

# Londonwide LMCs' Workforce Survey

Wave 18, November 2024

Slides for circulation (include comparisons from earlier survey waves)



#### 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.
- For this wave, rather than marking statistically significantly different changes between the current and first wave of this research per slide, as we have done previously, we have created a slide (4) to show specific changes over time.



#### Methodology

The Londonwide LMCs' Workforce Survey was completed by Practice Managers and Principal GPs from member practices across London. This survey was conducted by Savanta on Londonwide LMCs' behalf.

The survey was conducted online between 19<sup>th</sup> November – 9<sup>th</sup> December 2024, with a total of 209 responses from 193 individual member practices. Of Londonwide LMCs' 1,120 member practices that were invited to participate in the research, this represents a response rate of 22%. The previous waves of this research were conducted between 28<sup>th</sup> May – 18<sup>th</sup> June 2024, 21<sup>st</sup> November – 4<sup>th</sup> December 2023, 30<sup>th</sup> May – 20<sup>th</sup> June 2023, 22<sup>nd</sup> November – 12<sup>th</sup> December 2022, 15<sup>th</sup> June - 5<sup>th</sup> July 2022, 29<sup>th</sup> November – 17<sup>th</sup> December 2021, 8<sup>th</sup> June – 27<sup>th</sup> June 2021, 24<sup>th</sup> November – 14<sup>th</sup> December 2020, 18<sup>th</sup> November – 13<sup>th</sup> December 2019, 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.

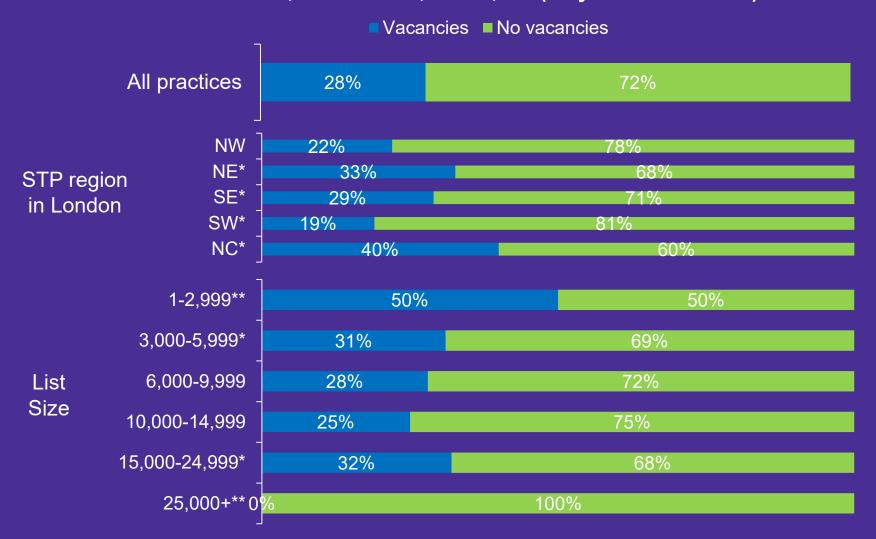
Area	# of practices that responded
North East	40*
South West	21*
South East	43*
North Central	30*
North West	59
TOTAL	193**

\*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 10 or less.

\*\*Methodological note on data disparity: in this report, the specified total # of practices that responded (193) can differ slightly from the manually calculated sum of the individual STP area totals. This reflects the rounding used by the survey to accommodate multiple practice responses and is **NOT** an error.



Three in ten practices have current vacancies. Practices in the NC and NE STP regions are more likely to have vacancies. Vacancies are most likely in practices with patient list size of 1-2,999\*\* and 15,000-24,999 (very small base size).

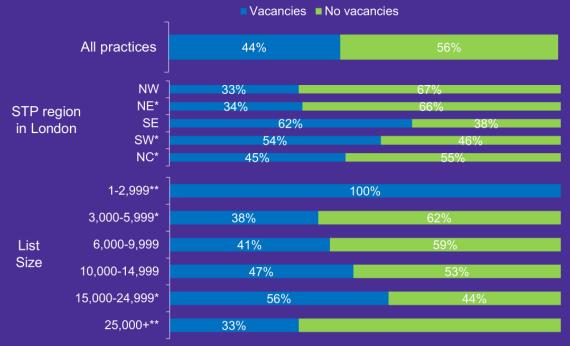


Q5. Does the practice currently have any GP / practice nurse vacancies, or other vacancies? Base: All practices (n=193), SE (n=43\*), SW (n=21\*), NC (n=30\*), NW (n=59), NE (n=40\*), 1-2,999 (n=2\*\*), 3,000-5,999 (n=26\*), 6,000-9,999 (n=81), 10,000-14,999 (n=55), 15,000-24,999 (n=29\*), 25,000+ (n=1\*\*)



### Compare previous slide - December 2024 With this slide - December 2023

More than two in five practices have current vacancies. Vacancies tend to be more likely in the South East and South West STP regions, and the likelihood of having vacancies increases with list size except for 1-2,999 and 25,000+ (very small base size)



Q5. Does the practice currently have any GP / practice nurse vacancies, or other vacancies? Base: All practices (n=234), SE (n=65), SW (n=28\*), NC (n=41\*), NW (n=91), NE (n=48\*), 1-2.999 (n=1\*\*), 3.000-5.999 (n=30\*), 6.000-9.999 (n=106), 10.000-14.999 (n=59), 15.000-24.999 (n=35\*), 25.000+ (n=3\*\*)

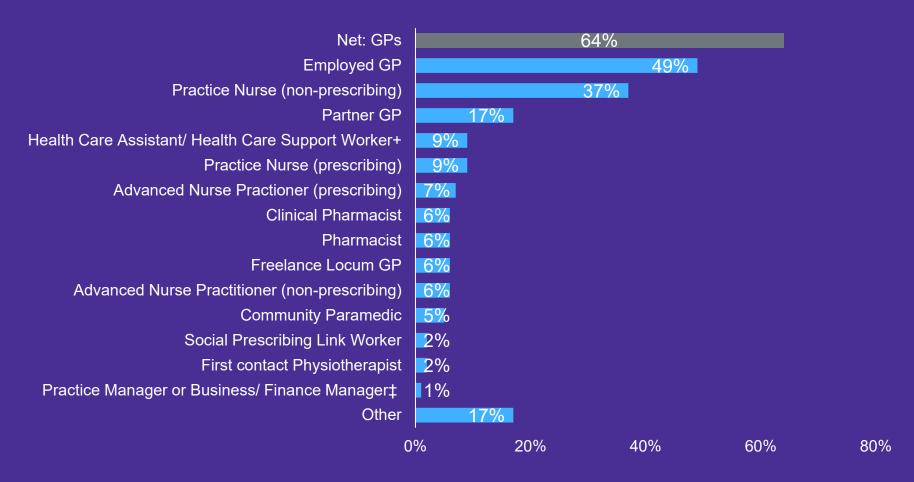
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## Employed GPs and non-prescribing practice nurses are the most common type of vacancy, with just over three in five practices reporting any type of GP vacancy.

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=55)



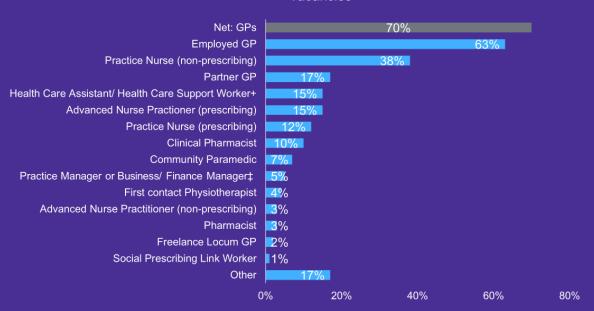
<sup>&</sup>lt;sup>+</sup> Updated from 'Health Care Assistant' to 'Health Care Assistant / Health Care Support Worker' in Wave 7

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

### Compare previous slide – December 2024 With this slide – December 2023

Employed GPs and non-prescribing practice nurses are the most common form of vacancy, with seven in ten practices reporting any type of GP vacancy.

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=103) 

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

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

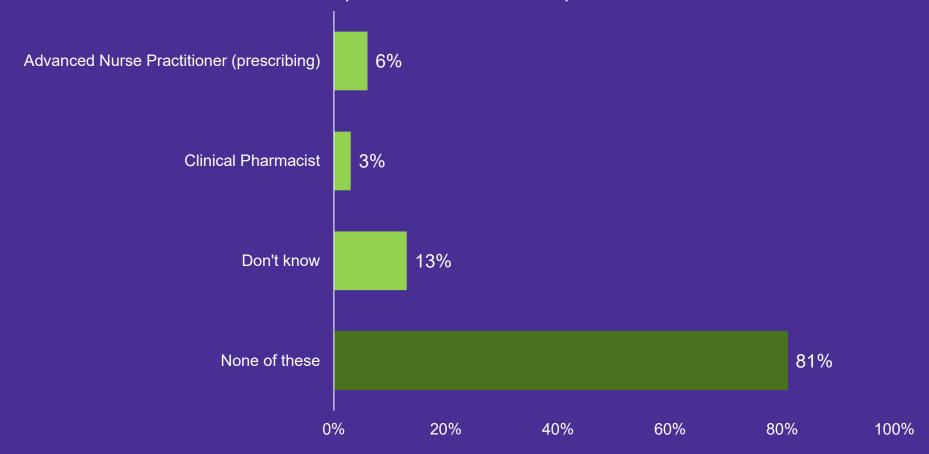
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Four in five practices say they do not plan on replacing/covering vacant GP posts with any HCPs. Less than one in ten plan to replace/cover vacant GP posts with an Advanced Nurse Practitioner (prescribing) or Clinical Pharmacist.

Showing the HCP posts that practices with vacant GP posts are planning to replace/cover the vacant post with



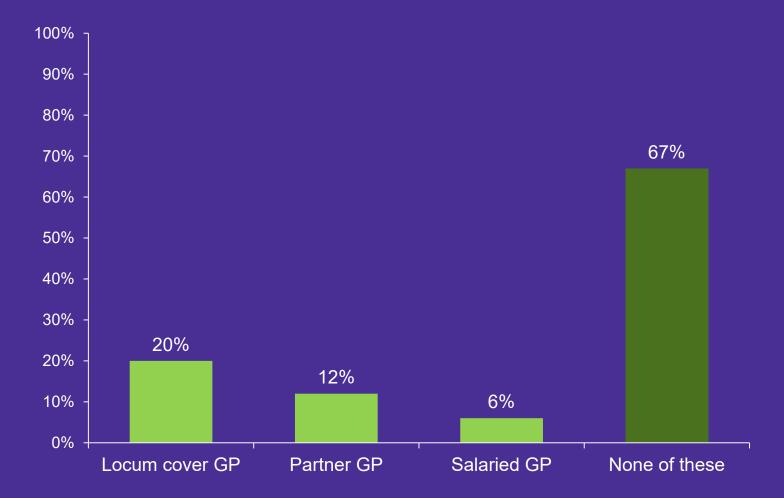
Q6e. You said you have GP vacancies at your practice. Are you planning on replacing/covering any vacant GP posts with any of the following HCPs? Base: All respondents who have GP vacancy at their practice (n=35)



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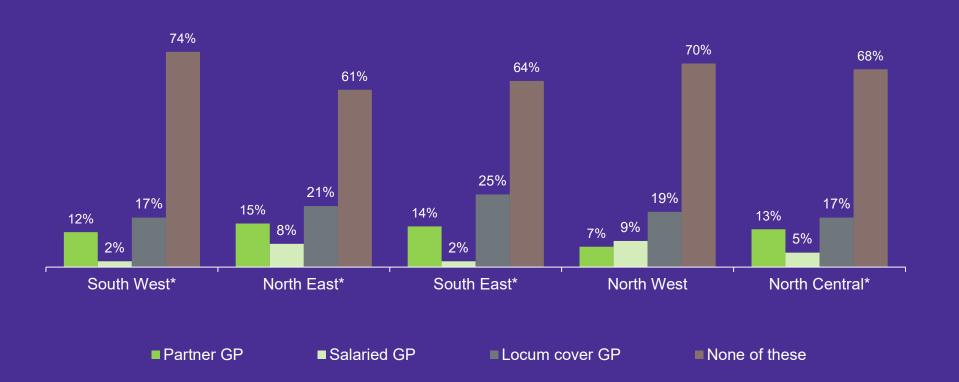
One in five practices have removed at least one Locum cover GP in the last 12 months, more than one in ten have removed a Partner GP, and less than one in ten have removed a Salaried GP. However, the majority of practices have not removed any GP posts.



Q4C. Has your practice removed any of the following types of GP post in the last 12 months? Base: All practices (n=193)



Practices in the SE STP area are most likely to have removed a Locum cover GP, practices in the NE area are most likely to have removed a Partner GP, and practices in the NE are most likely to have removed a Salaried GP in the last 12 months.

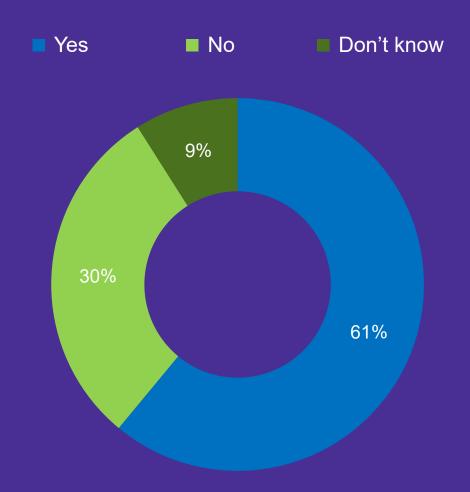


Q4C. Has your practice removed any of the following types of GP post in the last 12 months? Base: SE (n=43\*), SW (n=21\*), NC (n=30\*), NW (n=59), NE (n=40\*)

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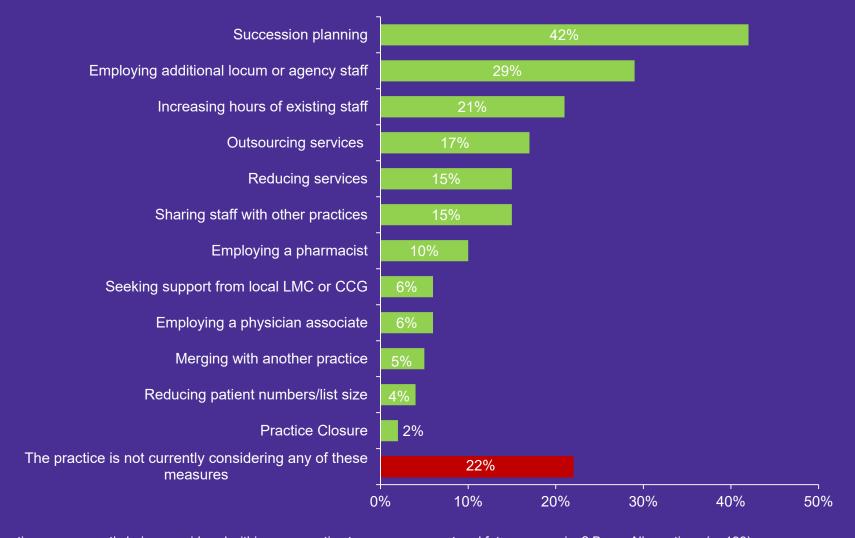
Three in five practices say that when full, they have sufficient staffing levels to meet patient needs. Three in ten say they do not have sufficient staffing levels to meet patient needs.



Q6G. When full, are staffing levels sufficient to meet patient need? Base: All practices (n=193)



## Two in five practices are currently succession planning to manage future and current vacancies, while one in five practices are not considering any of the provided measures.

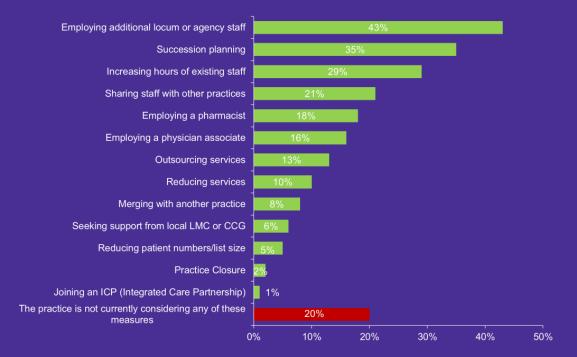


Q7. What actions are currently being considered within your practice to manage current and future vacancies? Base: All practices (n=193)



### Compare previous slide – December 2024 With this slide – December 2023

More than two in five practices are considering employing additional locum or agency staff to manage future and current vacancies, while one in five practices are not considering any of the provided measures.



Q7. What actions are currently being considered within your practice to manage current and future vacancies? Base: All practices (n=234)

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# There are 3 practices which say that they are either considering closure or planning to terminate their GP contract in the next 3 years, with 1 in NC, 1 in NW and 1 in NE STP areas.

Borough	# Practices Considering Closure	# Practices Planning to terminate GP Contract in next 3 years	# Practices Considering Closure OR Planning to Terminate GP Contract
Barnet	**	**	**
Bexley	**	**	**
Brent	**	**	**
Bromley	*	*	*
Camden	**	**	**
City & Hackney	1**	**	1**
Ealing	*	*	*
Enfield	**	**	**
Greenwich	**	**	**
Hammersmith & Fulham	**	**	**
Haringey	**	**	**
Harrow	**	**	**
Hillingdon	**	**	**
Hounslow	**	**	**
Islington	1**	1**	1**
Kensington & Chelsea	**	**	**
Lambeth	**	**	**
Lewisham	**	**	**
Merton	**	**	**
Newham	**	**	**
Redbridge	**	**	**
Southwark	**	**	**
Sutton	**	**	**
Tower Hamlets	**	**	**
Waltham Forest	**	**	**
Wandsworth	**	**	**
Westminster	1**	**	1**

Area	# Practices Considering Closure	to Terminate GP Contract in	# Practices Considering Closure OR Planning to
sw	0*	0*	0*
NC	1*	1*	1*
NW	1*	0*	1*
SE	0*	0*	0*
NE	1*	0*	1*
TOTAL**	3	1	3

Q7. What actions are currently being considered within your practice to help manage current and future vacancies?

Q9. Does the practice have plans to terminate its GP contract in the next three years?

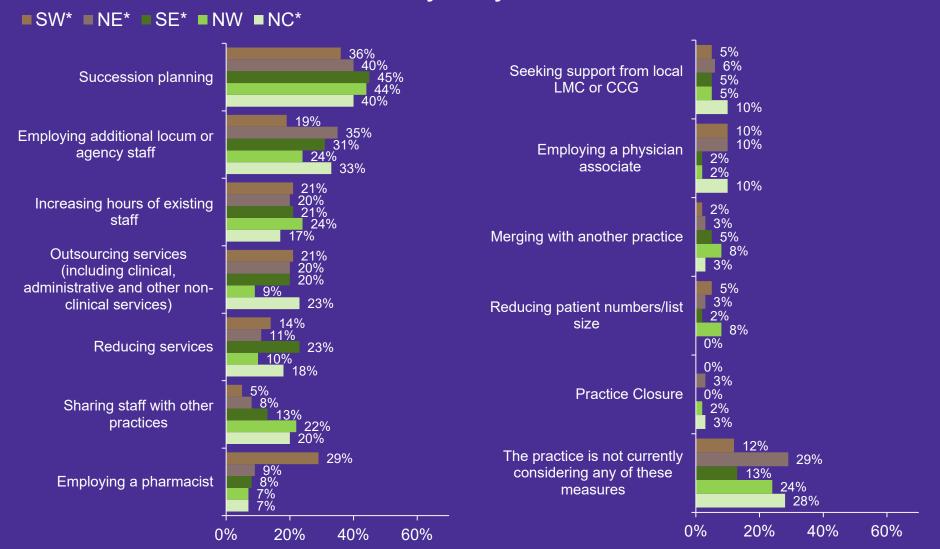
Base: practices in; Barnet (n=10\*\*), Bexley (n=8\*\*), Brent (n=10\*\*), Bromley (n=11\*), Camden (n=4\*\*), City & Hackney (n=10\*\*), Ealing (n=14\*), Enfield (n=7\*\*), Greenwich (n=7\*\*), Hammersmith and Fulham (n=3\*\*), Haringey (n=3\*\*), Harrow (n=3\*\*), Hillingdon (n=3\*\*), Hounslow (n=9\*\*), Islington (n=6\*\*), Kensington & Chelsea (n=7\*\*), Lambeth (n=8\*\*), Lewisham (n=3\*\*), Merton (n=6\*\*), Newham (n=8\*\*), Redbridge (n=6\*\*), Southwark (n=6\*\*), Sutton (n=8\*\*), Tower Hamlets (n=6\*\*), Waltham Forest (n=10\*\*), Wandsworth (n=7\*\*), Westminster (n=10\*\*), SE (n=43\*), SW (n=21\*), NC (n=30\*), NW (n=59), NE (n=40\*)

\*\*Please see methodological note on data disparity (slide 3)
^ N.B. Figures rounded up to 1 from 0.5 as a consequence of weighting

^^ N.B. Data disparity due to weighting and rounding LMCs

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Practices in the SW and SE STP area are the least likely to say they are <u>not</u> considering any of the actions tested to manage current and future vacancies; those in the NE and NC areas are most likely to say this is the case.

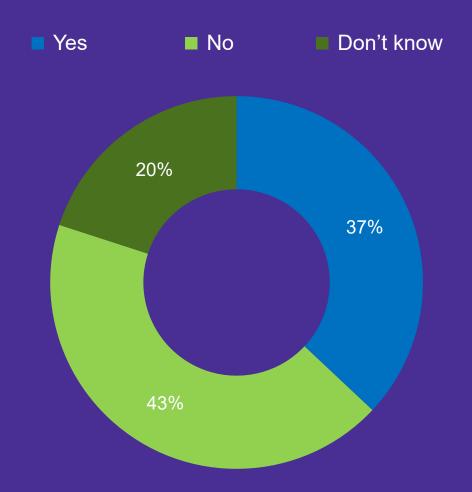


Q7. What actions are currently being considered within your practice to manage current and future vacancies? Base: SE (n=43\*), SW (n=21\*), NC (n=30\*), NW (n=59), NE (n=40\*)

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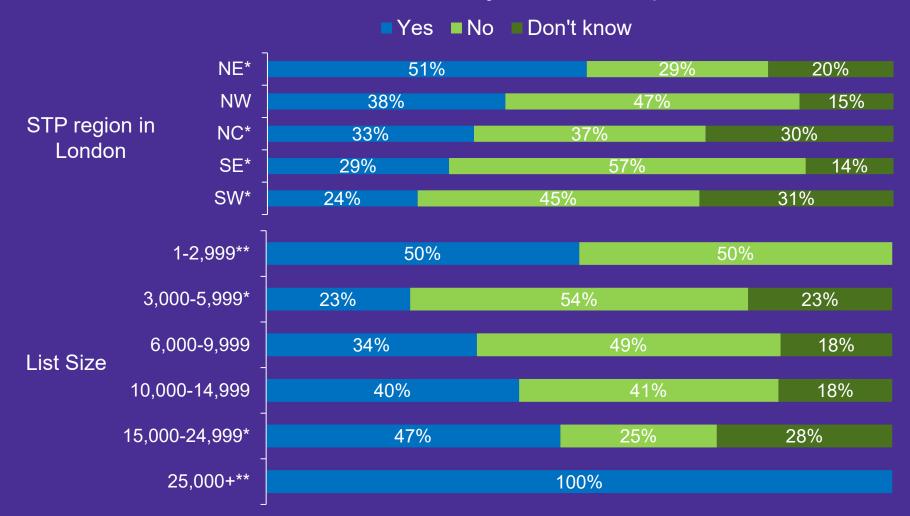
Just over a third of practices have GPs planning to retire in the next three years, while more than two in five say they do <u>not</u> have any GPs planning to retire.



Q8a. Does the practice currently have any GPs planning on retiring in the next 3 years? Base: All practices (n=193)



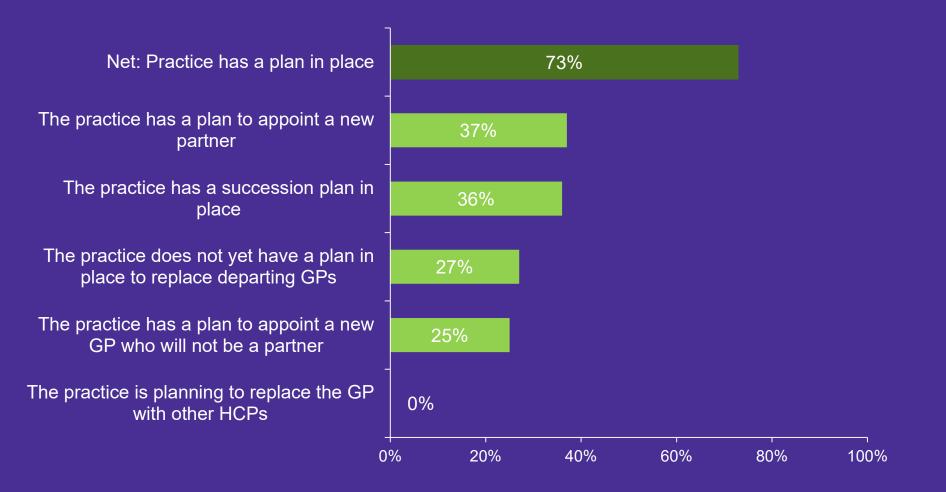
Practices in the NE STP region are most likely to have GPs planning to retire in the next 3 years and tend to have either small or large list sizes (though these practices with larger list sizes have low to very low base sizes).



Q8a. Does the practice currently have any GPs planning on retiring in the next 3 years? Base: All practices (n=193), SE (n=43\*), SW (n=21\*), NC (n=30\*), NW (n=59), NE (n=40\*), 1-2,999 (n=2\*\*), 3,000-5,999 (n=26\*), 6,000-9,999 (n=81), 10,000-14,999 (n=55), 15,000-24,999 (n=29\*), 25,000+ (n=1\*\*)



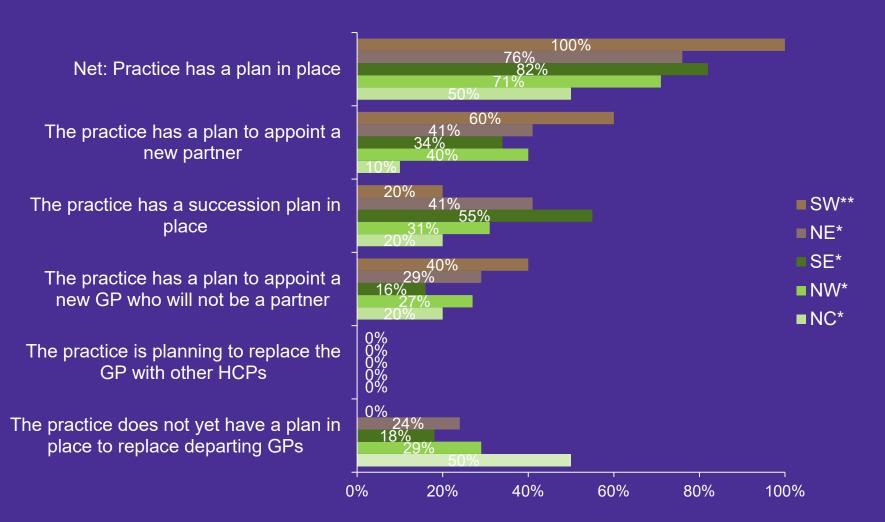
## Seven in ten practices in Wave 18 say they have some kind of plan in place to replace GPs retiring within the next 3 years, although three in ten do not have a plan in place yet.



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=71)



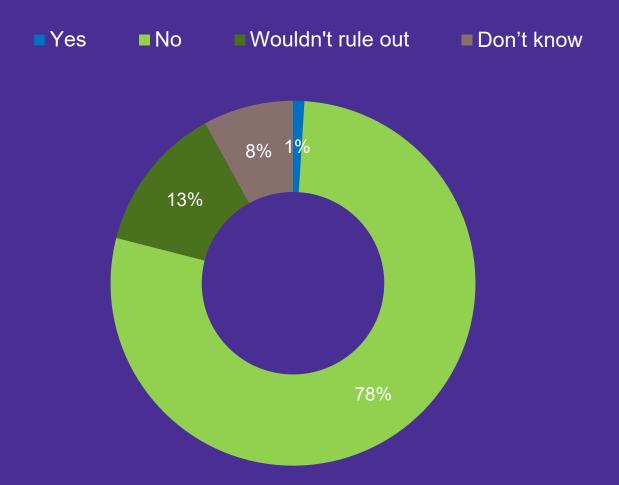
## Practices in the SW STP area are most likely to say they have a plan in place to replace GPs retiring within the next 3 years.



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=5\*\*), NW (n=23\*), NC (n=10\*), NE (n=13\*)



Four in five practices say they have <u>no plans</u> to terminate their GP contract in the next 3 years. More than one in ten would not rule it out, whilst less than one in ten are unsure.

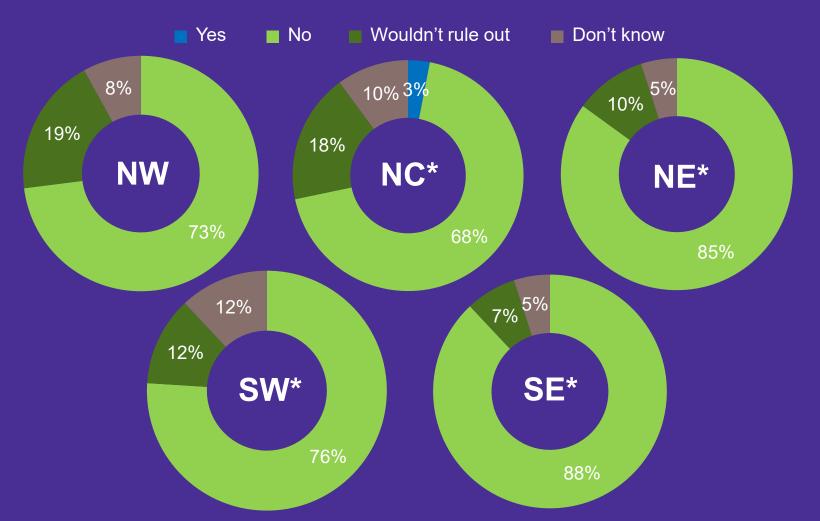


Q9a. Does the practice have plans to terminate its GP contract in the next three years? Base: All practices (n=193)



Only practices in the NC area say they have plans to terminate their GP contract in the next 3 years, whilst practices in the SW area are most like to say they wouldn't rule it out.

Practices in the SE STP are most likely to have no plans to terminate.



Q9a. Does the practice have plans to terminate its GP contract in the next three years? Base: All practices in SE (n=43\*), SW (n=21\*), NC (n=30\*), NW (n=59), NE (n=40\*)



<sup>\*</sup>Please see methodological note on data disparity (slide 3)

Fewer than one in ten practices in NC STP area and practices with 6,000-9,999 patient list with GPs who plan to retire in the next 3 years currently indicate they have plans to terminate their GP contract in the next 3 years.

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=(5\*\*), NW (n=23\*), NC (n=10\*\*), SE (n=13\*), NE (n=21\*\*), 1-2,999 (n=1\*\*), 3,000-5,999 (n=6\*\*), 6,000-9,999 (n=27\*), 10,000-14,999 (n=22\*), 15,000-24,999 (n=14\*), 25,000+ (n=1\*\*)

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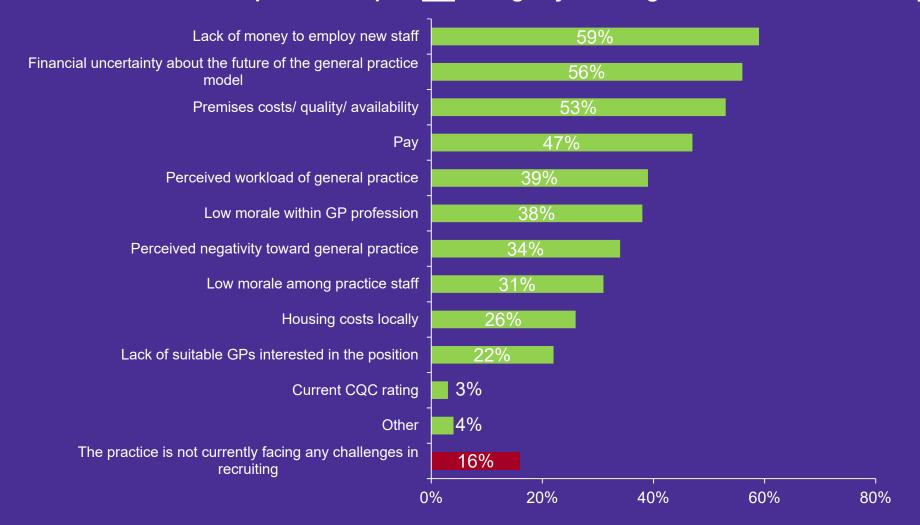
# Seven in ten practices think the government should increase funding to resource appointing more GPs in the next 5 years, whilst half cite retention of GPs, nurses and non-clinical staff and investment in GP premises and infrastructure.



Q17. Which one of the following areas, if any, do you think the Government should prioritise first in order to improve general practice in the next 5 years? Base: All practices (n=193)



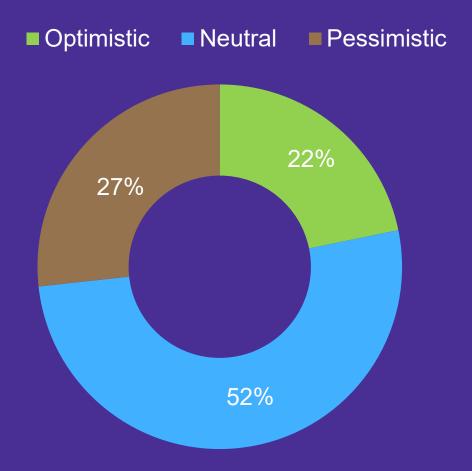
Three in five practices say lack of money is a factor preventing or hindering staff recruitment, with 7 of the 11 factors listed registering at least a third saying it is hindering recruitment. One in six practices report not facing any challenges in recruitment currently.



Q10a. What factors, if any, are currently preventing / hindering staff recruitment to the practice? Base: All practices (n=193)



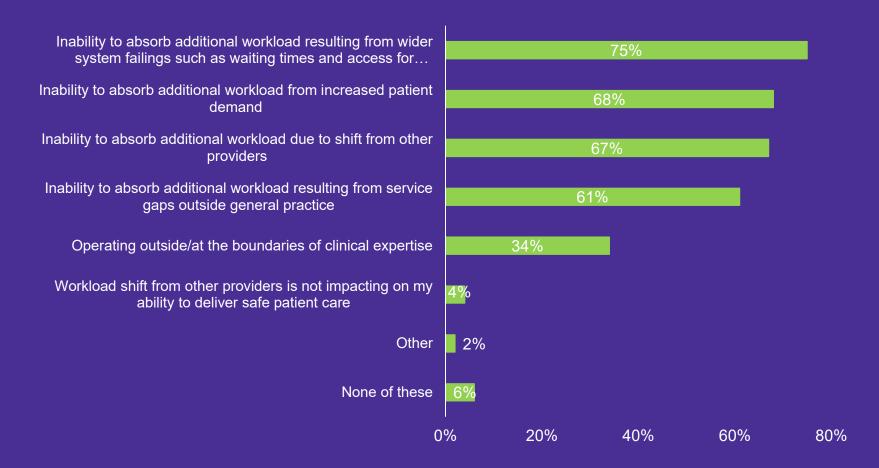
There is a range of opinion from practices in terms of their ability to safely meet patient need over the coming months (until June 2025/July 2025), with one in five saying that they are optimistic and three in ten say they are pessimistic.



Q48. How do you feel about being able to safely meet patient need over the coming months (until June 2025 / July 2025)? Base: All practices (n=193)



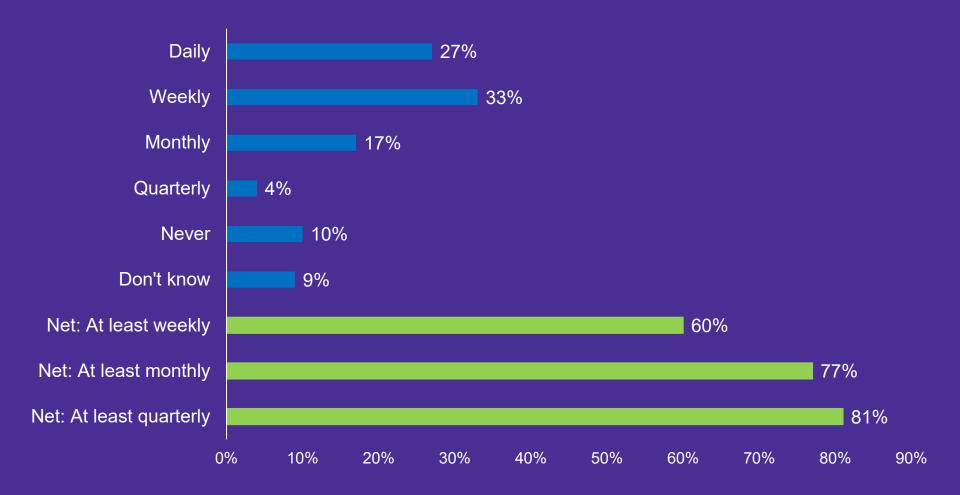
## Three quarters of practices who say workload shift is impacting their ability to deliver safe patient care say this is due to inability to absorb additional workload due to wider system failings



Q55. In which of the following ways is workload shift from other providers impacting on your ability to deliver safe patient care? Base: All respondents (n=193)



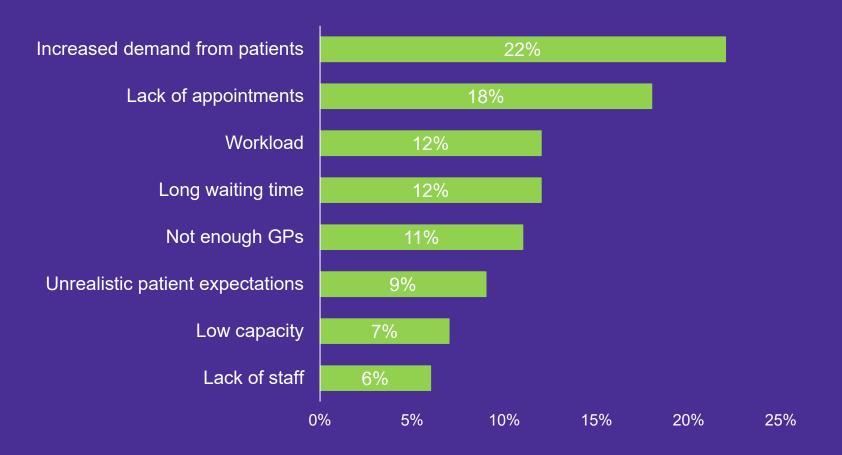
# Three in ten staff express concerns about meeting patient demand safely daily, whist just a third say these concerns are expressed weekly. One in ten say concerns are never expressed



Q56. How frequently do the staff team express concerns about meeting patient demand safely? Base: All practices (n=193)



# One in five practices who said staff have concerns about meeting patient demand safely say the most common concerns are around increased demand from patients, whilst one in six cite lack of appointments



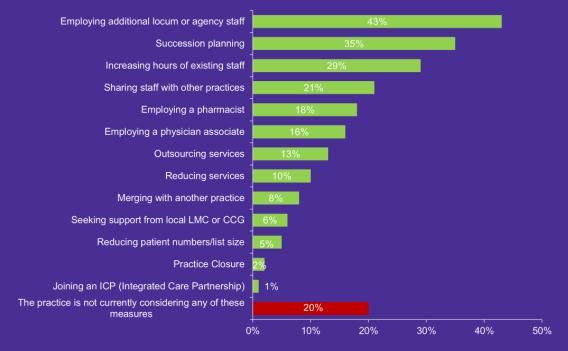
Q57. What concerns are most frequently expressed by the staff team about meeting patient demand safely? Base: All who said staff have concerns about meeting patient demand safely (n=156)

NB: Only responses with bases of 10 or more shown



### Compare previous slide – December 2024 With this slide – December 2023

More than two in five practices are considering employing additional locum or agency staff to manage future and current vacancies, while one in five practices are not considering any of the provided measures.



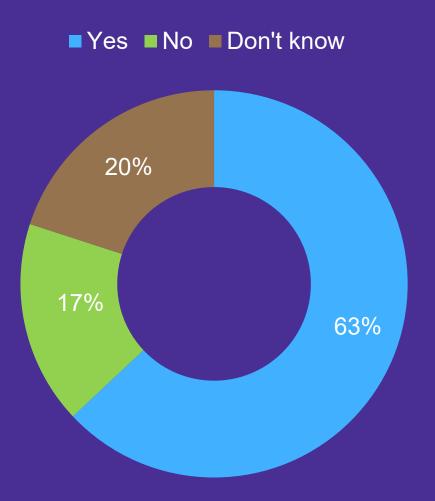
Q7. What actions are currently being considered within your practice to manage current and future vacancies? Base: All practices (n=234)

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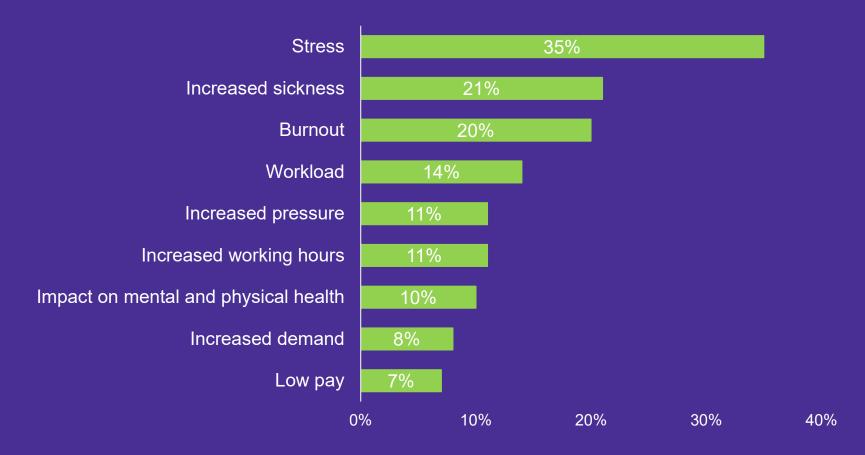
Just over three in five practices say that current work pressures are impacting the health (mental and/or physical) of their staff, one in six <u>do not</u> have any concerns



Q58. Do you have concerns that current work pressures are impacting on the health (mental and/or physical) of the staff team? Base: All practices (n=193)



## Just over a third of practices who have concerns that current work pressures are impacting on the health of the staff team say these are related to stress



Q58b. What concerns do you have about the current work pressures impacting on the health (mental and/or physical) of the staff team? Base: All who said they have concerns that current work pressures are impacting on the health (mental and/or physical) of the staff team (n=121)

NB: Only responses with bases of 10 or more shown

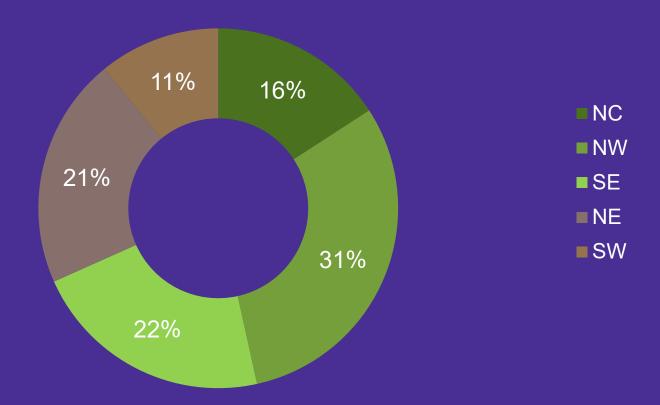




# **APPENDIX**



# APPENDIX I: Member Practice Responses by STP region in London



The LLMC member practices that took part in this survey account for approximately 2,046,742 registered patients across the five London regions. This includes approximately 516,500 patients in NW, 499,992 patients in SE, 475,750 patients in NE, 312,000 patients in NC and 242,500 patients in SW.

Q1. Which local area is the practice based in? Base: All practices (n=193)



### **APPENDIX II: Member Practice Responses by Borough**

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Borough	Total Number of Practice Responses	% of Total Practice Responses	Number of Practices sent the survey	Response rate
Barnet	10	5%	53	19%
Bexley	8	4%	33	15%
Brent	10	5%	59	19%
Bromley	11	6%	46	21%
Camden	4	2%	32	8%
City & Hackney	10	5%	40	19%
Ealing	14	7%	73	26%
Enfield	7	4%	46	13%
Greenwich	7	4%	42	13%
Hammersmith and Fulham	3	2%	29	6%
Haringey	3	2%	41	6%
Harrow	3	2%	39	6%
Hillingdon	3	2%	48	6%
Hounslow	9	5%	49	17%
Islington	6	3%	32	11%
Kensington & Chelsea	7	4%	34	13%
Lambeth	8	4%	46	15%
Lewisham	3	2%	35	6%
Merton	6	3%	23	11%
Newham	8	4%	48	15%
Redbridge	6	3%	42	11%
Southwark	6	3%	43	11%
Sutton	8	4%	24	15%
Tower Hamlets	6	3%	34	11%
Waltham Forest	10	5%	41	19%
Wandsworth	7	4%	47	13%
Westminster	10	5%	41	19%
TOTAL	193	100%	1120	

Q1. Which local area is the practice based in? Base: All practices (n=193)



<sup>\*</sup> Please see methodological note on data disparity (slide 3)

#### **APPENDIX III: List Size of Participating Practices**



The member practices that participated in the survey comprise 1,268 GP posts and 1,623 nurse, health care assistant/support worker, pharmacist, social prescribing link worker, first contact physiotherapist, community paramedic, and practice manager or business/finance manager posts. In total, the practices that participated in this research are responsible for 2,046,742 patients.

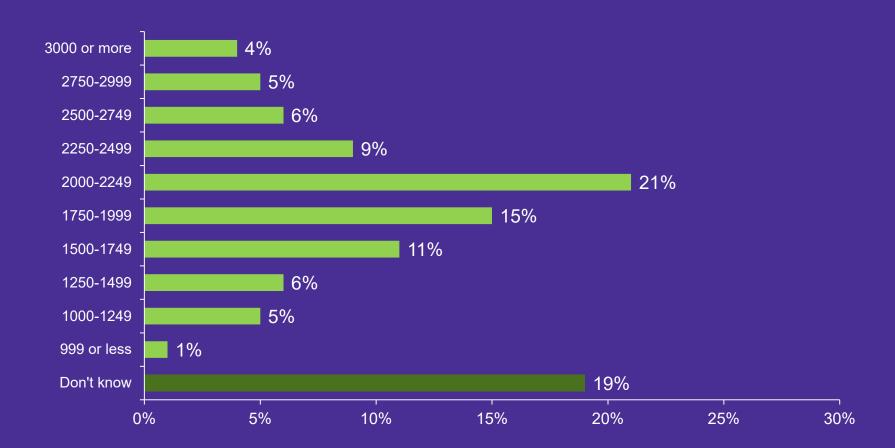
\* Indicates a figure <1%

Q3. What is the practice list size? Base: All practices (n=193)



#### **APPENDIX IV: Patient: GP Ratio**

Showing: Ratio of patients to GPs



Q3C. What is your patient:GP ratio? Base: All practices (n=193)

