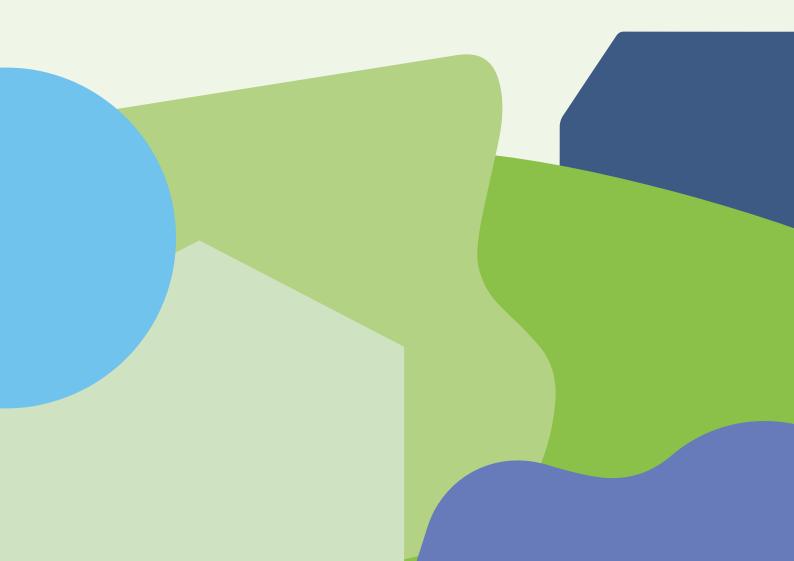


# General practice: The solution to the NHS crisis

RCGP Scotland manifesto
Scottish Parliament election 2026





#### General practice is the cornerstone of the NHS and is integral to the vision of a healthier, more equitable Scotland.

It is the first port of call for most people when they are unwell, and GPs help patients navigate the medical world with trusting, whole-person care, 24 hours a day, 7 days a week. Without general practice, the NHS simply could not exist as we know it. Investing in general practice leads to better health outcomes and delivers significant value to patients, the wider NHS, the economy, and society as a whole.

But general practice is in perpetual crisis. GPs strive to provide the best possible care to their patients, but are struggling to meet the demand of growing patient numbers with more complex healthcare needs with a shrinking GP workforce, fewer practices and stagnant IT and infrastructure. The chronic lack of investment in general practice means some practices cannot afford to employ more GPs to expand the workforce as needed, while others - particularly in remote and rural areas - have persistent and damaging GP recruitment challenges, with unfilled vacancies threatening patient access to time with their GP.

We now have no doubt that the key target of recruiting 800 GPs by 2027 will not be met and in fact, we have at least 84 fewer whole time equivalent GPs in Scotland than in 2013. GP workload is unsustainable, we are losing GPs faster than we train new ones, and patients are frustrated by difficulties in obtaining an appointment with their GP. If we don't change course, our NHS will be overwhelmed; with longer waiting times, reduced continuity of care, and patient safety at risk.

Patients benefit greatly from the value of the GP, who offers expert, whole-person medical care throughout all stages of life. GPs understand the complexity and uncertainty that can come with ongoing health concerns and can work closely with individuals to manage these challenges with compassion and skill. Rooted in the communities they serve, GPs aim to provide care that is not only comprehensive and continuous but also equitable and responsive to each patient's unique needs, circumstances, and background. They collaborate within and lead growing multidisciplinary teams to ensure that patients and their families receive holistic care — supporting both physical and mental health.

In Scotland today, general practice delivers around 90% of patient contact with a fraction of the NHS budget. It is one of the most fiscally responsible parts of our health system and represents one of the greatest returns on investment. A stronger general practice supports all parts of our health and care system: it is the solution to the NHS crisis.

But to give patients the care in their communities that they deserve, the enormous contribution that GPs make needs to be truly valued. That's why it is critical that all political parties make general practice and patient care a top priority in their manifestos ahead of the 2026 Scottish Parliament election.



## Revitalise general practice by increasing its share of NHS funding

General practice's share of NHS funding should be restored to 11%. To achieve this, the next Scottish Government should commit to a substantial increase in the amount of general practice expenditure in each year of the next parliamentary term. Over the long term, we need to redistribute NHS resources further, to see 15% of NHS spending invested in general practice.

Despite recognition of the need to shift patient care out of hospitals and into the community, there has not been the necessary investment in general practice to support that. General practice delivers over 90% of patient contact within the NHS, but with a fraction of the overall NHS budget. Bold action is required now if the NHS reform - that is so desperately needed - is to be realised for patients across Scotland.

Greater investment into general practice is urgently required to enable more patients to be seen within their communities, to prevent ill health and reduce the need for patients to go to hospital. Ultimately this change is necessary to meet the needs of the Scottish people now and in the future.

As funding is increased, all funding streams should be reviewed to channel more spending to the areas of greatest need - including the most deprived areas and underserved rural communities.



#### 2 Grow the GP workforce

A comprehensive, long-term GP workforce plan, with interconnected measures on retention and recruitment, is now critical to return services to a stable footing and to drastically improve GP wellbeing.

To ensure our new GPs feel best prepared for the job ahead, the Scottish GP Specialty Training model needs to be enhanced. GP Specialty Registrars should spend 2 years training in general practice placements and 1 year in hospital, rather than 18 months in each. Measures to build up capacity in education and training must go hand in hand with this change.

We need a new, ambitious and binding target for GP recruitment, based on whole time equivalent, that properly accounts for the role of GPs in supporting more care closer to home for Scotland, now and in the future. This needs to result in a sustainable and fair ratio of GPs to patients, taking into account different patient needs in different areas, so that patients can see their trusted GP in a timely and appropriate way.



## Target resources to patients in deprived communities

#### The next Scottish Government must prioritise health equity — lives depend on it.

Inequalities continue to dominate Scotland's health landscape, with stark and unfair differences in health outcomes and life expectancy. More resource and capacity in general practice in areas of higher socio-economic deprivation would make a real difference to patients' health and their experience of care. This would break the inverse care law and deliver healthcare more fairly where it is needed the most.

Investing in an 'Inclusion Health' Enhanced Service would help target resources where they're needed most, ensuring a fairer future for general practice provision for those in Scotland's most disadvantaged communities.



## 4 Make preventive care a priority across all parts of the system

With NHS services under growing pressure, the next Scottish Government needs to shift focus from treating illness to helping people stay well in the first place. By prioritising prevention and health education, we can improve the quality of life for individuals and reduce the strain on our health system.

For too many, especially in our most deprived communities, the basic foundations of good health are out of reach. We need bold, wide-ranging, and cross-government action on the socio-economic and commercial determinants of health.

A long-term vision of public health is required when commissioning interventions around children and young people, smoking, alcohol use, exercise, clean air, green space, obesity and diet, and housing improvements. GPs and other parts of the health and social care system should be enabled to collaborate to support these interventions, to ensure benefits for patients and the community. Every GP practice should have a Community Link Worker to help patients find the support that's right for them in their community, including those serving dispersed or remote populations.

We also need a compassionate, public health approach to drug use. Taking a harm reduction approach to drug-related deaths would enable patients to receive the best quality, timely, and holistic care, and remove limitations to the development of innovative solutions to tackle this crisis.



## Free up GPs to spend more time with patients

Where GPs are in short supply, they must be able to use their time well. There are huge benefits to continuity of care that patients miss out on when GP capacity is stretched. Measures to reduce workload, along with growing the GP workforce, could enable patients to access 15-minute appointments as standard, with their regular GP who they know and trust.

GPs want to spend their time doing what they do best: supporting patients throughout their lives and delivering more person-centred, relationship-based care. But they cannot absorb unlimited levels of work.

Patient access suffers when GPs are tied up with unnecessary bureaucracy. RCGP Scotland's latest survey of members found that on average GPs say they spend around 22% of their time on admin and bureaucracy that does not improve patient care.

The next Scottish Government should carry out an NHS red tape challenge to identify and remove unnecessary barriers to best patient care.



#### 6

### Equip practices with fit for purpose IT and premises for modern patient care

A general practice premises and infrastructure strategy is needed to modernise general practice, boost efficiency, and to distribute the capital investment required for these upgrades.

The poor state of general practice buildings and IT is hampering the ability of GPs and their teams to deliver the best patient care. Both in and out of hours GP premises need the space and resources to accommodate the necessary education and growth of the GP workforce and expanding primary care staff teams. IT systems and equipment are clunky, and investment is urgently needed in solutions to boost efficiency and modernise general practice now and for the future.

All GP practices that want to reassign the lease of their practice building to the Health Board should be enabled to do so as a priority. This would let those practices focus on delivering the best patient care, instead of worrying about financial liabilities.



#### Support general practice to adapt for a net zero future

The climate crisis is a health crisis. Primary care should play a lead role in cutting emissions to net zero, adapting to changing climates, safeguarding resources, cutting waste and pollution, and prescribing in a sustainable way.

Practices need support and funding to transition to net zero through upgrades, retrofitting, or new buildings. Bringing Scottish general practice infrastructure up to date will have both environmental and long-term financial benefits, as well as optimisation of services for patients and looking after our workforce.

The current models of prescribing are long out of date and should be replaced urgently with a paperless, e-prescribing system. E-prescribing would revolutionise the clinical and patient experience, through which data can be easily shared between GPs in and out of hours, pharmacy and secondary care teams.

We must support and educate healthcare professionals towards measures that reduce overprescribing and wasted, ineffectual prescriptions that don't help patients or the planet.

#### How you can help!

Keep up to date on our campaign activity, and how you can show support, by following us on:







Or email: infoscotland@rcgp.org.uk

Royal College of General Practitioners Scotland represents a network of around 5,000 doctors working to improve care for patients in Scotland. We work to encourage and maintain the highest standards of general medical practice and acts as the voice of GPs on education, training and clinical standards.



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