#### MANPOWER, ASPIRATIONS, DELIVERY.

PERSPECTIVE OF ESTABLISHED G.P.

Dr. Finbarr Corkery ICGP President 2004-2005



# Background

- Principal in a GMS partnership
- Established
- Purpose built premises
- Retirement issues arising

#### Factors influencing approach

- Anxiety about capacity to continue delivering a service.
- Financial capacity to cease.
- Availability of trained cover for sickness, holidays, outside interests or commitments.
- Affordability of cover.

# **Cradle Beliefs**

- I had to "graft" so why not them.?
- We were glad to queue for jobs.
- My effort deserves recognition.
- I am entitled to "consideration"

## Myths vs. Reality

- You can't get anybody.
- They will not do calls
- No out of hours
- The rates looked for are unreal.
- Unspoken belief: they do not make real G.P's anymore

## **The Hard Issues**

- Money.
- Adequate retirement provision.
- Perception of assets
- Work allocation

#### What does a doctor own?

- A GMS list ? By law : No
- "Private " Patients : by definition: No
- Good will and if so how is it quantified?.
- Property? Perhaps.

## **Property/Premises**

#### • Changed requirements.

#### • Working from home.

#### • Planning regulations.



### Where does this all lead?

- Approximately 30 % of the GMS medical work force will retire from the service over the next ten years (2015).
- Prior to 1989 there was no pension contribution paid separately within the GMS
- All future "protection" plans e.g. sick pay,life insurance,pension policies etc had to be paid from an inclusive GMS fee and private fees.

# So!

- I suspect that a significant number of doctors retiring over the next ten years are anxious about their pensions.
- The realisation of assets is the only possibility open to them.
- They constitue the group acutely interfacing with "New and Emerging G.P's

### Conclusions

- We are somewhere between a rock and a hard place.
- Easiest GMS access is via an established practice.
- Young doctors have big financial commitments.
- Established doctors may expect (and need) a return on their perceived investment.