Question 1:
  a) What are the expectations from patients and the public of doctors in the future?

The primary expectation which patients have, and will continue to have, is that they receive excellent health care from doctors and multi-disciplinary teams. Patients increasingly want to be involved in decisions about their treatment and care, rather than as a set of symptoms to be treated.

Patients also want to have greater flexibility in how they access their practice. Although traditional face-to-face appointments will continue to be the right option for many patients (and must not be eroded), more patients want to be able to engage with GPs and other doctors in different ways, including using channels such as video, email and telephone. Patients also want greater flexibility in the times at which they access healthcare, to fit around their lives.

Continuity of care is a core value of general practice. Patients continue to value the personal relationship with their GP very highly, i.e. having a named GP who has overall responsibility for their care and whom they can speak to when necessary. However, as more care in general practice will, in future, be delivered by multi-professional teams, it is vital that patients are still able to trust the expertise of other health professionals involved in their care; team-based continuity. It is important that, as general practice, is increasingly delivered by teams, that relational continuity is not eroded.
Many of the changes to patients’ expectations of doctors are driven by changing technology; patients expect that all clinicians involved in their treatment will be able to access their health and care records, conduct remote consultations or monitor and interpret patients’ data. These expectations will necessitate significant investment in digital skills for doctors, as well as provision of appropriate digital infrastructure, in primary care, and right across the health and social care system.

b) What are the expectations of doctors in the future from people/colleagues within the NHS, such as employers and wider team members for example nurses, pharmacists, healthcare scientists and advanced clinical practitioners?

As clinical teams in general practice expand and general practice is delivered at scale (e.g. through primary care networks), GPs will inevitably be expected to take on more leadership responsibilities - managing, advising and supporting their practice teams to provide the best care possible. General practitioners will also have a key role to play, alongside other partners, in training, mentoring and supervising GP registrars, medical students, newly qualified doctors and members of the expanded practice team.

In a primary care setting, members of multi-disciplinary teams will expect GPs to manage risk and hold overall clinical responsibility for their patient lists. They will also expect their GP colleagues to provide advice, see patients who need to see a doctor and manage complex cases directly.

c) What are the expectations of current doctors and medical students regarding their role in the future?

Current doctors and medical students expect to be medical experts, working with patients directly as well as taking on other duties as part of a flexible, varied career. For GPs, this may include research or teaching roles, local and system leadership (for example through a practice, PCN or ICS), involvement in public health and prevention programmes, and management of multi-disciplinary teams. Many GPs already enjoy such careers and future doctors expect this to be the norm.

GPs of the future want and need more time to deliver safe effective care to their increasingly complex patients – good General Practice is holistic and factors in the psychological and social elements impacting on patients’ lives, in addition to the physical, doing this well takes time.

In order to enjoy successful, sustainable careers, doctors need a manageable workload, with proper support and safeguards in place to protect their wellbeing and the safety and quality of patient care. Increasingly, doctors expect to be able to work flexibly, to allow for a healthy, sustainable work-life balance, providing space for other priorities. This is particularly important for doctors considering careers in general practice. Doctors also expect to be properly supported in their professional community, through appropriate support, CPD and mentoring programmes, allowing them to build and maintain the skills they need at all stages of their careers.

Question 2: What level of impact do you think the following drivers for change will have on the role of the doctor in the future?

Please indicate whether the impact will be High, Medium or Low for each driver in the table below.
• An ageing population with multiple, complex health needs
• New technology including artificial intelligence, digital health and genomics
• Patient empowerment and change in the patient-doctor relationship
• Increasing focus on health promotion and prevention
• Different expectations from the Future Doctor on working life and career
• Delivery of personalised care
• New and emerging roles

Question 3: Please tell us the factors you think will have the biggest impact on the role of the doctor in the future, and how?
These could include broad factors in wider society or changes within the healthcare setting. If you have specific examples, please refer to these in your answer.

Demographic shifts are already having a major impact on healthcare and will continue to do so in the coming decades. Population growth, coupled with an aging population with more complex health needs, has increased the overall demand for healthcare. In particular, the increasing complexity of the healthcare needs of a significant section of the population makes the role of expert medical generalists, particularly GPs, who are trained to understand healthcare holistically, ever more important. These changes will require GPs and other staff to develop new ways of working, to support both those patients with more complex needs and the wider population.

New technology will be at the forefront of altering how healthcare is provided. From using big data to predict and respond to population health trends, to understanding specific risk factors for individual patients, technology will change the way doctors understand and meet their patients’ needs. Doctors will also need to be able to harness technology to support their work, for example by improving diagnostic information or expanding treatment options, whilst still having the skills and confidence to make nuanced, independent judgements based on their own expertise.

In parallel with this, the growth of the multi-professional team will enable increased task substitution, enabling GPs to refocus their time where their skills are most needed, such as managing multimorbidity, and to play a leadership role in their practices. Multi-disciplinary team working does, however, increase the risk that care will become more fragmented and continuity eroded. It is vital, therefore, that new forms of relational continuity, which are compatible with multidisciplinary team working, are developed. This might include supporting patients to build trusting relationships with specific micro-teams or named keyworkers in the practice team.

At the same time, patients increasingly desire greater involvement in their own care. This will necessitate closer collaboration between doctors, patients and other team members, making doctors’ interpersonal and relational skills all the more important.

Question 4: How will the role of the doctor in the future compare to how it is now?
You may wish to consider relevant factors such as working practices, the patient-doctor relationship or working within evolving multi-professional teams.

As explored above, there are significant demographic shifts, as well as changes in the expectations of doctors and patients, which will impact on how healthcare is delivered in future. Regardless of those changes however, doctors will continue to play a fundamental role in delivering healthcare, with general practice retaining its position as the foundation of
the NHS. Nonetheless, the role of the doctor will have to adapt to meet these challenges. With planning and care, the role of the doctor can evolve such that it meets the needs of patients, multi-professional teams, and current and future doctors alike, as laid out in question 1.

In May 2019, the Royal College of General Practitioners 'Fit for the Future: A vision for general practice', which outlines how we believe the GP and their practice teams must evolve could change to meet the health challenges of the 21st Century. The vision can be found at https://www.rcgp.org.uk/policy/future-vision.asp.

**Question 5: What do you think will be the remit of the doctor within the multi-professional team of the future?**

Care in general practice will be delivered, in future, by GPs working in expanded practice teams potentially comprising a range of nurses, first contact physiotherapists, paramedics, pharmacists, social prescribing link workers and physician associates (and other support roles). These professionals will take on many of the tasks which do not require the expertise of GPs, and which they are qualified and confident to carry out, freeing up GPs to manage more complex cases holistically, and improving overall access and patient outcomes.

Within the multi-professional team, doctors will continue to be the expert medical generalists who will hold risk, manage undifferentiated symptoms and diagnose serious illness. In primary care, GPs may not directly manage for the day-to-day care of the majority of patients, however they will see patients as well as being responsible for the care provided by their widening practice teams. GPs will therefore need to be available to support the team and provide professional and clinical leadership and training, so that the team as a whole can provide the best care possible.

**Question 6: What different skills, knowledges and behaviours will doctors need to perform their future role, fulfil expectations from patients, and work successfully as part of a multi-disciplinary team in 30 years’ time?”**

In order to succeed in future, general practitioners’ skills will need to be enhanced in several areas. To harness the benefits of new digital technology, GPs will need digital consultation skills and be able to use and interpret data to understand the needs of individual patients as well as their patient populations. To successfully develop and lead multi-professional teams, at scale collaborations (e.g. PCNs) and integrated care systems, GPs will need enhanced leadership and people management skills as well as a better understanding of population health management. GPs who wish to become partners will also require business skills.

Providing GPs with such extended skills and knowledge will require GP training to be enhanced and extended. All GP registrars should spend at least 24 months of their training in primary care settings, complemented by secondary care rotations which genuinely supplement their skills. In future, GP training should be extended to at least four years, and the proportion of time spent in general practice should be substantially increased.

Furthermore, all doctors will need to understand the increasingly integrated healthcare system in which they work, and the implications of supporting more patients with multiple complex needs. To ensure that doctors have this foundation, all medical students should spend a significant proportion of their placement time in general practice, and all foundation programme doctors should complete at least one substantive rotation in general practice. Postgraduate training programmes should be enhanced to ensure that doctors have a basic
understanding of general practice, whether or not they pursue a career in primary care. Taken together, increased exposure to primary care among non-GPs, and enhanced training for GPs will also help address the perception challenges explored in question 8.

Most importantly medical training will need to be flexible. While we can make informed predictions about what healthcare may look like in ten or twenty years’ time, there will inevitably be changes which we have not predicted, and to which doctors currently in training will need to respond. It is therefore vital that training programmes support future doctors to adapt to changing roles and expectations quickly and effectively. Similarly, systems will need to be able to swiftly respond to changing needs, for example by promptly providing new training and CPD resources, which are easily accessible to doctors. Training hubs will need to play a key role in this, supporting practices and PCNs in the delivery of training which is tailored to current and forecast health needs.

Question 7: When do you think changes to doctors’ roles could be a reality? Please select one answer below.

- 10 - 20 years
- 20 - 30 years
- 30+ years

Please provide your reasons below.

Many of the changes discussed above are already in train, and most will be fully felt within the next decade. Patients and doctors alike already expect healthcare which is more responsive and flexible. In general practice the multi-disciplinary practice team is increasingly common. The technology to deliver personalised care, and to pre-emptively monitor and manage population health is already here.

As set out in "Fit for the Future: A vision for general practice" (accessible at https://www.rcgp.org.uk/policy/future-vision.asp), the Royal College of General Practitioners expects the changes we have outlined in this submission to be the norm by 2030. The challenge is to deliver the benefits of predicted change to doctors and patients as soon as possible, while ensuring that the system is also ready to respond to any and all as-yet-unforeseen changes. That requires appropriate support and investment, both in the short and long term.

Question 8: What challenges need to be addressed in order for the vision of the future doctor to become a reality, in the timescales you have provided?

For example:

- The use of new technology
- The way that care is delivered
- Increasing focus on health prevention

The biggest challenge to realising the vision for future doctors, and particularly for GPs as explored here, will be one of resourcing. Transformational changes, for example by making better use of multi-professional teams, or utilising new technology, will allow doctors to better meet growing demand and provide improved care. However, that very demand is currently adsorbing available resources (both financial and human); to deliver change will require significant, front-loaded resourcing, large increases in training and education, and concerted efforts to improve retention, particularly of GPs and the wider team in general practice. Similarly, significant front-loaded investments will be needed to modernise general practice.
estates and infrastructure, so that GPs will be able to harness the full potential of new technologies and provide care in a setting which is fit for purpose.

As practice teams expand, patients will need to be educated to understand these new roles. This is vital so that, public trust in GPs, which has historically been very high, is not eroded.

Given the important role of generalist skills at the heart of a multi-professional primary care team, there is a significant risk if general practice continues to be seen as less valuable by other parts of the NHS, and that too few healthcare professionals choose careers in primary care. This issue is explored in greater depth in “By Choice, Not By Chance” (HEE, 2016, available at https://www.hee.nhs.uk/our-work/supporting-medical-students-towards-careers-general-practice) and in our "Destination GP" report (RCGP, 2017, available at https://www.rcgp.org.uk/policy/rcgp-policy-areas/destination-gp.aspx). These reports detail a range of actions that are required to ensure that general practice is a highly-sought after career destination.

To address immediate pressures on general practice, urgent action is needed to improve the day-to-day experiences of GPs and other staff in primary care. National and local retention schemes, which allow GPs and other staff to work flexibly or on a reduced basis, should be fully funded and made available to all staff, while other support schemes, including early career fellowships and peer mentoring, should be implemented as soon as possible. In the longer term, a significant expansion in training capacity and recruitment of GPs and other practice staff will be necessary to meet growing demand for primary care, and to ensure that GPs and the wider practice team have sustainable, manageable workloads, which allow them to adequately support patients and enjoy long and fulfilling careers.

Question 9: Do you have any additional comments or feedback that you would like to provide?

Further information on the topics discussed in this consultation response can be found in "Fit for the Future: A vision for general practice", produced by the Royal College of General Practitioners, available at https://www.rcgp.org.uk/policy/future-vision.asp.

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