

LIFE AFTER VTS

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Salaried GP

Advantages of general practice

- True generalist
- Autonomy (independent contractor status)
- Speed of ascent, compared with hospital
- Money.....
- Flexibility (part time work)
- Management/Finance aspect
- Diversity of roles
- Can opt out of on-calls... (for now...)

Disadvantages of general practice

- Responsibility – clinical and managerial
- Paperwork and bureaucracy
- Negative attitudes – from colleagues and media
- Isolation



National COGPED survey (Oct 08)

- For trainees finishing GP registrar/ST3 in Aug 08
- **54%** said they had a job by the end of September 08
- But half of those with work had jobs as part time salaried posts, OOH and locum work i.e. not their first choice of employment

Our VTS

Over the last 2yrs

- 14 Registrars
 - 9 full time salaried
 - 1 ST4/Deanery post
 - 1 Diploma
 - 1 travelling
 - x2 pregnant!



NHS Employers 2007

- “no junior doctor should expect that they will definitely become a hospital consultant or GP principal”

Once qualified

- **Partner** – more responsibility above clinical work, but more rewards
- **Salaried post-** clinical work only- less pay than partners but less workload and responsibility
- **Local Medical Director-** evolving post, ie local partner, answerable to a Board in a corporate organisation
- GPwSI
- Locum work
- Occupational health, Prison work, Medico-legal work, Public health, HPA, Pharmaceuticals, political, managerial

GP Partner/Principal

- Self employed (profits/drawings rather than salary)
- Normally part of partnership
- Financial responsibility
- Managerial responsibility (employment law)
- Total responsibility

- *Limited number of partnerships available at present*

Salaried GPs

- Work horse!
- Fixed hours
- Fixed pay (employed)
- Fixed leave
- Less autonomy
- Less political/teaching/managerial opportunities
- Variable contracts
- More Salaried GPs, than Principles throughout London

GP earnings

Nationally (2006/7)	Locally in Greenwich
□ Salaried £ 58,000	□ Salaried £75,000
□ Partner £ 107,000	□ Partner £120,000

High overheads for partners - MDU, insurance, lawyers, accountants;
depends on type of Practice: PMS/ GMS

GP Locum

- Maternity , Sickness, sabbaticals, extended hours
- Self employed – Tax returns, NHS pensions
- Variable work hours but of your choosing
- Explore different areas, different practices
- Pay can be good but this may be changing due to flooding of market with young GPs with out fixed posts
- No obvious career progression

GPwSI

At the present time, there are no centralised national regulations, department or requirements to become a GPwSI. But accreditation is on the way:-

- Dermatology, Diabetes, Emergency and Unscheduled Care
- Palliative Care, Respiratory Medicine, Sexual Health
- Epilepsy, Mental Health, ENT, Headaches
- Musculoskeletal Conditions

Current courses accredited by the RCGP can be found on their website –
www.rcgp.org.uk/practising_as_a_gp/professional_development/higher_professional_devt.aspx

GPwSI are appointed on a 'needs' basis and, as such, providing GPwSI services are currently instituted in negotiation with the local PCT.

Other options

- Occupational health
- Prison work
- Medico-legal work
- Public health
- HPA
- Pharmaceuticals
- Political
- Managerial
- Education

If you are in ST3!

- **MAKE YOUR SELF INDISPENABLE!**
- **Be innovative**
- **Take on extra responsibility beyond you core clinical duties**
- **Taking on teaching at the practice**
- **BE VOCAL**

How to prepare as a trainee

- Register and view regularly pulse and GP online websites
- Check contract updates on BMA website
- Attend partnership meetings
- Try to widen managerial and financial knowledge
- Be a good clinician

What to do if you don't have a job!

- Type a cover letter (rates, contact details, MPS/ CCT no, PCT supplementary list no) with a CV and mass mail to local practices. (Greenwich GP contracts Officer – Mrs Margaret Kennelly)
- Join loads of locum agencies (Pioneer, BBL - listings in Pulse/ Doctor magazines). Just 1 headache of paperwork (enhanced CRB cert, hep B cert, etc. to mass duplicate)
- Be happy and likeable - the secrets to partnership! Make yourself visible!
- Practice interview questions

Things on the side!

Join the free [Association of Broadcasting Doctors](http://www.broadcasting-doctor.org) www.broadcasting-doctor.org, 01353688456, jackiepetts@oneservice.co.uk

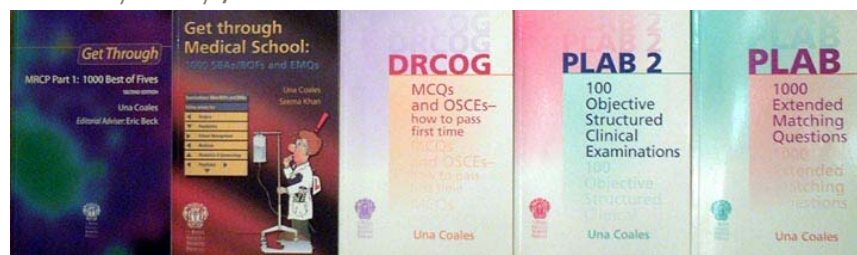
3 mins radio/ tv: £75/ TV show: £80-100/h



Dr Focus Groups £200 cash = 3h

- Gordon Ridout, Project Co-Ordinator
Focus Pointe Global, London
- + 44 207 908 6717 direct line
- + 44 207 908 6600 switchboard
+ 44 207 908 6666 fax
gridout@focuspointeglobal.com

Write a book proposal (cover letter and 1st 40 pages) to
Peter Richardson, c/o RSM, 1 Wimpole Street, W1G 0AE -
£1000/book/year



Medicolegal GP reports

- www.gpreports.co.uk
- www.gpmedicolegal.co.uk
- www.medical-expert.co.uk

Private Occupational Health £90,000/ year
(rate in 2004)
(no experience required)

- www.drkellyplc.co.uk (£100k starting pay - 40h work week - well man clinic)
- 8 Devonshire Square
London EC2M 4PL United Kingdom
Main Phone: (44) 20. 7086 5500
Main Fax: (44) 20. 7216 3826

Future of General Practice In Greenwich

... stay in the
loop



GPCC OPEN MEETING

The Greenwich Primary Care Collaborative would like to invite you to an open meeting at the Queen Elizabeth Hospital

Postgraduate Education Centre
Queen Elizabeth, Woolwich
London SE18 4QH

PLEASE SEE WWW.GPCC.ORG.UK OR EMAIL JUNAID.BAWA@GMAIL.COM FOR FURTHER DETAILS

AGENDA

- Structure of GPCC
- Provider Role of GPCC
- Update on APMS
- Appraisal/Revalidation
- Performance management
- Future threats & Opportunities

**EDUCATION CENTRE
QUEEN ELIZABETH HOSPITAL WOOLWICH**

THURSDAY

22/10/09, 19:30pm

ANY QUESTIONS.....