

## Londonwide LMCs' Workforce Survey

Wave 9, January 2020 Selected slides for circulation



#### **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.
- We have marked only those changes between the current and first wave of this research where such
  changes are at a level that is statistically significant, rather than as a result of sample variance.



#### Methodology

The Londonwide LMCs' Workforce Survey was completed by Practice Managers and Principal GPs from member practices across London.

The survey was conducted online between 18<sup>th</sup> November – 13<sup>th</sup> December 2019, with a total of 388 responses from 328 individual member practices. Of Londonwide LMCs' 1,187 member practices were invited to participate in the research, this represents a response rate of 28%. The previous waves of this research were conducted between 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.

This survey was conducted by Savanta ComRes on Londonwide LMCs' behalf.

Area	# of practices that responded
North East	53
South West*	23
South East	85
North Central	59
North West	108
TOTAL	328

\*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.



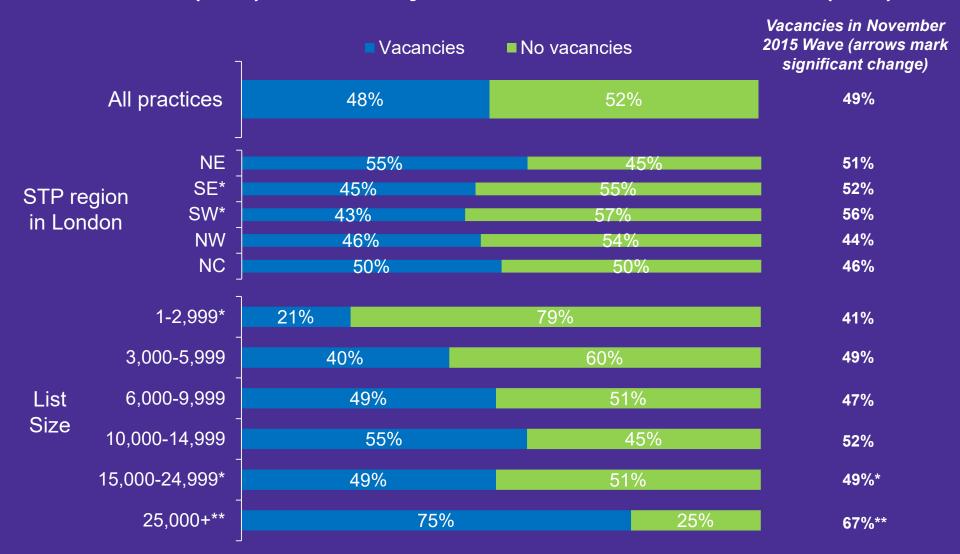
#### The proportion of practices who say they are a GP federation member, or that they share clinical or non-clinical practice staff with other practices, has increased significantly since November 2015



In total, 249 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 2,405,117 registered patients.



#### Practices in North East London are the most likely to say they have any vacancies (55%), followed by those in North Central London (50%)



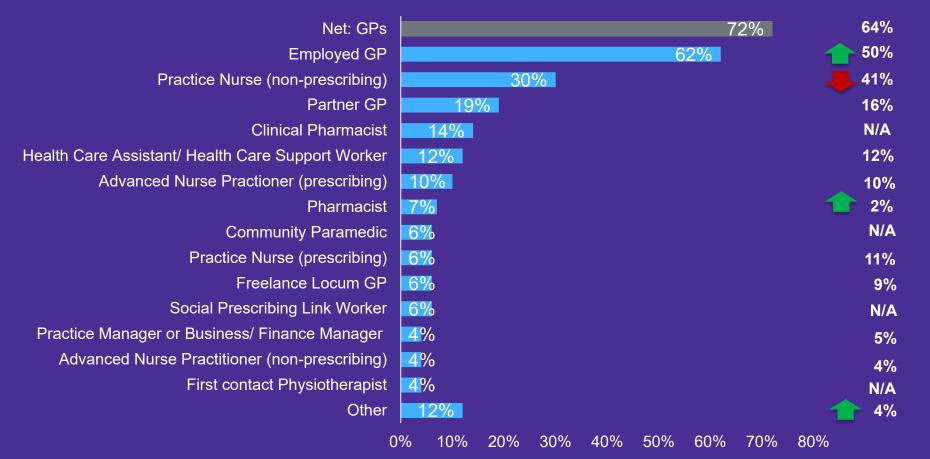
Q5. Does the practice currently have any GP / practice nurse vacancies, or other vacancies? Base: All practices (n=328), SE (n=85), SW (n=23\*), NC (n=59), NW (n=108), NE (n=53), 1-2,999 (n=11\*), 3,000-5,999 (n=70), 6,000-9,999 (n=134), 10,000-14,999 (n=77), 15,000-24,999 (n=32), 25,000+ (n=4\*\*)



#### Practices are more likely to say that they have an unfilled employed GP post than any other position, and this proportion is significantly higher than in November 2015

Showing most common unfilled posts among practices that currently have vacancies

November 2015 Wave (arrows mark a significant change)



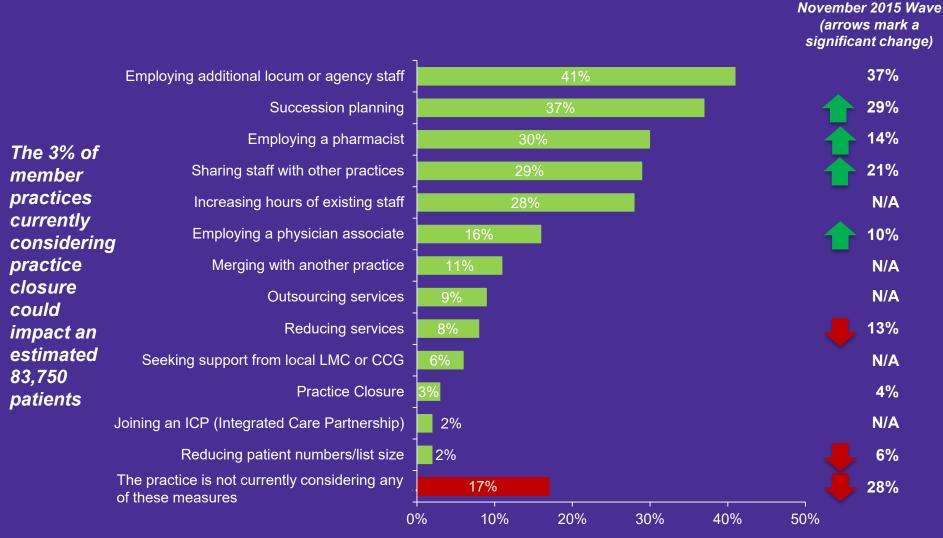
Q6a. What positions, if any, are currently vacant at the practice? Base: All practices that have current vacancies (n=156)



<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

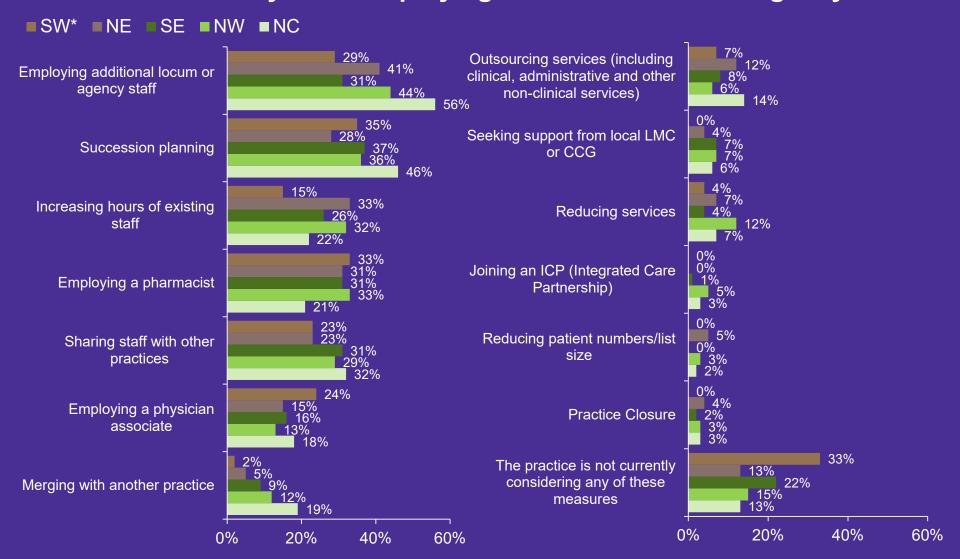
While employing additional locum or agency staff continues to be the most common action practices are considering to manage vacancies (41%), a greater proportion are sharing staff with other practices (29%) than in November 2015 (21%)



Q7. What actions are currently being considered within your practice to manage current and future vacancies? Base: All practices (n=328)



The actions being considered by each practice to manage current and future vacancies vary considerably by region, with practices in North West London most likely to be employing additional locum or agency staff

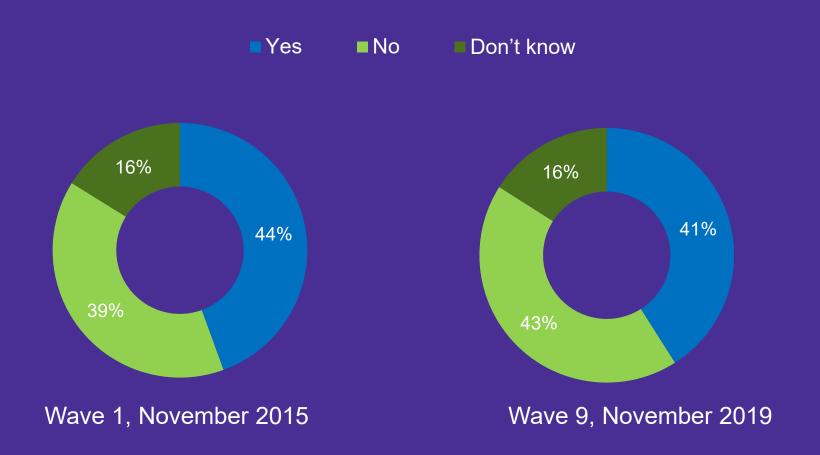


Q7. What actions are currently being considered within your practice to manage current and future vacancies? Base: SE (n=85), SW (n=23\*), NC (n=59), NW (n=108), NE (n=53)





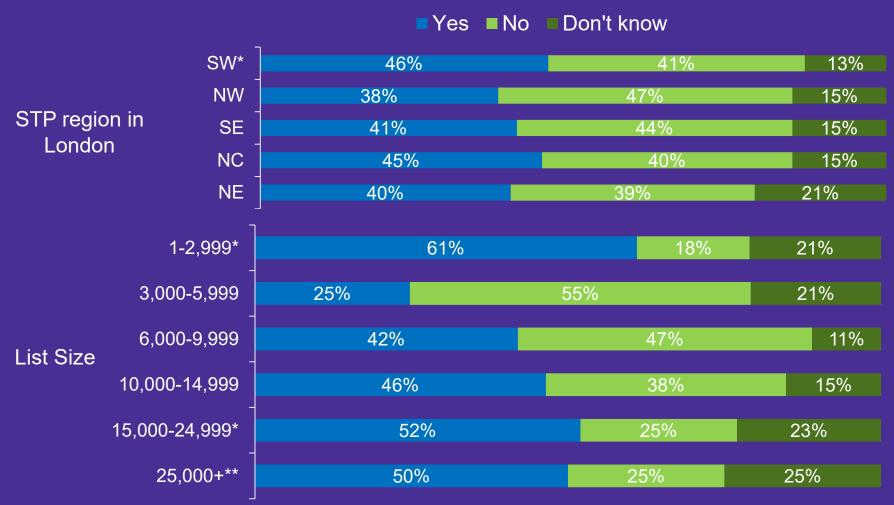
## The proportion of practices that say they have GPs planning on retiring in the next three years has seen little change between November 2015 and November (44% vs. 41% respectively)



Q8a. Does the practice currently have any GPs planning on retiring in the next 3 years? Base: All practices Base: All practices in Wave 9 (n=328); all practices in Wave 1 (n=644)



Practices with patient list sizes of 3,000-5,999 are least likely to say they have at least one GP planning on retiring in the next three years (25%), whereas practices with patient list sizes of under 3,000 are the most likely (61%\*)

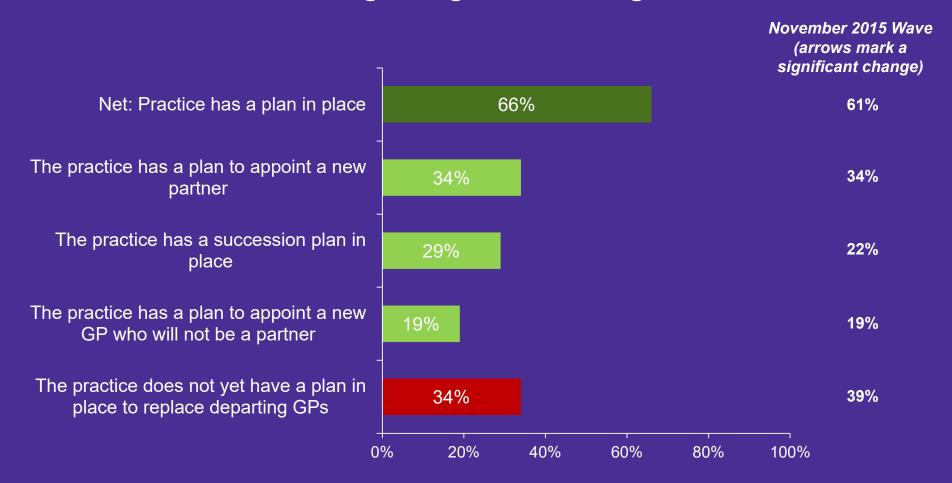


Q8a. Does the practice currently have any GPs planning on retiring in the next 3 years? Base: All practices in; SE (n=85), SW (n=23\*), NC (n=59), NW (n=108), NE (n=53); 1-2,999 (n=11\*), 3,000-5,999 (n=70), 6,000-9,999 (n=134), 10,000-14,999 (n=77), 15,000-24,999 (n=32\*), 25,000+ (n=4\*\*)





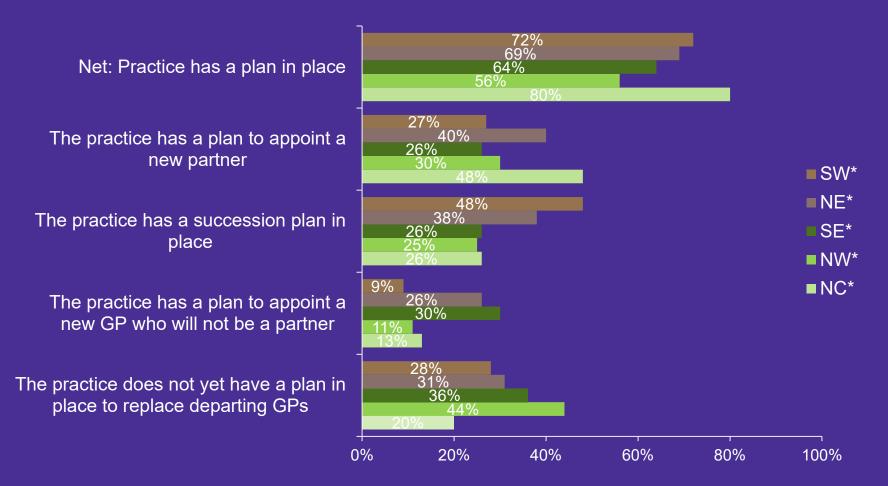
### Two thirds (66%) of practices who say they have GPs planning to retire in the next three years say that they have a plan in place to replace them, showing no significant change to 2015



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=134)



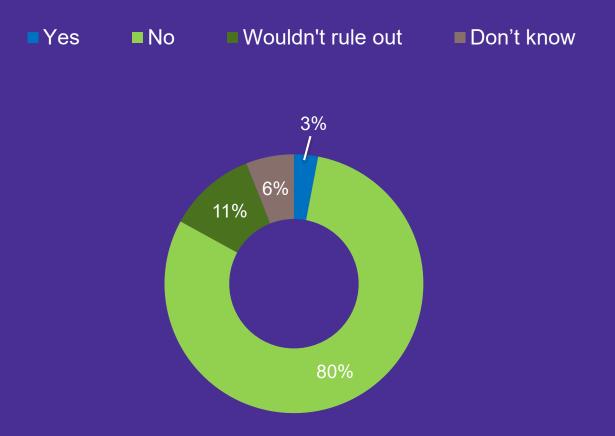
# Practices in North Central London with GPs planning on retiring in the next three years are the most likely to say that they have a plan to appoint a new partner (48%) while those in the South West are most likely to say they have a succession plan in place (48%)



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=11\*), NW (n=41\*), NC (n=27\*), NE (n=21\*), SE (n=35\*)



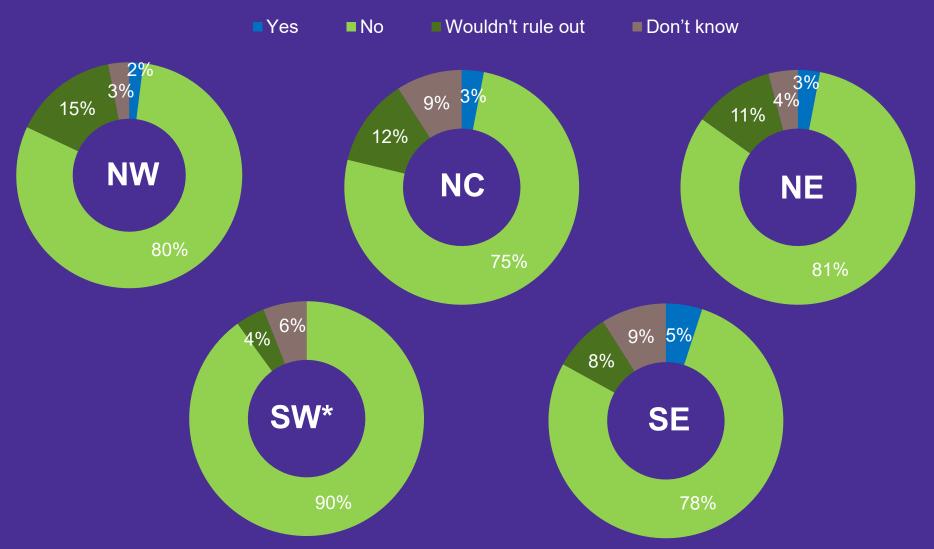
## Four in five (80%) practices say they do <u>not</u> have plans to terminate their GP contracts in the next three years, and while just 3% say they have plans to do so, one in ten (11%) say they wouldn't rule it out



Q9a. Does the practice have plans to terminate its GP contract in the next three years? Base: All practices (n=328)



#### While 5% of practices in South East London say they have plans to terminate their GP contract in the next three years, no practices in South West London report that they have plans



Q9a. Does the practice have plans to terminate its GP contract in the next three years? Base: All practices in SE (n=85), SW (n=23\*), NC (n=59), NW (n=108), NE (n=53)



#### Practices with the smallest list size of 1-2,999 (60%\*\*) are the most likely to have GPs retiring in the next three years and say they are terminating their GP contract in this time

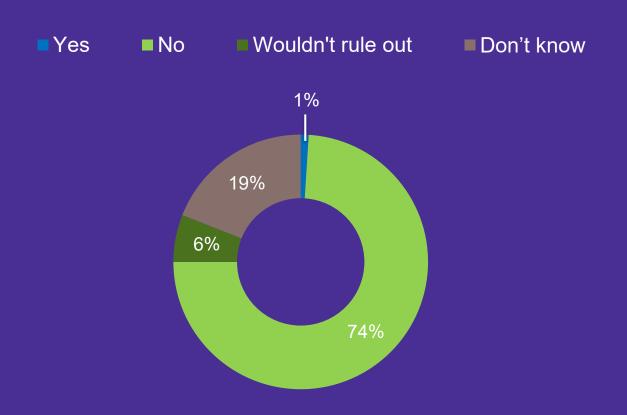
Showing plans to terminate GP contracts amongst practices who have any GPs planning to retire within the next three years



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=11\*), NW (n=41\*), NC (n=27\*), SE (n=35\*), NE (n=21\*), 1-2,999 (n=7\*\*), 3,000-5,999 (n=17\*), 6,000-9,999 (n=56), 10,000-14,999 (n=36\*), 15,000-24,999 (n=16\*), 25,000+ (n=2\*\*)

The professional voice of London general practice

Three quarters (74%) of practices say they do not have plans to suspend their GP contract and join an ICP/ICS in the next three years, one in five (19%) say they don't know, and just 1% say they have plans to do so



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=328)

