



## The working life of a GP during the pandemic

Dr Tina Agrawal is a GP in Camden and Co-chair of Camden Local Medical Committee, here she shares how her working life has changed significantly since the start of the pandemic. The current pressures on GPs mean they are working over and above what would usually be defined as safe working limits, making hundreds of decisions per day, decisions that have a significant impact on their patients' health.

### Working day

My day typically starts quite early around 6:00am as I'm often checking my emails and medical WhatsApp groups, this is to get up to speed with the latest NHS England and local communications. Throughout the pandemic, WhatsApp has become an increasingly important tool for NHS leaders to communicate new information and cascade up-to-date guidance to GPs, particularly around rapidly changing areas such as the Covid vaccination programme and pandemic working arrangements.

After dropping my kids at school for 7:40am I aim to get into work for 8:00am. I work alongside the other GP partner at the practice, together we both work 11-12 hours, four days a week on site, and one 11-12 long day off site. In addition, we often work on weekends. This weekend work is to catch up on correspondence we did not have time to address during the week & to help make Mondays more bearable. For example by clearing pathology results (including Covid test results), documents sent by NHS 111, hospital letters, emails and online consultation triage requests.

The irony is that I am working over 60hr a week but my patients think I am part time as they can't see me for those 60 hours and underestimate the workload behind the scenes.

We are often working at quite a high speed to process these complex results, there is the potential of items being missed which is why we have to concentrate fully to ensure safety. However, there is just never enough time in the day and that the work continues to be added to, and doesn't seem to abate. We all feel like we are constantly in a pressure cooker environment. This is the same for all members of the team from reception to GPs.

### Admin/system management

Three to four hours each day is spent on admin which involves reviewing patient results and managing patient prescriptions. This in turn generates around a further one to two hours more work to follow up on, that is to contact the patient to explain results, manage their care needs or to follow up with the hospital team or to organise onward care for your patients. Admin staff are always on site to monitor this process, however there are a number of decisions that require clinical input. Our reception team are often very busy answering over 300 calls a day. We do our very best as a team right from reception through to the doctors, but in a system under pressure, having to cater to an incredible unmet need for access – we find we are often being shouted at or complained about which makes for an incredibly demoralising work atmosphere.

### Patient consultations and follow-ups

Each day I spend 18-20 minutes per patient on phone or face-to-face, this also includes home visits on occasion (these usually take longer), when the NHS expects me to average 10 minutes per patient. The patient safety angle is always there and as GPs a big part of the job is multitasking and supporting other members to ensure they're able to do their jobs. Queries are coming in from reception staff whilst we're in the middle of consultations and we often have three different conversations going on at once.

Patients are frequently unaware of the amount of work that goes on behind the scenes at a GP practice and often the GP is the person who has to explain that hospitals have limited access to certain specialist care, and deal with the patient's frustrations around this. The whole NHS struggles with resources and for many people their GP is the face of the NHS they know.

The referral system as engineered by NHS England pre-pandemic and aimed to enable the right patient getting the right care at the right time, but due to the pandemic hospital waiting lists are now incredibly long. We sometimes have patients who are upset about waiting a day or two to be seen by a GP, however the reality of the backlog in hospital and the wait to see a specialist is so much more now.

### Patient expectations during the pandemic

Government, politicians and the media have been careless and not communicated an accurate picture of how general practice is operating, this has had a significant impact on the doctor-patient relationship with a surge of abuse and aggression being directed at GP practices. The pressure cooker environment was never great for recruitment and retention, but this new blow has hit morale hard, with many colleagues struggling to find the good will with which they have somehow persevered working at this pace for the past 18 months.

Despite stories to the contrary, every GP surgery has remained open throughout the pandemic, but it is working in a different way. At the height of the pandemic there were patients who didn't want to seek help from their GP through fear of burdening the NHS and were in turn putting their own

health at risk. During this time my team and I proactively contacted our vulnerable patients to check on their wellbeing, to ensure we could do everything within our power to support them with their care needs and their families through those arduous months.

Then and now we continue to run searches through our practice systems, to ensure that we're managing complex conditions properly. Sometimes we may see in the system that there those we haven't been in touch with for a while, or that their care could be improved, if that's the case we make efforts to contact them and organise follow-up proactively. Where there is hesitancy, we try our best to reassure them that it is safe to see us. This aspect of how GPs work to keep their patients safe goes unseen. I also with I had more time to offer more proactive care than always reacting to the constant change in politics, policy & demands on our time.

We do try really hard to not make any mistakes, but the risk grows as our workload increases to more unsustainable levels and as we are faced with fewer and fewer GPs who feel able to continue working under such pressures. If general practice is to deliver the service that patients need, with the highest standards of safety, there needs to be proper resourcing of the core service. Patients also need an honest explanation from Government, politicians and the media about what they can expect from their GP in these unprecedented times. GPs and their teams have faced an extremely challenging time during the Covid-19 pandemic. The restrictions have meant that face-to-face contact with patients has been limited in order to keep practice staff and patients safe.

The BMA have launched the 'Support Your Surgery' campaign, which aims to provide patients with the reality of issues facing general practice. Alongside this, they have launched a petition calling on the UK Government to provide the urgent resourcing needed to increase the number of GPs in England. Do consider signing the petition, which can be found [here](#).