

ROCKS AND HARD PLACES

We have chosen this month's theme — the primary care workforce — to highlight the major problems currently facing general practice and, by extension, the entire NHS.

At a time when increasing demands are being placed on general practice by changing patterns of illness and disease management, changing population demography, new government initiatives, and the need to ensure uniformly high standards of care, the profession is facing unprecedented difficulties in recruitment to general practice and in the retention of GPs. The irony of the close juxtaposition of demands by central government to extend access to general practice, and the recent announcement by the Chief Executive of the NHS of a national support service for GPs experiencing psychological problems, stress, and burnout, is unlikely to be lost on many of us. The Primary Care Workforce Commission, led by Professor Martin Roland, was established to consider ways of ensuring that primary care will, now and in the future, be able to cope in these difficult times, and has made a number of potentially valuable suggestions about the development of new kinds of primary care teams and new roles for primary care professionals. Time, however, is not on our side, and it's not easy to see how commitments to improve recruitment and to train and incorporate new members of the primary care team can be implemented quickly enough to turn the tide.

In their leading editorial, Professor Kath Checkland and Dr Sharon Spooner have summarised the proposals emerging from the Roland Commission, and provide a valuable commentary on them. They conclude that *'... the Commission report represents a comprehensive and brave attempt to sketch out a sustainable future for primary care that builds on established GP practice units and locally developed networks. It is to be welcomed as an important contribution to solving the current crisis ... The innovations and changes discussed here are all feasible, given investment. Without it, it is hard to see how primary care as we know it can be sustained.'*

Whether it is possible to achieve the 'quick wins' needed to steady the ship is debatable, and a number of the suggestions for new professional roles to work efficiently alongside existing structures are regarded as controversial in many quarters. The evidence

base for radically re-engineering the primary care team is relatively thin, and some of these proposals require a considerable leap of faith.

This issue contains a number of other articles dealing with some of the key questions confronting general practice. Can pharmacists be effectively integrated into primary care teams? Christine Bond answers this question with an enthusiastic 'Yes', commenting that *'They must be integrated into the healthcare team so that their knowledge and skills can contribute to better, safer patient care, so it can no longer be said that pharmacists are overtrained for what they do and underutilised in what they know.'* How can medical students' interest in a career in general practice be stimulated? Garth Funston thinks that undergraduate medical student groups in the medical schools, or even a national undergraduate GP organisation, may be the answer.

How can retention and refresher schemes contribute to assuring an adequate primary care workforce? Naureen Bhatti and Salman Waqar's report on a 5-year Induction and Refresher (I&R) scheme offers some clues. They state that *'Delivering a working I&R scheme will go a long way in boosting our ailing workforce with experienced GPs. Getting it right will be essential to ensure we maintain high quality primary care that both patients and practitioners can feel confident in.'* Finally, how can general practice nurses (GPNs) work most effectively in primary care teams and how can recruitment be encouraged? Commenting on the forthcoming Health Education England Framework for district and practice nursing, David Fitzmaurice and colleagues recognise the crucial importance of practice nurses to the future of general practice and conclude that the framework will provide *'... an opportunity to revitalise this often-neglected sector. The challenge is there for all of us to make sure that it is implemented in full in order to attract the future GPNs and to ensure that those we have wish to remain within primary care.'* Interesting times.

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