

Minutes of Derby Medical Society 3rd November 2022.

Prof Martin Marshall President of the Royal college of General practitioners.

Bio for Professor Martin Marshall

Professor Martin Marshall is Chair of the Royal College of General Practitioners and a GP in Newham, East London. He is also Professor of Healthcare Improvement at UCL in the Department of Primary Care and Population Health. Previously he was Programme Director for Population Health and Primary Care at UCLPartners (2014-2019), Director of Research & Development at the Health Foundation (2007-2012), Deputy Chief Medical Officer for England and Director General in the Department of Health (2006-2007), Professor of General Practice at the University of Manchester (2000-2006) and a Harkness Fellow in Healthcare Policy.

He is a Fellow of the Royal College of Physicians of London and of the Faculty of Public Health Medicine and was a non-executive director of the Care Quality Commission until 2012. He has advised governments in Singapore, Egypt, Canada and New Zealand, has over 230 publications in the field of quality improvement and health service redesign and his primary academic interest is in maximising the impact of research on practice. In 2005 he was awarded a CBE in the Queen's Birthday Honours for Services to Health Care.

A co-founder and driving force of the Rethinking Medicine movement, Martin has a passionate commitment to the values of the NHS, patient care and ensuring the GP voice is central in a time of great change. When he's not working he likes being outside, preferably on a mountain or a coastal path with his wife Sue and their puppy.



Prof Martin addressed the society regarding the future, comparing how things were 30yrs ago, now and possibly in 2050.

He said that the small practices and certainly single-handed practices of old will go, so patients will no longer have the same GP all their lives (also as people move more). Practices in the future will be bigger than now more like 12 GPs but supported by a team of physios, pharmacists, nurses, counsellors, will oversee their input, and have longer but fewer consultations, with the complex patients.

Continuity improves care and reduces costs however is more difficult given the lack of GPs

10 yrs ago the population was 10% less and the number of GPs was 7% more. So there are just not enough GPs. Hospital consultant numbers have increased, although not in line with increased workload.

He felt in the future patients would have continuity with a team rather than an individual.

Practices, as well as being bigger, will be more professionally managed, improving efficiency and relieving partners of some workload. Also allowing improved/wider services.

He suggested that we needed to change how we refer to health care, considering the wider determinants of health.

Primary care would refer to the family .. the support from immediate OR extended family

Secondary care, the community support systems/ work/ environment

Tertiary care, = GP and community care (what we now call primary care)

Quaternary care = hospital care (present secondary care)

In future GPs need to focus not only on physical and psychosocial care but also population health.

He felt that the present and immediate future were very difficult due to workload and expectations however, he thought if more GPs/ staff in general practice can be found/funded he was optimistic that although the politicians don't really understand primary care, they at least now realise there is a problem.

Questions were asked re the challenges of continuity also re on line organisations such as Babylon.

"Martin left plenty of time for discussion and questions. Topics included potential modernisation through the use of IT and AI, the greater contribution of primary care physicians working more closely with hospitals in acute care perhaps through triage. There was some considered reassurance about commercial initiatives such as "Babylon at Hand" threatening stability in GP budgets; he felt the business case within the NHS is unlikely to be attractive in the long term. Then there were the tensions between flexible, acceptable working conditions and continuity of care, logistical problems with training and placements and the current difficulty with future vision due to current resources. While Martin could not offer short term solutions in the current economic climate, he remains optimistic about the continuing value and development in primary care."

The Society was informed of the sad sudden death of Dr John Gartside, a long-standing member of the Society. Mr Richard Hall paid tribute to him, and the society stood and observed a minute's silence as a mark of respect.

The next meeting is the open meeting, "Towards sustainability in Aviation", when members, doctors in training, students can bring a non-medical friend/partner with them .