

## Blog no 3 – The GP Partnership Review

### Small practices

The Review was established at the beginning of June we have visited many parts of the country. We have engaged with a wide variety of GPs, Practice Managers and others who work with general practice. This has supported the themes that we have previously described in our Key Lines of Enquiry Document.

Recently I have been asked about the future of small practices and where do they sit within the partnership review.

One of the great strengths in general practice has always been the diversity that we offer. This can range from small practices of 2,000 patients to super practices which cover populations of 400,000 plus such as Our Health Partnership in Birmingham. It is vital that general practice should provide high quality, personalised care that meets the needs of the registered population and makes effective use of local services. Does size matter? Well the simple answer is, it depends, as practices we have never worked in isolation, we form an important part of a local health economy whether we work in a small or large practice.

We know that continuity of care improves health outcomes and is something that patients value and improves job satisfaction for GPs. Continuity of care and the feeling of a team approach has often been seen to be easier to deliver in smaller practices whereas larger practices can become impersonal, giving individual GPs less say and making continuity of care more difficult. It is interesting to see some large partnerships are forming smaller teams within their practices to try to ensure they deliver continuity of care.

We are seeing some small practices merge to give themselves greater security for the future, but does this really provide security? One has to look at individual organisations ability to deliver a service, meet the burden of regulation that occurs within any small business and the ability to recruit and retain enough staff to meet the demand. This may be easier to achieve in larger organisation but does not mean that small practices don't have an important part to play in the future of the NHS.

Last week we met with the Family Doctors Association which represents many small practices and GPs who work in small practice. We had a very constructive dialogue about the purpose of the GP Partnership Review and the positive contribution small practice make to the NHS.

A recent report by the Commonwealth Fund, an independent 'Think Tank' based in the USA, showed that the NHS was one of the most cost-effective health care system in the world that offered good access to Primary Care but we were doing less well in terms of patient outcomes and of the 11 most developed countries in the World, the UK was rated 10<sup>th</sup>. The NHS therefore has a challenge about how it improves outcomes for the population and at the same time become less dependent on hospital-based care.

The foundation of the NHS is general practice and the registered list but general practice cannot continue coping with the ageing population and rising demand without additional resources to do this, if you add to this challenge, the need to provide more services in the community rather than expand capacity within hospitals, there needs to be a greater focus on practices working together in natural communities of care (consisting of populations of 30-50,000) with additional services embedded in practices and supporting them to improve the outcomes for their population.

This coming together of practices in a natural community could be achieved by practices merging together to form one practice but equally smaller practices could work together in a 'network', to achieve similar outcomes. We need to start seeing the potential of additional resources being made available at a local level as a potential benefit to our practices. With adequately resourced clinical leadership we can use existing resources more effectively and with additional resources this will help to support practices and may be one way that the partnership model can be revitalised.

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