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## Time for a reset



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Expect 1200 or so GPs to take the plunge and depart general practice soon [Image: Santiago on iStock]

A shocking number of GPs will be gone from primary care in five years. The health reformers have nothing to head off this disaster but there may still be time, writes **Barbara Fountain**

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How do you excite people about another workforce yarn providing another chapter in a long story of neglect?

You have to. Because for a government that claims it wants a health service that is patient-focused and primary care driven, this is the biggest story in town.

In five years, 1212 GPs out of 3488 in the latest RNZCGP workforce survey say they intend to retire. One thousand two hundred and twelve GPs, gone from the workforce.

This cohort would fill up the seats of Parliament's debating chamber 10 times over and still leave 12 standing.

It would take around 24 buses to whisk them away so the tragedy is out of sight and out of mind. Squeeze them into a Mini Cooper *Guinness World Records*-style (29 to a car) and that's 42 Minis heading off on a road trip to "I'm out of here" nirvana.

The sector needs a generalist able to provide medical care in the community. In the *New Zealand Herald* recently, RNZCGP president Samantha Murton writes: "As health reforms continue, I am often alarmed by comments that seemingly attach little value to medical expertise.

"I am all for a broader primary care team but the focus on health professionals who are quicker to train, while delaying an increase in general practitioners, suggests a belief that medical expertise is replaceable.

“Personally, I cannot see the economics or patient benefits to having a multitude of people involved in someone’s care while losing the expertise of those able to manage a multitude of conditions.

“In primary care, we need medical experts.” It’s a sign of the times that this needs to be stated explicitly. But, if you read former Te Whatu Ora chair **Rob Campbell’s speech** laying out exactly what he thinks is wrong with the health system that two months ago he was leading, then it is not surprising.

### **The reforms’ weak points**

Mr Campbell points to the failure throughout the reforms to act on primary care funding and nursing pay parity. And he spells out what the primary care sector people have known for years – that they are treated as a problem to manage, “as they had always been treated with little effort made to engage with them or involve them in the process”.

General practice sector leaders will not be surprised by his describing health system managers as indecisive, inadequate or even opposed to change.

Speaking with the benefit of hindsight, Mr Campbell says under his leadership the board should have been more demanding, resolute and courageous. This may have helped, but I have to wonder how much, given the political indifference he also identifies.

At the recent Green Cross conference, General Practice Owners Association chair and veteran medical politician Tim Malloy was asked why, after all the workforce reports, the evidence on pay parity and the research showing the benefit of primary care-led health systems, nothing had really changed; why did the Government ignore the impending workforce crisis?

Dr Malloy had no real answer although commented, “if they ask you for another report, you have already lost”.

Which leads me back to the college's workforce report. This is a huge piece of work. If the Government, the Ministry of Health and Te Whatu Ora were interested in securing a future workforce, they would be doing this research.

### **Will the disruption be worth it?**

Over the next few months, hundreds of health sector staff face redundancy. Many by now will be wondering for what purpose. Will these changes move us any closer to achieving equity in health outcomes for Māori or a sustainable health system?

As Mr Campbell sees it: “Change is caught between the old order and ways of doing things which produced the crisis and the unrealistic output from the consultancy-driven restructure. With insightful and determined ministers and a genuinely skilled and committed board and management working with, rather than against or in an uneasy relationship with other stakeholders, this can be done.”

Ask Google the significance of 1212, the number of GPs we will lose in the next five years and you get five million results.

Turns out 1212 is an “angel number”. Who knew there was such a thing? It can indicate the universe warning you to act with caution when you are thinking about pursuing a number of ideas you have in mind. You need to make a choice.

We need a reset if the reforms are going to be more than a badly handled restructuring of DHBs. Before it's too late we need all stakeholders in the room talking and acting on the reform agenda.

It's time the Government made a choice.

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