Jeremy Hunt announced that there would be a review of the workforce needs of general practice. This was met with a mixed response, as the feeling on the ground seemed to be that the time for a review was past as the issues are clear. Indeed, those concerning the workforce were evident some 10 years ago when, as a result of a local analysis of the Wessex GP workforce, we estimated that 1.5–2 GPs would be needed to replace each GP retiring due to changing working patterns and a growing trend in early retirement.

What we could not have anticipated at that time was the changing political culture the NHS would come to exist within and the increasing complexity of the cases to be managed on a daily basis. Expanding the number of places in training for general practice is a step, although a potentially fruitless one if the career itself is unattractive due to the intensity and complexity of the work. Further, in addition to expansionist solutions, time might be well spent in learning what might retain senior clinicians to the profession. Thus for me, the ‘take home messages’ from the conference are questions for reflection:

- How can we better understand the complexity and intensity of clinical work, the impact of this on clinicians, and the implications for the business model of general practice?
- What factors are leading established GPs to consider leaving the profession and what would retain them?

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REFERENCES

Best practice for child safeguarding

Jenny Woodman has done well to highlight the fact that a GP’s role in child safeguarding can be vast, stretching far beyond that of simply sentinel (or, indeed, case-conference-report-writer).

However, as ‘best-practice models of GP child safeguarding’ are considered and developed, I would suggest that it is imperative that health visitor input is incorporated into these, with ‘best-practice models of primary care child safeguarding’ perhaps being considered as an alternative.

Having participated in the child protection inter-agency discussion process for a number of years, it is clear that health visitors often know the members of a family better than their GP, with them having easy access to the home environment itself as