

PRACTICE AND MANAGEMENT

The role of the general practitioner in management

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In the first of two articles, Dr Griffiths gives a background to the principles of management, indicates the challenge for the future and points out the importance of the participation of doctors in NHS management.

THE health services are heavily dependent on the dedication of all the caring services, but of all those, it is doctors who are the major spenders of NHS resources as a result of their clinical activities. It is certainly true to say that hospital doctors and consultants are not always fully aware of the expenditure which their activities generate, but general practitioners also usually lack a full understanding of the impact of their demands on other parts of the service. General practitioners' experience, however, can give them an understanding of how patients are affected by changes in clinical practice or organization that are aimed at greater effectiveness and efficiency.

What is management?

In order to serve their patients more effectively doctors rely on sound management of the NHS; but to be effective management must have accurate and up to date knowledge of the clinical situation. Resources are limited, so clinicians must work together to contribute to decisions on priorities and in so doing must play a major role in management in the NHS. During the last decade it has been clear that consultants and general practitioners have shown an increased willingness to join in this challenging and vital task.

There have been many attempts to define management, but the definition in the International Dictionary of Management is possibly the simplest:

Effective utilization and cooperation of resources such as capital, plant, materials and labour to achieve defined objectives with maximum efficiency. People responsible for directing and running an organization.

The first part of the definition suggests that management is very much concerned with future activities. The second part suggests that the manager is someone who makes these activities happen. The past provides the manager with experience and the present shows how competent past planning has been. In today's more enlightened and critical society, greater emphasis is being put on value for money. This adds to the stimulation of the challenge which management provides for the future.

Establishing priorities

The essential task of management in the NHS is to organize limited resources—human, financial and physical—so as to enable the community to be provided with the best possible standard and balance of care. This enables establishing priorities between conflicting claims. The demands which are made on resources by doctors in providing care have to be reconciled one with another. Three main questions need to be answered:

1. Where are we now?
2. Where do we want to go?
3. How do we get there?

The actions of doctors interact in complex ways with the

work of other people in the health service and personal social services. Also, doctors are an important source of innovation, in both medical practice and general approach to care, and their ideas must be evaluated and, where appropriate, translated into action.

Unfortunately, because of the complexities of modern technological medicine, the undergraduate curriculum has to concentrate on teaching the future doctor the basic clinical requirements and only a limited time can be given to any insight into management. In the early years of general practice young doctors are too busy putting into practice the knowledge they have gained and in developing their independent businesses. A sense of independence is built up and many have no desire to learn of management techniques, especially in a wider context. Some of these have an unfounded fear that management is too complex.

The clinical and caring experience which has been gained by the doctor is of relevance and value to management in the NHS and is a source of information and help which management is anxious to tap. Management in the NHS can provide the new challenge for the future for the general practitioner in the middle years and onwards, increasing effectiveness in practice.

Management in the health service can be regarded as having four dimensions: the needs of people for various forms of health care; the availability and use of resources to meet those needs; the skills of the people who meet those needs and the places where care is given.

Team work

A characteristic of the health service is that the provision of health care is often a team activity. Different skills have to be combined in different ways to meet the needs of individual patients; different professions come together to plan and coordinate their activities to meet complex objectives and the work of the various skill groups has to be coordinated within institutions.

The medical involvement must not, however, be intermittent but should be a systematic part of the service. At first the involvement may come through participating in the local medical committee. General practitioners interested in the challenge of management can develop the necessary skills by being appointed as members of health authorities including family practitioner committees, or by being elected by their LMC colleagues as representatives to units of management and moving on to be members of district management teams.

In management, teams are consensus bodies making decisions with the agreement of each of the team members. They are jointly responsible to the health authority for preparing plans, making delegated planning and operational decisions and monitoring performance against plans. Teams are small and consist only of those whose unanimous agreement is essential to the making and effective implementation of decisions for the totality of health care.