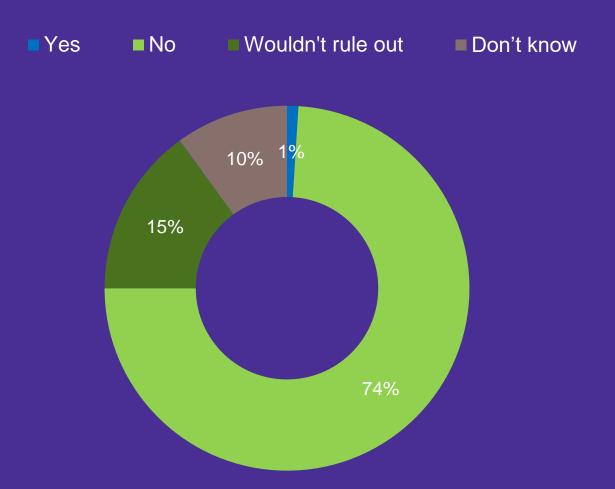
## Practices in the South West and South East STP areas are most likely to say they have a plan in place to replace GPs retiring within the next 3 years.



Q8b. You said that the practice currently has GPs who are planning to retire within the next 3 years. Which of the following apply to the practice? Base: All practices with GPs planning to retire in the next three years; SW (n=7\*\*), NW (n=36\*), NC (n=17\*), NE (n=21\*), SE (n=23\*)



Three quarters of practices say they have <u>no plans</u> to terminate their GP contract in the next 3 years. One in six would not rule it out and one in ten are unsure.



Q9a. Does the practice have plans to terminate its GP contract in the next three years? Base: All practices (n=270)



Only practices in the North West and North East areas say they have plans to terminate their GP contract in the next 3 years, with the North East STP most likely to say they wouldn't rule it out (worth noting this area's low base size however). Practices in the South East STP are most likely to have no plans to terminate.



Q9a. Does the practice have plans to terminate its GP contract in the next three years? Base: All practices in SW (n=21\*), NW (n=87), NC (n=52), SE (n=64), NE (n=46\*)

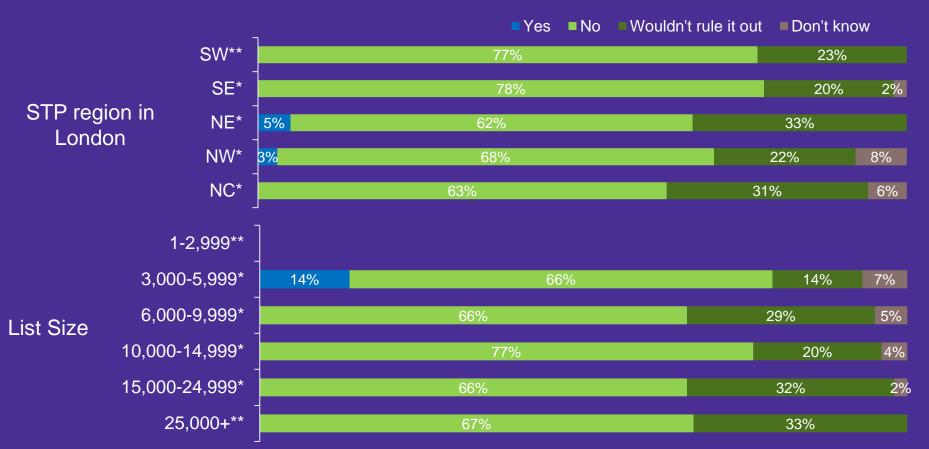
<sup>\*</sup>Please see methodological note on data disparity (slide 3)





Fewer than one in ten practices in North East and North West STP areas with GPs who plan to retire in the next 3 years currently indicate they have plans to terminate their GP contract in the next 3 years.

### Showing plans to terminate GP contracts amongst practices who have any GPs planning to retire within the next three years

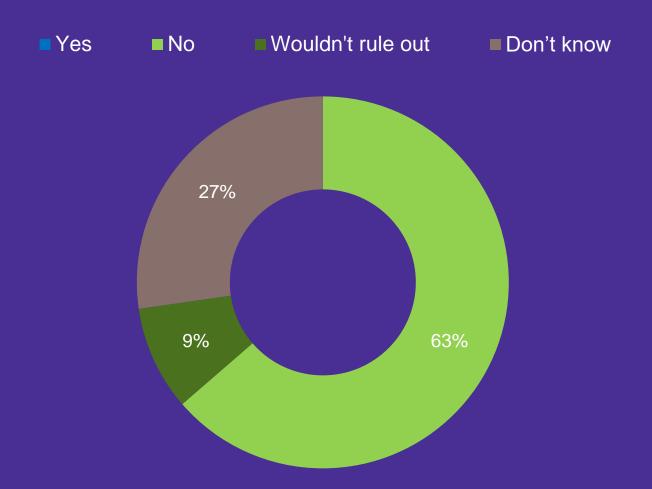


Q9a. Does the practice have plans to terminate its GP contract in the next three years? Base: All practices with GPs planning to retire in the next three years; SW (n=7\*\*), NW (n=36\*), NC (n=17\*), SE (n=23\*), NE (n=21\*), 1-2,999 (n=0), 3,000-5,999 (n=15\*), 6,000-9,999 (n=35\*), 10,000-14,999 (n=27\*), 15,000-24,999 (n=23\*), 25,000+ (n=3\*\*)

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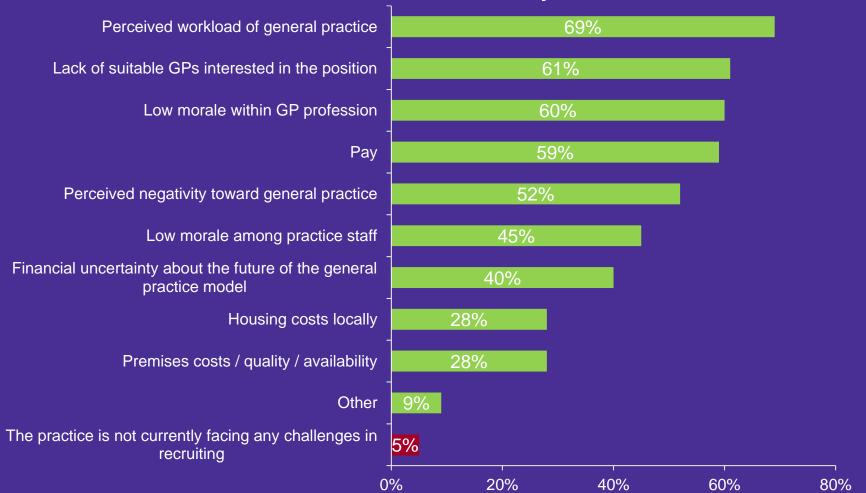
No practices have concrete plans to suspend their GP contract and join an ICP or ICS in the next 3 years. Although six in ten provide a definite 'no', one in ten say they wouldn't rule it out.



Q9b. Does the practice have plans to suspend its GP contract and join an ICP/ICS (Integrated Care Plan / Integrated Care System) in the next three years? Base: All practices (n=270)



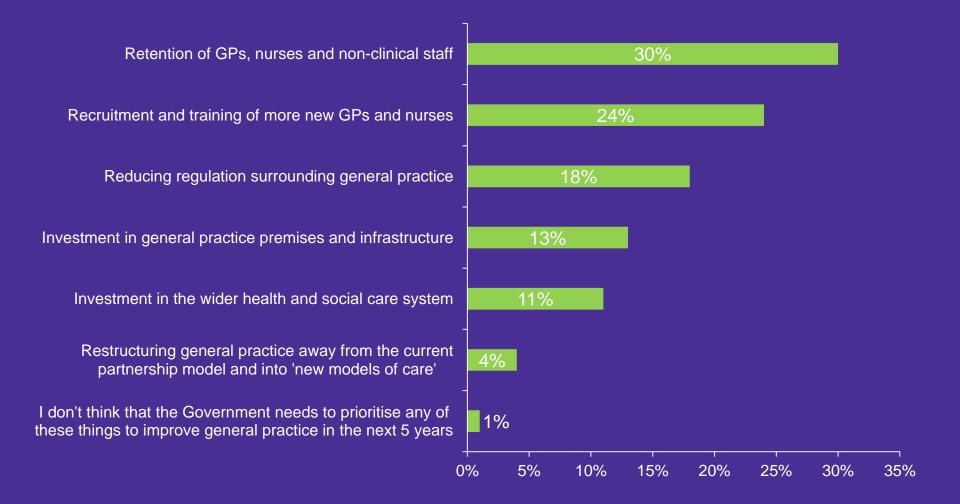
Seven in ten practices say the perceived workload of general practice is a factor preventing or hindering staff recruitment, with 5 of the 9 factors listed registering more than half saying it is hindering recruitment. Fewer than one in ten practices report not facing any challenges in recruitment currently.



Q10a. What factors, if any, are currently preventing / hindering staff recruitment to the practice? Base: All practices (n=270)



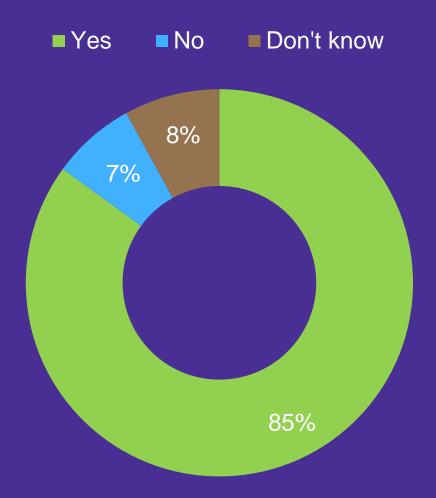
Just under a third of practices think the government should prioritise retention of GPs, nurses and non-clinical staff in the next 5 years, with a quarter citing recruitment and training of more new GPs and nurses. Only 1% think the government don't need to prioritise any of these.



Q17. Which one of the following areas, if any, do you think the Government should prioritise first in order to improve general practice in the next 5 years? Base: All practices (n=270)



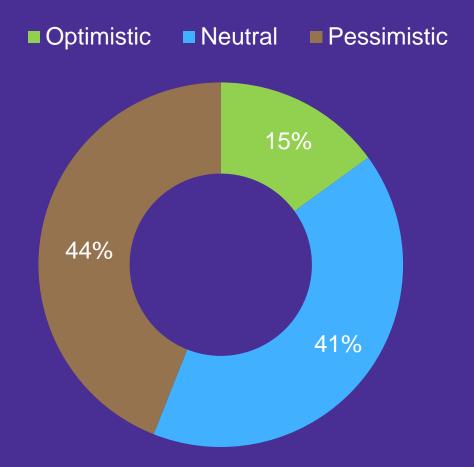
More than four in five practices say they are experiencing workload shift from secondary care providers.



Q47/36. Are you experiencing workload shift from secondary care providers? Base: All practices (n=270)



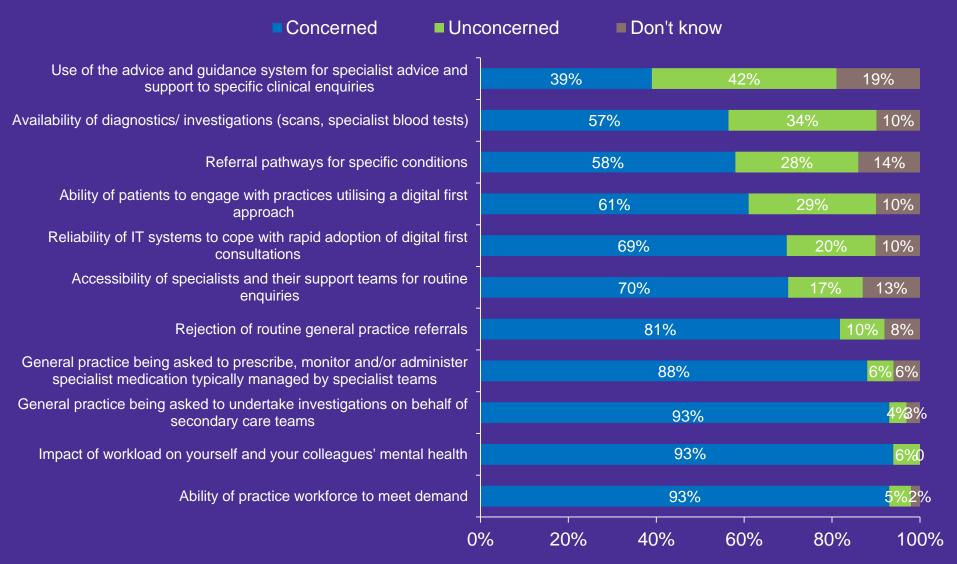
There is a range of opinion from practices in terms of their ability to safely meet patient need over the coming months (until June 2023), with only one in six saying that they are optimistic, while more than two in five say they are pessimistic.



Q48/37. How do you feel about being able to safely meet patient need over the coming months (until January 2023)? Base: All practices (n=270)



At least half of practices say they are concerned about all but one of the issues tested, especially those relating to increasing responsibilities placed on the profession typically managed by specialist or secondary care teams, mental health, and workforce capacity.

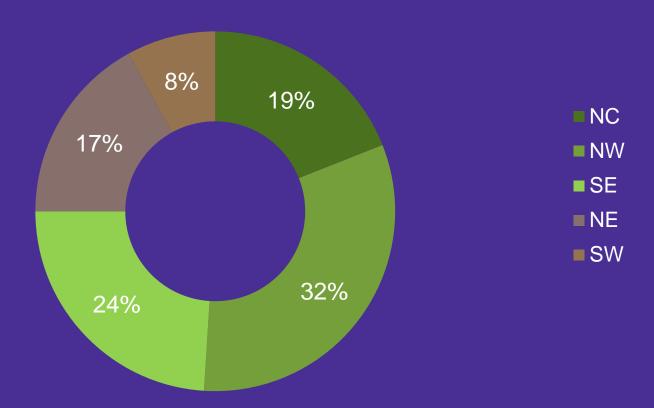


Q49/38. How do you feel about the following issues? Base: All practices (n=270)





# **APPENDIX I: Member Practice Responses**by STP region in London



The LLMC member practices that took part in this survey account for approximately 2,861,922 registered patients across the five London regions. This includes approximately 811,972 patients in NW, 677,733 patients in SE, 632,980 patients in NC, 527,238 patients in NE and 212,000 patients in SW.

Q1. Which local area is the practice based in? Base: All practices (n=270)

