

Londonwide LMCs' Workforce Survey

Wave 10, January 2021



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 24th November – 14th December 2020, with a total of 384 responses from 316 individual member practices. Of Londonwide LMCs' 1,100 member practices that were invited to participate in the research, this represents a response rate of 29%. Of Londonwide LMCs' total universe of 1,166 member practices, this represents a response rate of 27%. The previous waves of this research were conducted between 18th November – 13th December 2019, 28th May and 21st June 2019, 21st November and 13th December 2018, 6th and 25th June 2018, 6th December 2017 and 5th January 2018, 31st May and 20th June 2017, 25th November and 12th December 2016, 25th May and 10th June 2016 and 23rd November and 8th 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*	39
South West*	31
South East	70
North Central	74
North West	102
TOTAL	316

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.



Most practices are PCN and GP federation members but the proportion with an active and engaged PPG has decreased since Wave 1. In contrast, the proportions who are training practices and who share clinical and non-clinical staff with other practices have increased.

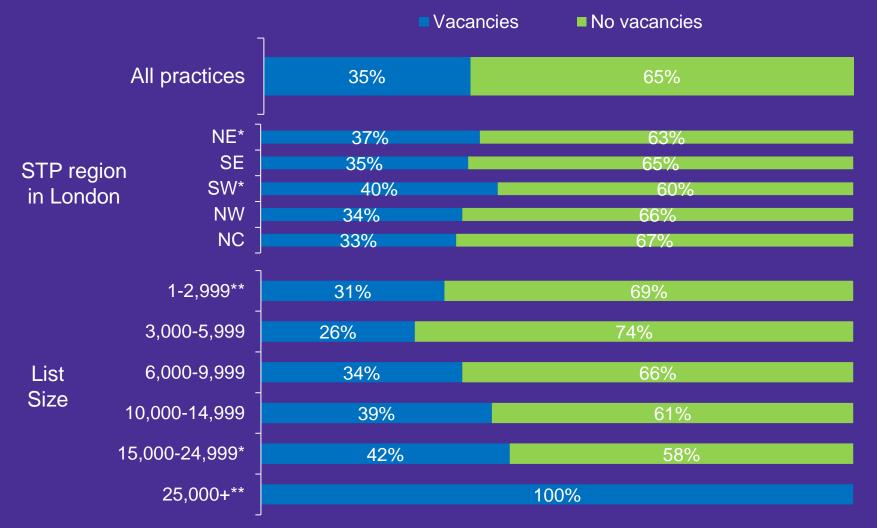


In total, 200 of the member practices that took part in this survey say they have an active and engaged patient participation group; in total these practices have approximately 2,096,375 registered patients.

Q2. Which of the following, if any, applies to the practice? Base: All practices (n=316) www.lmc.org.uk



Just over a third of practices have current vacancies. This is fairly consistent among the STP regions but tends to be higher among practices with 10,000+ patient lists.



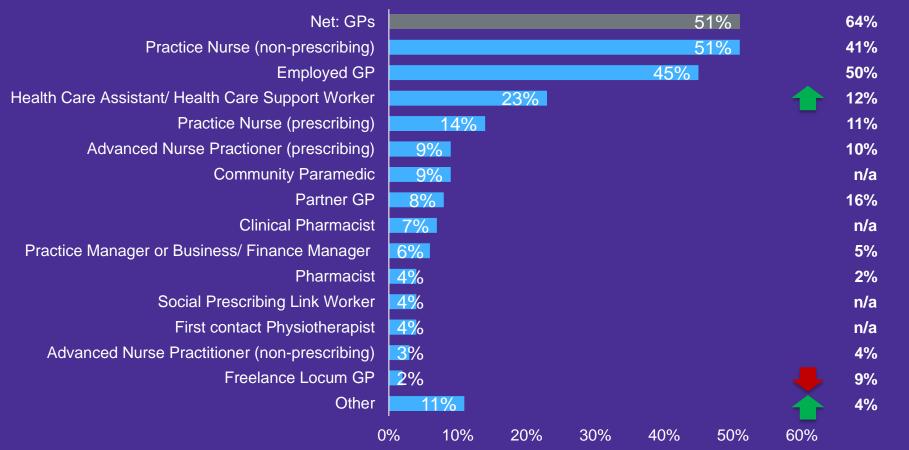
Q5. Does the practice currently have any GP / practice nurse vacancies, or other vacancies? Base: All practices (n=316), SE (n=70), SW (n=31*), NC (n=74), NW (n=102), NE (n=39*), 1-2,999 (n=7**), 3,000-5,999 (n=64), 6,000-9,999 (n=121), 10,000-14,999 (n=84), 15,000-24,999 (n=38*), 25,000+ (n=3**)

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Current vacancies are most common among employed GPs and non-prescribing practice nurses. More practices report unfilled health care assistant or support worker posts than in Wave 1 while fewer report unfilled freelance locum GP posts.

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=111)

⁺ Updated from 'Health Care Assistant' to 'Health Care Assistant / Health Care Support Worker' in Wave 7

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

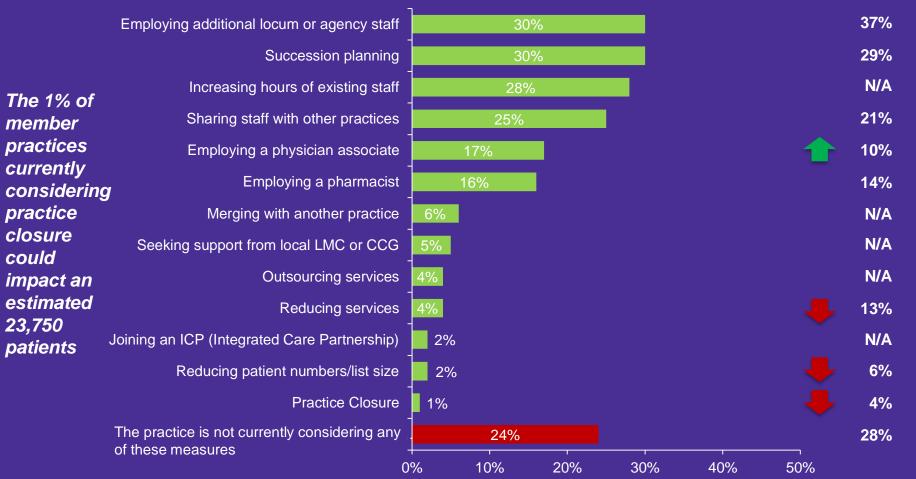
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November 2015 Wave

(arrows mark a significant change)

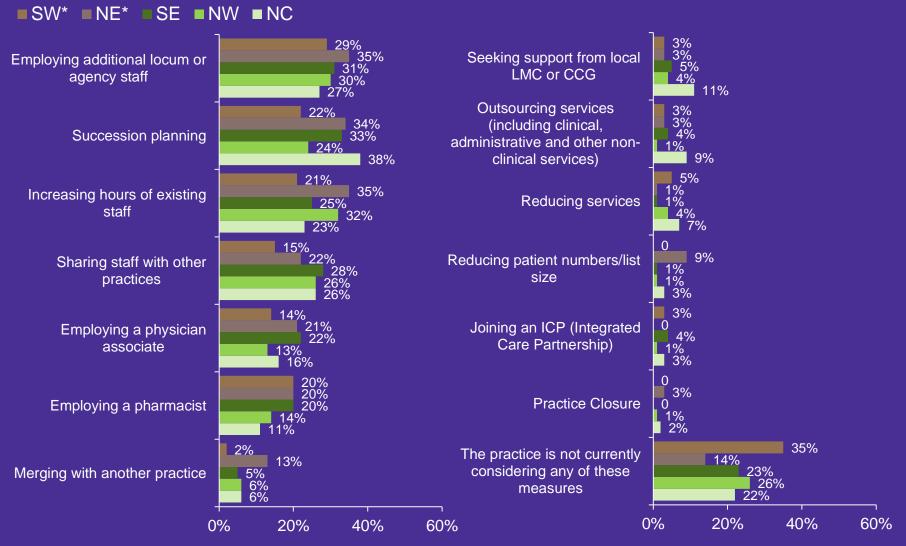
Fewer practices report that they are reducing their services or patients, or considering practice closure, to manage vacancies compared to Wave 1.

November 2015 Wave (arrows mark a significant change)



Q7. What actions are currently being considered within your practice to manage current and future vacancies? Base: All practices (n=316)

Practices in the North East 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.

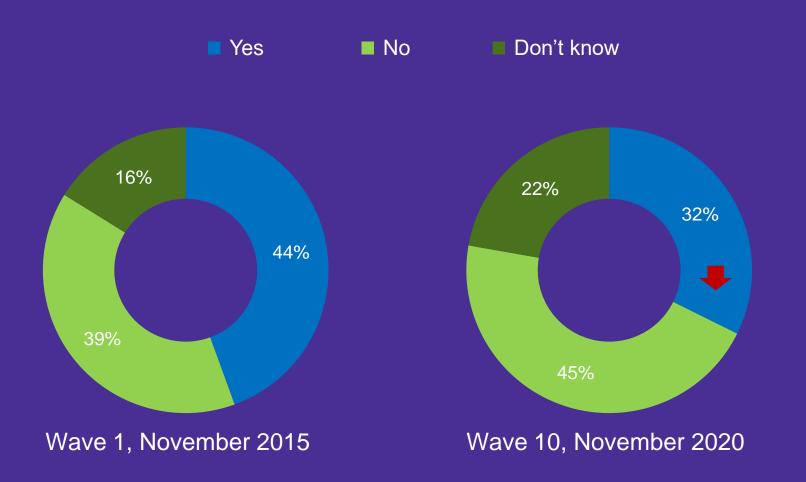


Q7. What actions are currently being considered within your practice to manage current and future vacancies? Base: SW (n=31*), NW (n=102), NC (n=74), SE (n=70), NE (n=39*)

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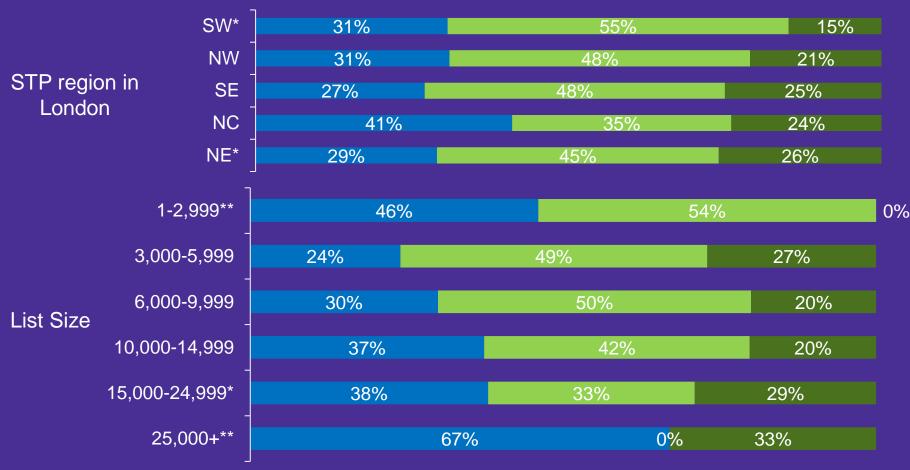
Wave 10 data suggest that about a third of practices have GPs planning to retire in the next three years compared to approaching half of practices who said this in Wave 1.



Q8a. Does the practice currently have any GPs planning on retiring in the next 3 years? Base: All practices in Wave 10 (n=316); all practices in Wave 1 (n=644)



Practices which do report having any GPs planning to retire in the next 3 years are most likely to be in the North Central STP region and tend to have either the smallest or largest list sizes (though base sizes for practices of these size are very low).

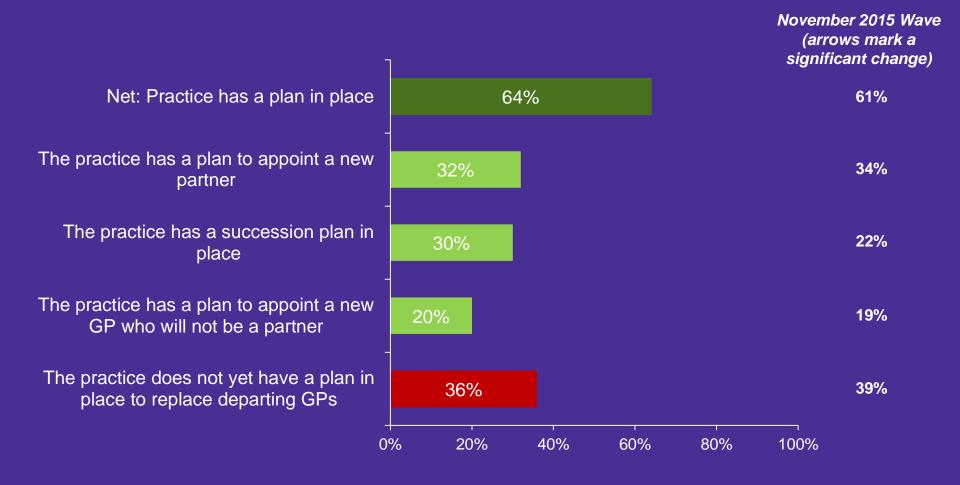


■ Yes ■ No ■ Don't know

Q8a. Does the practice currently have any GPs planning on retiring in the next 3 years? Base: All practices in; SE (n=70), SW (n=31*), NC (n=74), NW (n=102), NE (n=39*); 1-2,999 (n=7**), 3,000-5,999 (n=64), 6,000-9,999 (n=121), 10,000-14,999 (n=84), 15,000-24,999 (n=38*), 25,000+ (n=3**)



In line with Wave 1, most practices in Wave 10 say that they have a plan in place to replace GPs retiring within the next 3 years, although over a third say they do not.



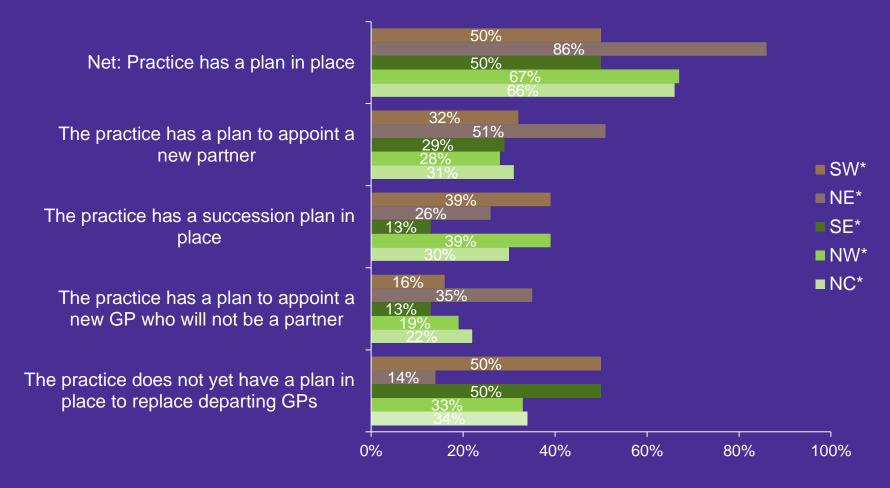
Q8b. You said that the practice currently has GPs who are planning to retire within the next 3 years. Which of the following apply to the practice? Base: All practices who said they have GPs planning to retire in the next three years (n=102)

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Practices in the North East STP area are most likely to say that they have a plan in place to replace GPs retiring within the next 3 years, whereas those in Southern STP regions are most likely to say they do not.



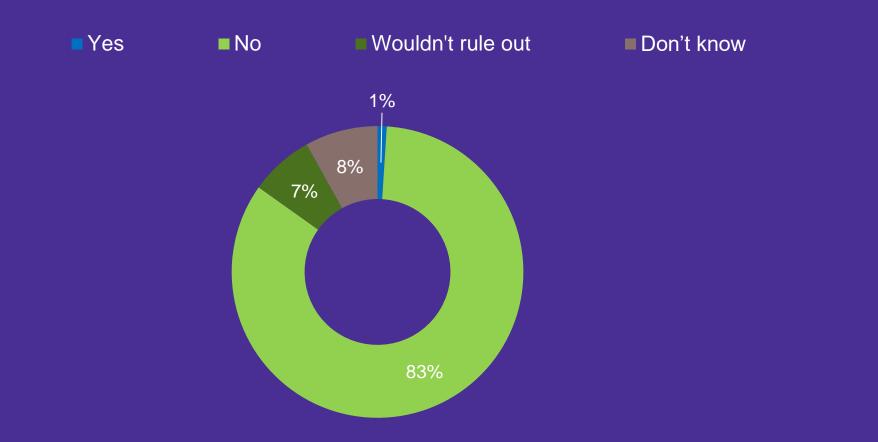
Q8b. You said that the practice currently has GPs who are planning to retire within the next 3 years. Which of the following apply to the practice? Base: All practices with GPs planning to retire in the next three years; SW (n=10*), NW (n=32*), NC (n=31*), NE (n=19*), SE (n=19*)

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Five in six practices say they have no plans to terminate their GP contract in the next 3 years. A minority are unsure or would not rule it out, while only 1% do have plans to.



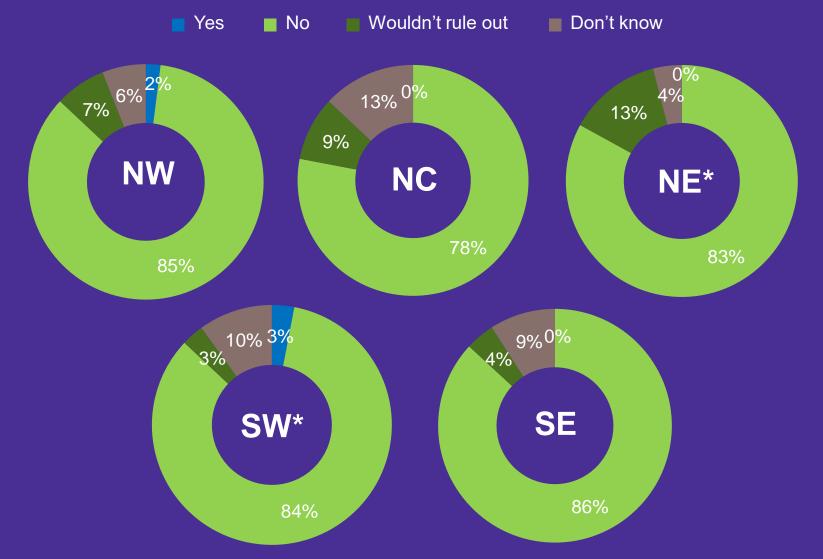
Q9a. Does the practice have plans to terminate its GP contract in the next three years? Base: All practices (n=316)



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Practices in the North Central STP area appear least certain about whether or not they have plans to terminate their GP contact in the next 3 years.



Q9a. Does the practice have plans to terminate its GP contract in the next three years? Base: All practices in SE (n=70), SW (n=31*), NC (n=74), NW (n=102), NE (n=39*)

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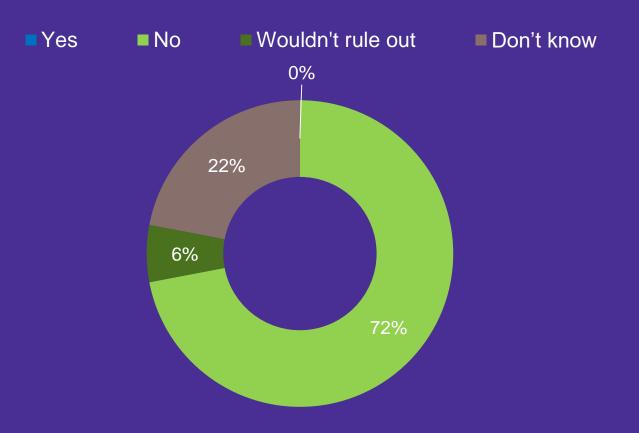
The few practices which currently indicate they have plans to terminate their GP contact in the next 3 years are in the North West STP area and have a list size of 6,000-9,999.

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=10*), NW (n=32*), NC (n=31*), SE (n=19*), NE (n=12*), 1-2,999 (n=3**), 3,000-5,999 (n=15*), 6,000-9,999 (n=36), 10,000-14,999 (n=31*), 15,000-24,999 (n=14*), 25,000+ (n=2**)

No practices have concrete plans to suspend their GP contract and join an ICP or ICS in the next 3 years. Although most provide a definite 'no', around a quarter say they don't know.



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=316)

