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PRIMARY COLOUR

Helen Salisbury: Taking risks with our health service

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Medicine is an inherently risky business. One way to reduce risk would be to test every patient for every possible cause of their symptoms at first presentation, but this would be expensive, lead to over-investigation, create anxiety, and overwhelm our system.¹ GPs are expert at picking out the potentially seriously ill patients from those with self-limiting symptoms and knowing which slightly abnormal laboratory tests need following up and which can be safely ignored. This isn't always simple, and doctors new to primary care take time to develop trust in their clinical judgment and stop requesting endless blood tests and x rays for every patient. We think about risk all the time and have to learn to be comfortable with uncertainty.

In this context I was interested to learn that Richard Meddings, the current chair of NHS England, is also (according to its website) chair of the risk committee at the beleaguered Credit Suisse bank.² This institution has just been forced into a merger with another bank amid fears of insolvency and the threat of a wider banking crisis.³ Meanwhile, in his role at NHS England, Meddings is advocating shorter training for doctors, according to comments made at a meeting hosted by the Social Market Foundation think tank. Reportedly, he regards doctors as over-qualified for the work that they do and thinks that more of our work could be done by non-medically trained staff, such as physician associates.⁴

We clearly have a staffing crisis in the NHS, with fewer doctors per head of population than other developed nations and a stubbornly high vacancy rate.^{5 6} However, the solution is not to accelerate the flow of new doctors entering the service by shortening training—even if this could be done safely—but to find a way to stop people leaving. Last year one in five GPs under the age of 30 quit the profession.⁷

It makes no sense in terms of money and effort—not to mention personal distress—to keep training people, only to lose them in a few years through burnout and disillusionment. A recent international survey reported by the Health Foundation found that GPs in the UK had the highest stress levels and lowest job satisfaction when compared with colleagues in other high income countries.⁸ The only positive point was that UK GPs felt well prepared to manage long term conditions and mental health problems—but presumably not for long if we cut their training.

You might ask, why is a banker in charge of NHS England in the first place? If the purpose was to improve the health of our nation, one might expect to find someone with deep knowledge and experience of healthcare in that role. The current post holder may have expertise, or at least experience, in

financial risk management, but does that qualify him to take risks with our health service?

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