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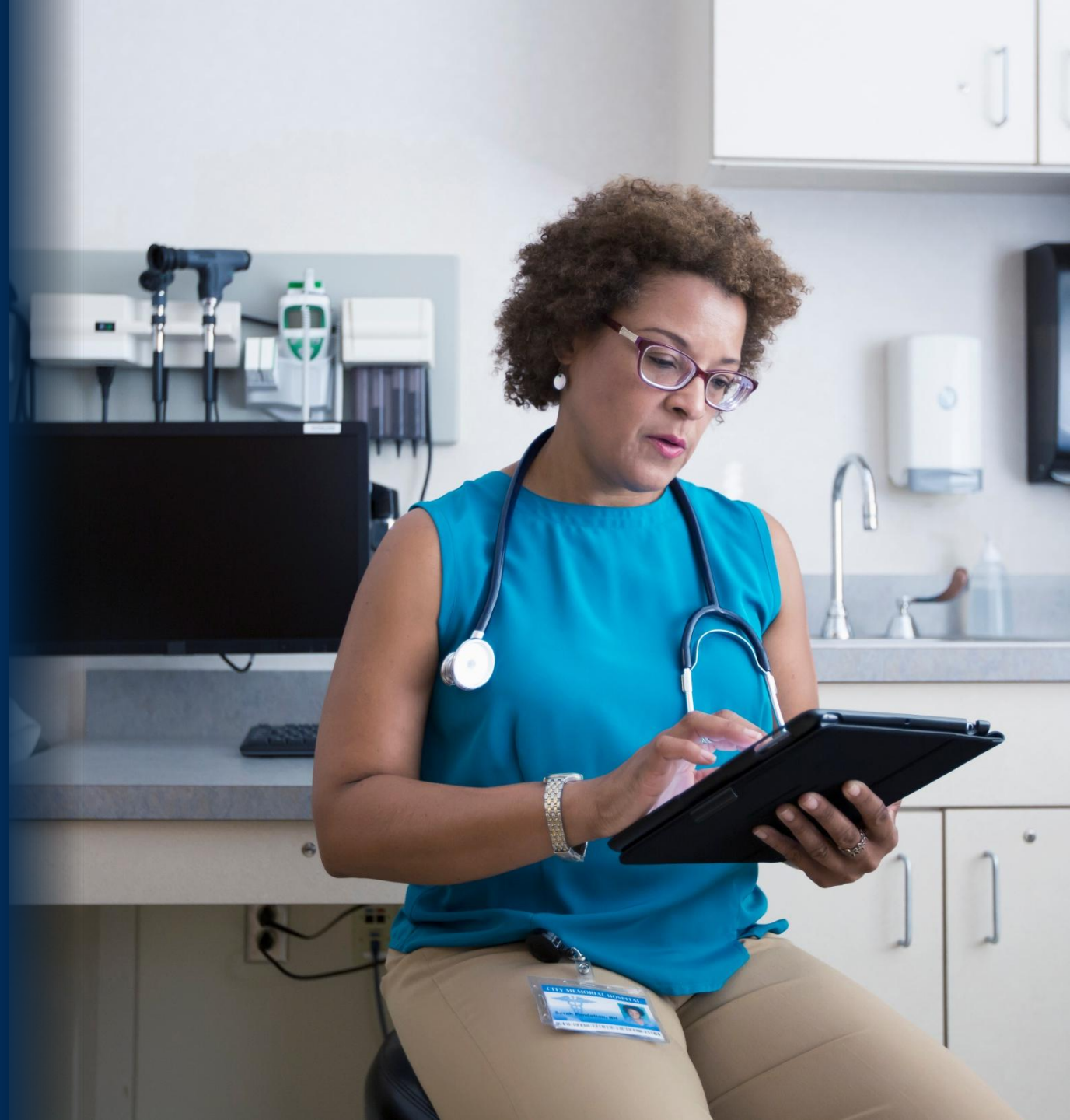
GP Voice Sur

Savanta Report

September 2025

savanta.com

| Make Better Decisions



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Background

Background and objectives

- The GP Voice Survey is an annual survey of members of the Royal College of General Practitioners (RCGP), including UK-based GP registrars, Members, Fellows and Associates, aimed at gathering insights into the experiences, challenges and intentions of the GP workforce to inform the RCGP's policy and influencing activities.
- This survey cuts across important themes for GPs, such as workforce shortages, issues with GP retention and workload, infrastructure and, for the first time, the uptake and attitudes towards Artificial Intelligence (AI) in general practice.
- The results presented in this report are for the 2025 edition of the GP Voice Survey, representing its 13th wave. **Comparisons with its previous waves, going back to 2016, are made and marked for significant differences with a star (★), where appropriate.**



What we did



15-minute online survey



Email invitations (and reminders) to contacts in the RCGP membership database



2,316 responses achieved, with a 4.95% response rate (relative to all successful mail-outs)



Fieldwork: 28th July to 20th August 2025



Data tables and report produced, based on overall and sub-group results (e.g., by nation)

All email invitations and reminders were distributed to contacts in the RCGP membership database using **unique survey links**. This approach ensured that each response was securely attributed to a verified participant, supporting data integrity and our overall quality assurance standards throughout fieldwork.

Savanta is a member of the Market Research Society (MRS) and complies with its Code of Conduct and professional standards, ensuring that all research is carried out ethically, transparently, and with the highest regard for respondent privacy and data integrity.

Questionnaire Overview

- 1.GPs' future plans:** Retention, partnership interest, practice closure, visa sponsorship.
- 2.Current provision / models of care:** Commissioning decisions, partnership model, quality of care, neighbourhood health services.
- 3.Recruitment and employment opportunities:** Recruitment barriers, vacancies, job search, reasons for not currently practising.
- 4.Workload:** Hours contracted vs. worked, wellbeing, stress, workload breakdown, poverty impact.
- 5.Infrastructure and sustainability:** Premises, funding, IT systems, sustainability barriers / actions.
- 6.Artificial Intelligence (AI):** AI usage, adoption drivers / barriers, concerns, future value areas.

Methodology

Responses from England were weighted on the basis of gender, region, and age in line with data from NHS England's GP workforce data.

Responses from the devolved nations were left unweighted due to limitations on the publicly available GP workforce data for each nation, with only NHS England providing the data sufficient for weighting (i.e., headcount data including GP Registrars).

We are confident that results from the devolved nations can still be reported on accurately, especially in the context of the unweighted demographics for each nation being in line with our expectations (e.g., more women than men etc.).

Note on question design The survey was designed to be accessible for all respondents and used a variety of question types to fully understand the perspectives of GPs. This included:

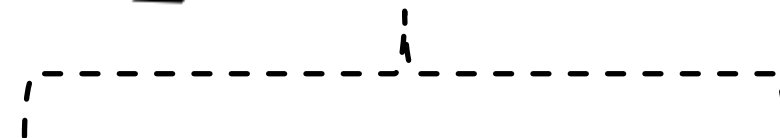
Single choice questions these require respondents to select one answer from a list of options, reflecting their most relevant or preferred choice or for non overlapping options. e.g. Have you used AI tools? Yes I have used AI tools, No I haven't used AI tools.

Multi choice questions these allow respondents to pick multiple answers, capturing all options that apply to their situation or opinions e.g. Which of the following reasons, if any, make you unlikely to work in general practice in the future? too stressful, unrewarding etc.

For the weighting source, please see: <https://digital.nhs.uk/data-and-information/publications/statistical/general-and-personal-medical-services/31-july-2025>



2,316 responses
from
RCGP GPs across
the UK



Responses from
England
weighted on the
basis of region,
gender and age.



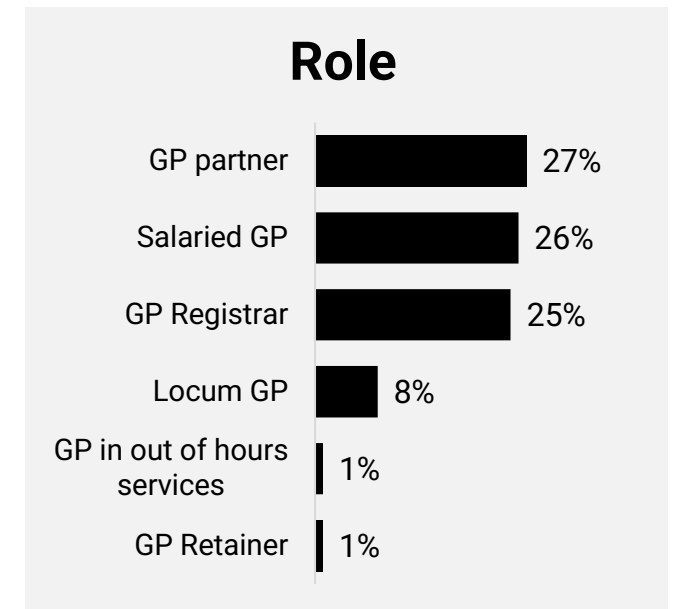
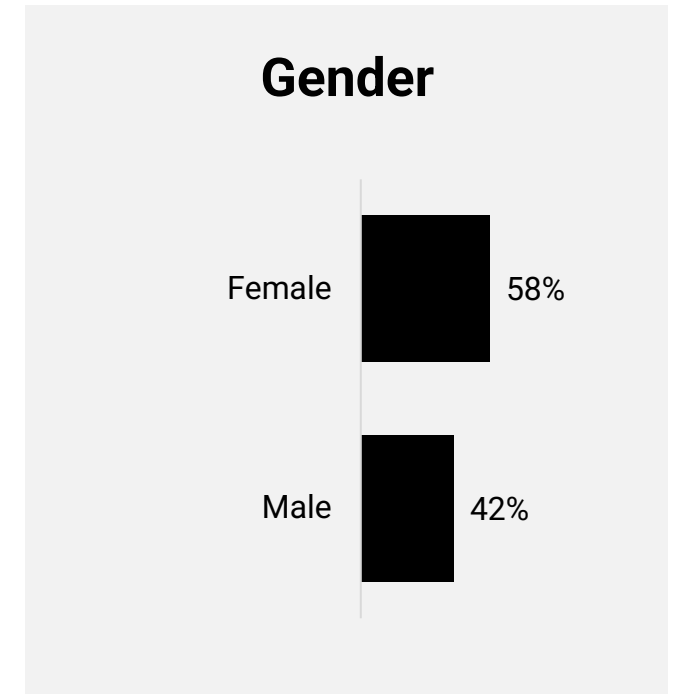
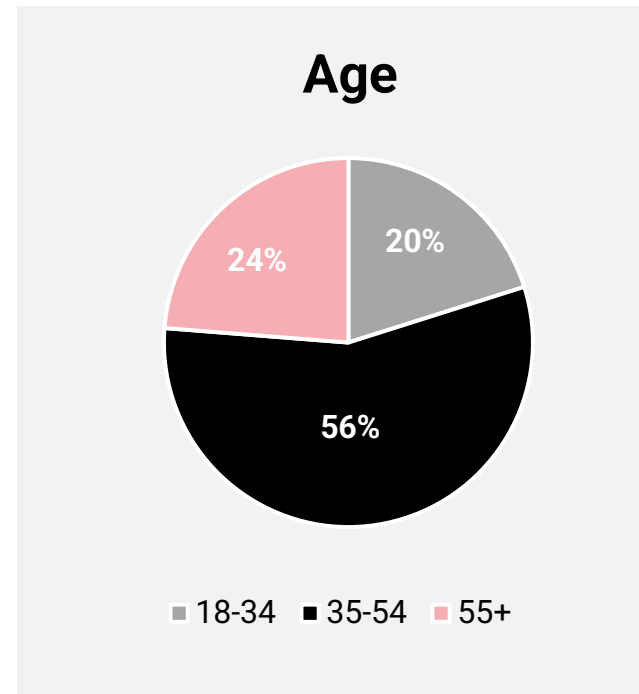
Responses from
the devolved
nations left
unweighted.

Respondent Profile

Savanta surveyed a total of 2,316 RCGP members from 28th July to 20th August 2025.

Notes on Analysis

Quantitative elements of the survey were analysed by Savanta using descriptive statistics, presenting frequencies and percentages. UK wide and nation specific results were provided for all the individual questions. Subgroup analyses were also conducted, by demographic variables (e.g. age and gender) and other agreed variables such as job role, geographical region/ NHS region and use of AI. Significance testing (Z test) at the 95% confidence level was conducted to test whether between group differences are statistically significant or due to chance. The survey was conducted and analysed using built in tools as part of Savanta's proprietary survey software.



Key highlights

Key highlights (1/2)

GP workforce and workload issues

- Finding general practice too stressful (44%) and seeking a better work / life balance (40%) are the leading reason GPs are considering leaving the profession.
- 73% of GPs say patient safety is being compromised by excessive workload and 76% say they don't have enough time to offer health advice for preventative care.
- Reducing administrative (58%) and clinical workload (43%), as well as making a GP partner role less risky (40%) are reported as the interventions most likely to retain GPs in general practice for longer.
- 13% of GPs say they need a visa sponsor to work as a GP in the UK, significantly more (+5%) than in 2024.
- Nearly half (46%) of visa sponsored GPs say they found the visa acquisition process difficult, a significant increase (+10%) from 2024.
 - The most common issues contributing to this were finding a practice 1) with a sponsorship license and a vacancy (49%), and 2) in the area they wanted to work (44%).
- One in four GPs said that they have been looking for work this year and struggled to find a suitable vacancy.
- Many job seeking GPs said they struggled to find a vacancy in the areas they want to work in (89%), and to find roles with enough sessions (51%).
- Two thirds of GPs in their last year of training said that they struggled to find appropriate opportunities anywhere in the UK.

Key highlights (2/2)

Current provision and models of care

- Nearly all GPs (94%) say the involvement of GPs in commissioning healthcare services is important.
- Key concerns amongst GPs in England around the delivery of neighbourhood health services are a lack of GPs and further increases to GP workload (68%), lack of clarity on funding (65%), on the role of GPs (65%) and how these services will be implemented (64%).

Infrastructure

- Three in ten GPs say their building is not fit for purpose, with over half (55%) stating their practice requires additional works.
- Only 8% of GPs say their practice has successfully applied for and obtained funding for additional works.
- A majority of GPs say their IT systems are not fit for purpose in exchanging information with other healthcare settings.

Sustainability

- Just one in three GPs report that their practice has taken steps on improving sustainability in the last five years.
- High workload (51%) and a lack of funding (48%) were cited as the main barriers by GPs to taking these steps.

Use of Artificial Intelligence (AI)

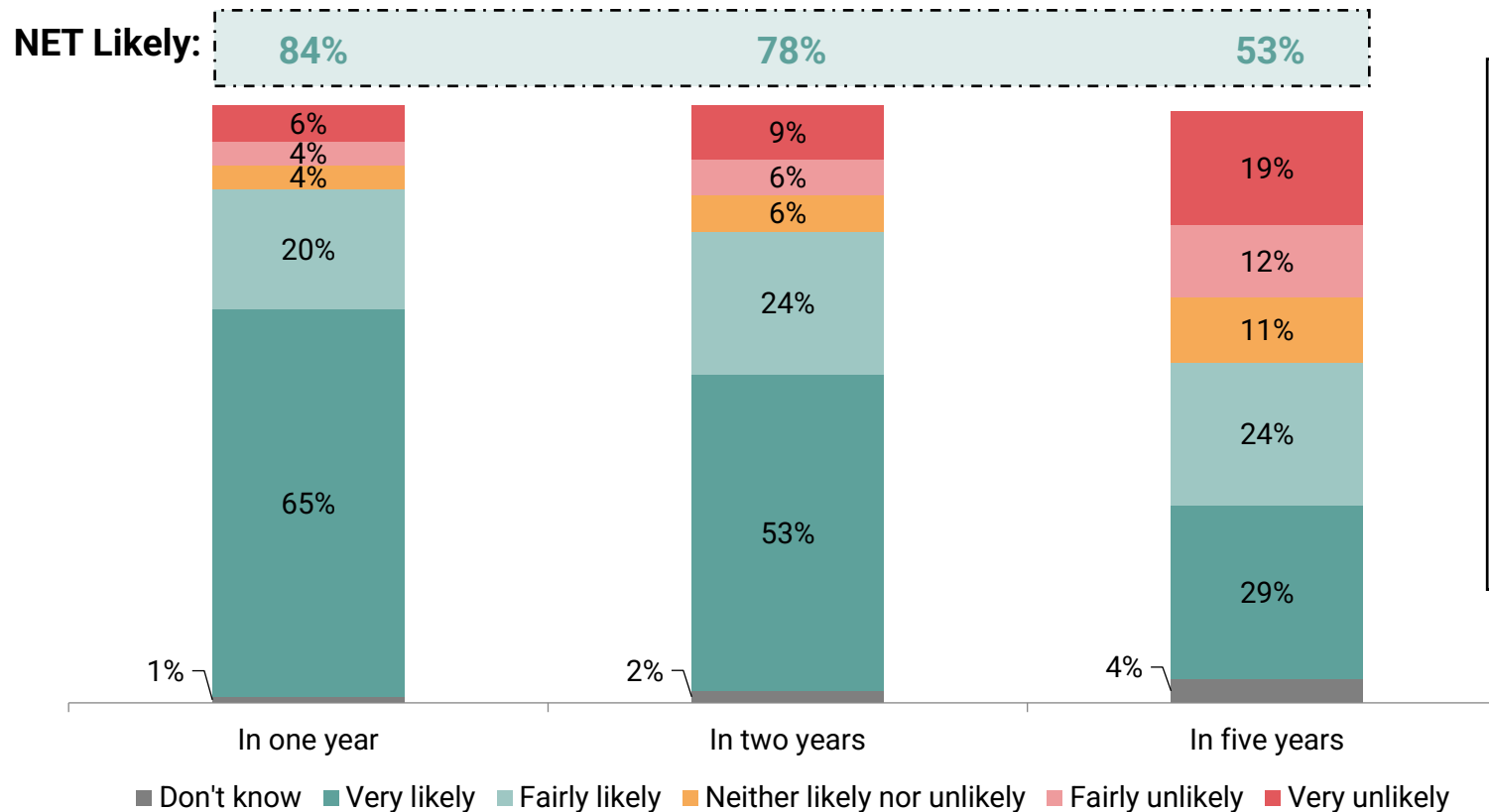
- One in three GPs use AI tools in their work, most commonly for clinical documentation, note taking and professional development.
- Professional liability and regulatory clarity (47%) was the most highly ranked factor influencing GPs' decision about AI adoption or expansion, followed by reassurance about the accuracy and reliability of AI for clinical tasks (43%).
- GPs are particularly concerned about the legal implications of AI usage, with a majority saying they are concerned about professional liability and medico legal issues (86%) and lack of regulatory oversight on AI (84%).
- GPs ranked the top three benefits of AI in the future to be supporting administrative workflow automation (54%), automating clinical documentation and note generation (50%) and patient education and self care guidance tools (31%).

Workforce issues and GP Retention



GPs are broadly confident about remaining in general practice in the short term, albeit their future in the sector is less concrete in the medium to long term (i.e., 5 years and beyond)

Thinking about the future, how likely or unlikely are you to be working in general practice in each of the following time frames?

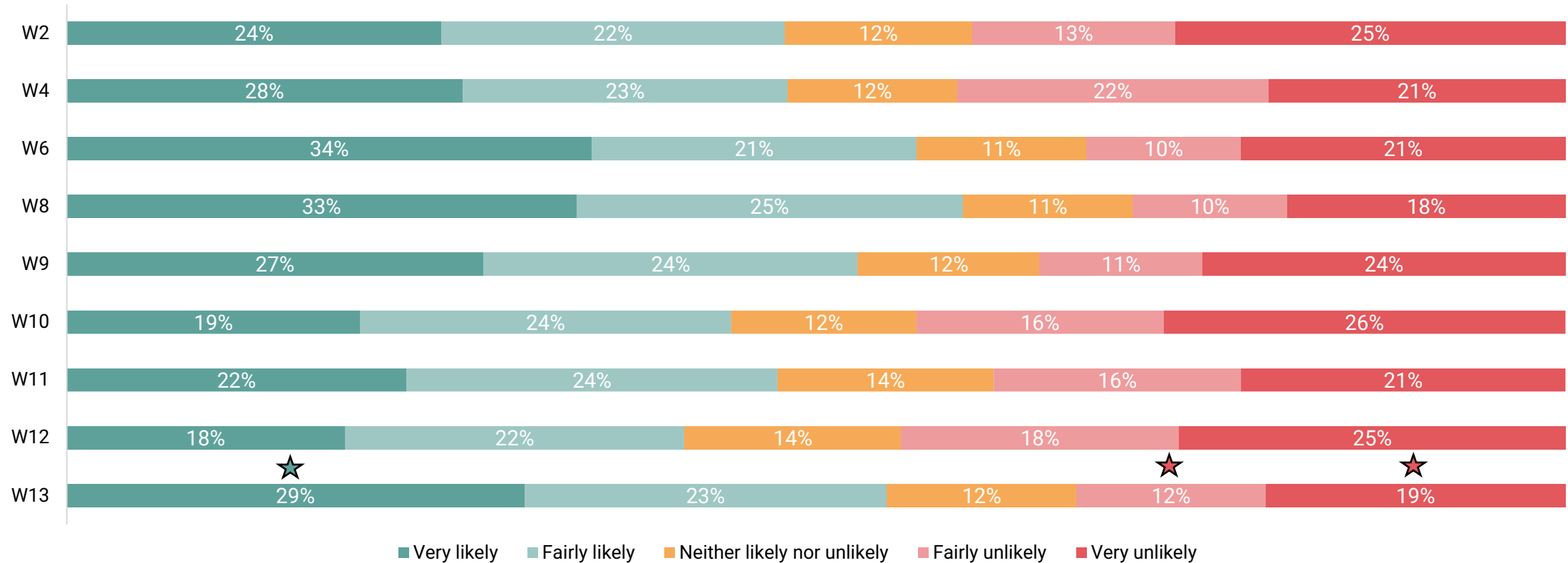


While 56% of 45-54-year-olds report being likely to be working in general practice in five years, this figure is significantly lower among 55-64 year-olds (19%) and 65+ year-olds (9%). This suggests the 55-64 age range as being key in encouraging respondents to retire from general practice.



Relative to 2024, there has been a significant increase in the proportion of English GPs saying they are very likely to stay in general practice in 5 years' time

**Thinking about the future, how likely or unlikely are you to be working in general practice in each of the following time frames?
5 years' time – England wave-on-wave comparisons**



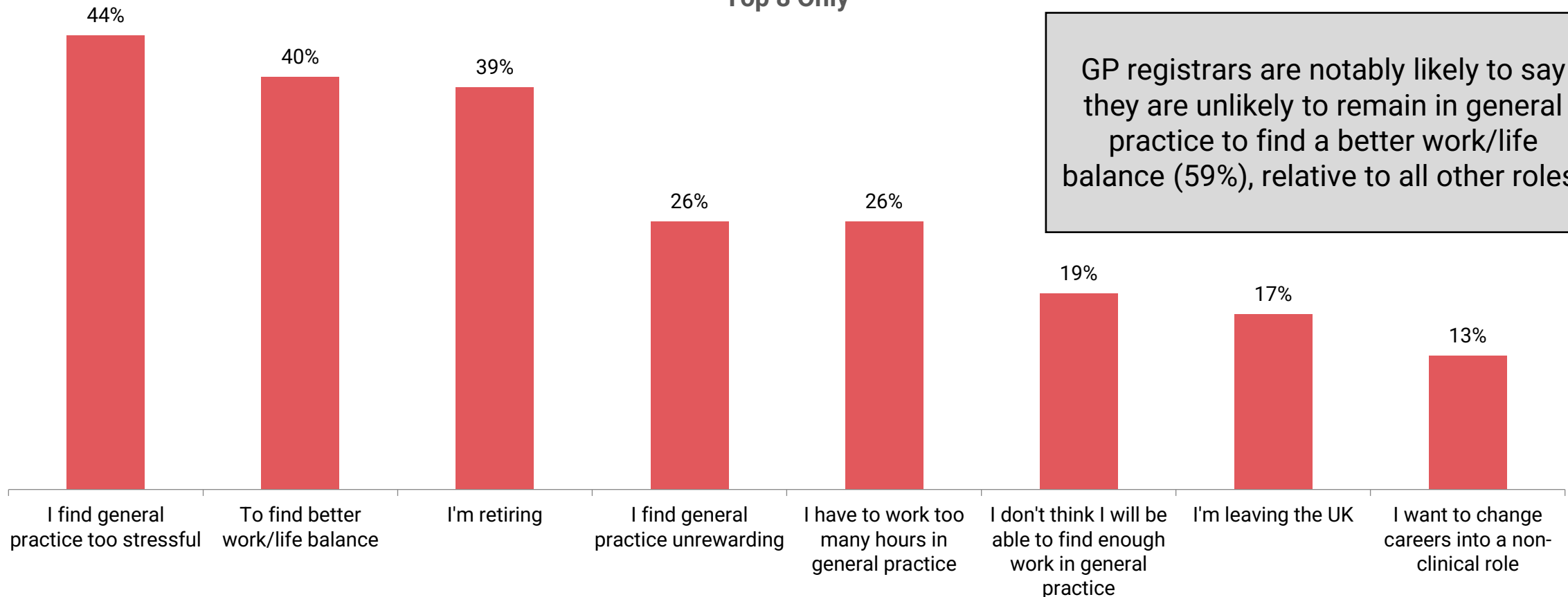
Sample size: Wave 2 (508); Wave 4 (442); Wave 6 (458); Wave 8 (1,183); Wave 9 (619); Wave 10 (1,102); Wave 11 (1,539); Wave 12 (1,697), Wave 13 (1,645)
Base = All English practicing GPs | Q5 = "Thinking about the future, how likely or unlikely are you to be working in general practice in each of the following time frames?" (Single choice) - In five years



Stress is the most common push factor away from general practice, among those that say they are unlikely to be working in the sector in one, two or five-years' time

You said that you are unlikely to still be working in general practice in one, two- or five-years' time. Which of the following reasons, if any, make this the case?

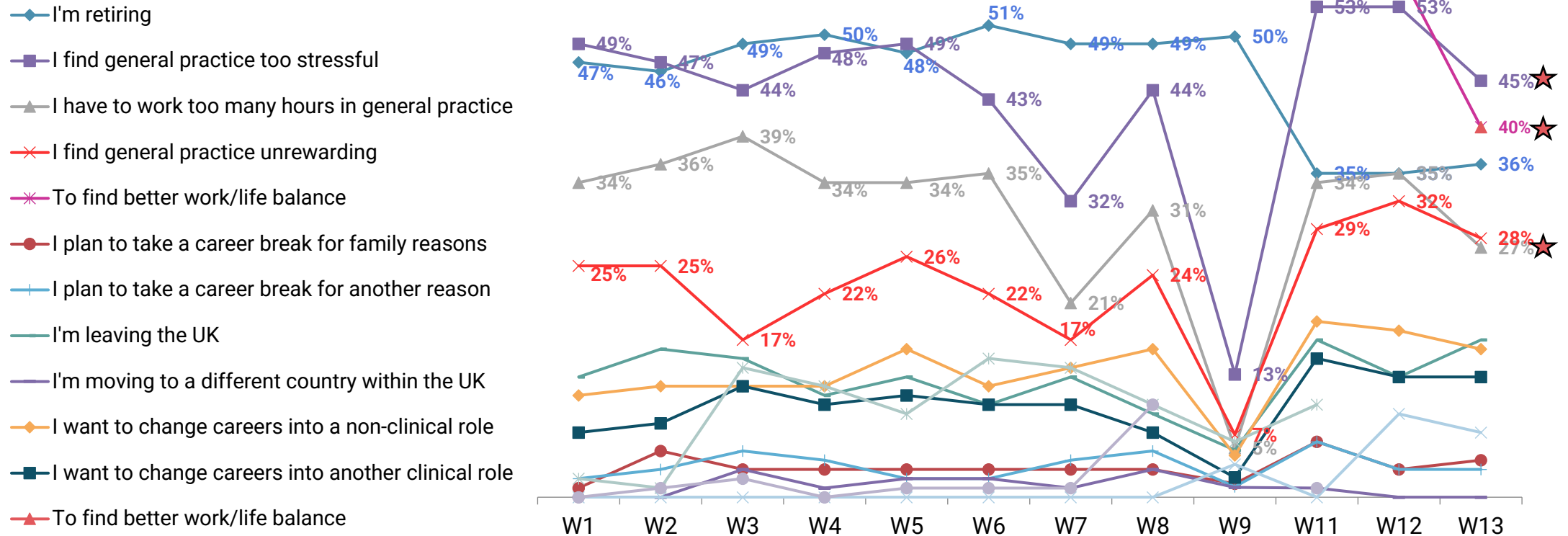
Top 8 Only



GP registrars are notably likely to say they are unlikely to remain in general practice to find a better work/life balance (59%), relative to all other roles.

As a push factor away from general practice, stress has regained its status as the most commonly cited issue, relative to 2024

You said that you are unlikely to still be working in general practice in one, two- or five-years' time. Which of the following reasons, if any, make this the case?
Wave-on-wave comparisons - England



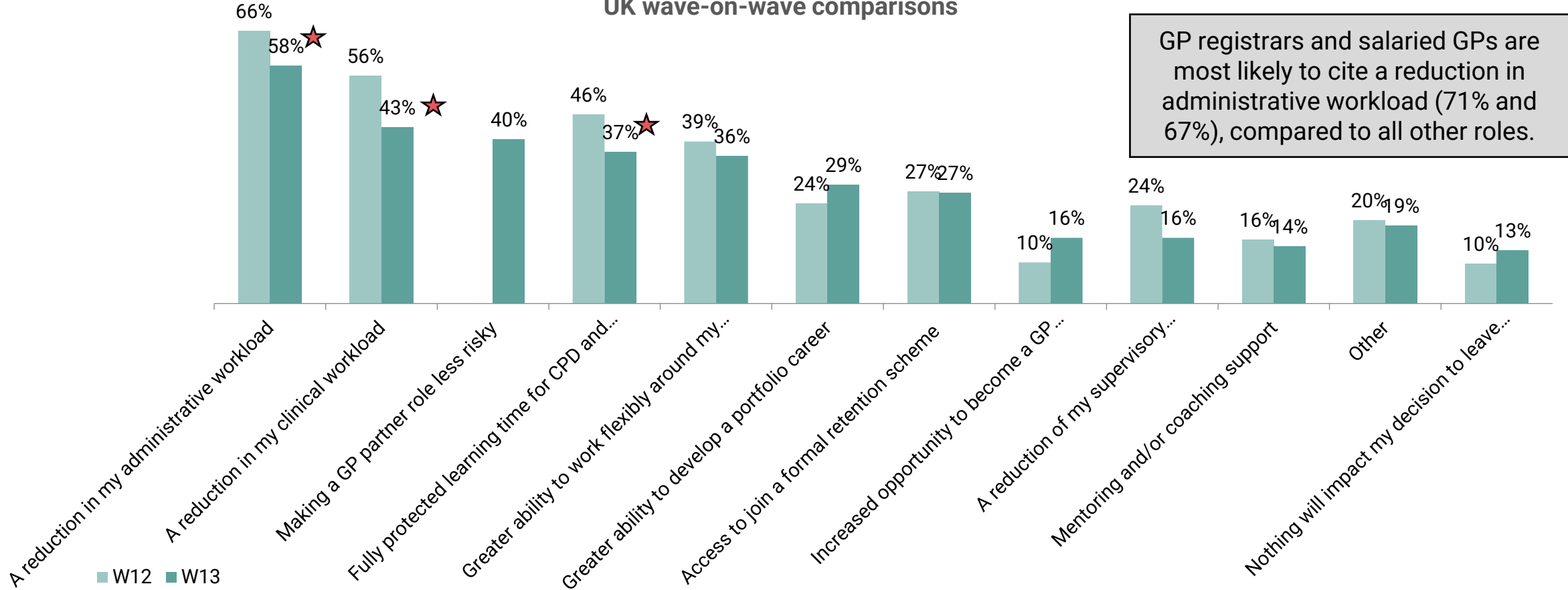
Sample size: Wave 1 (442); Wave 2 (508); Wave 3 (205); Wave 4 (442); Wave 5 (360); Wave 6 (458); Wave 7 (496); Wave 8 (393); Wave 9 (619); , Wave 11 (596), Wave 12 (754), Wave 13 (751) Base: All those in England unlikely to be working in general practice in [one / two / five] years – Wave 10 excluded due to methodological differences | Q6 = "You said that you are unlikely to still be working in general practice in one, two- or five-years' time. Which of the following reasons, if any, make this the case?" (Multiple choice)



Reducing workload emerges as the intervention most likely to retain GPs in general practice for longer

Which, if any, of the following interventions would be likely to retain you in general practice for longer?

UK wave-on-wave comparisons

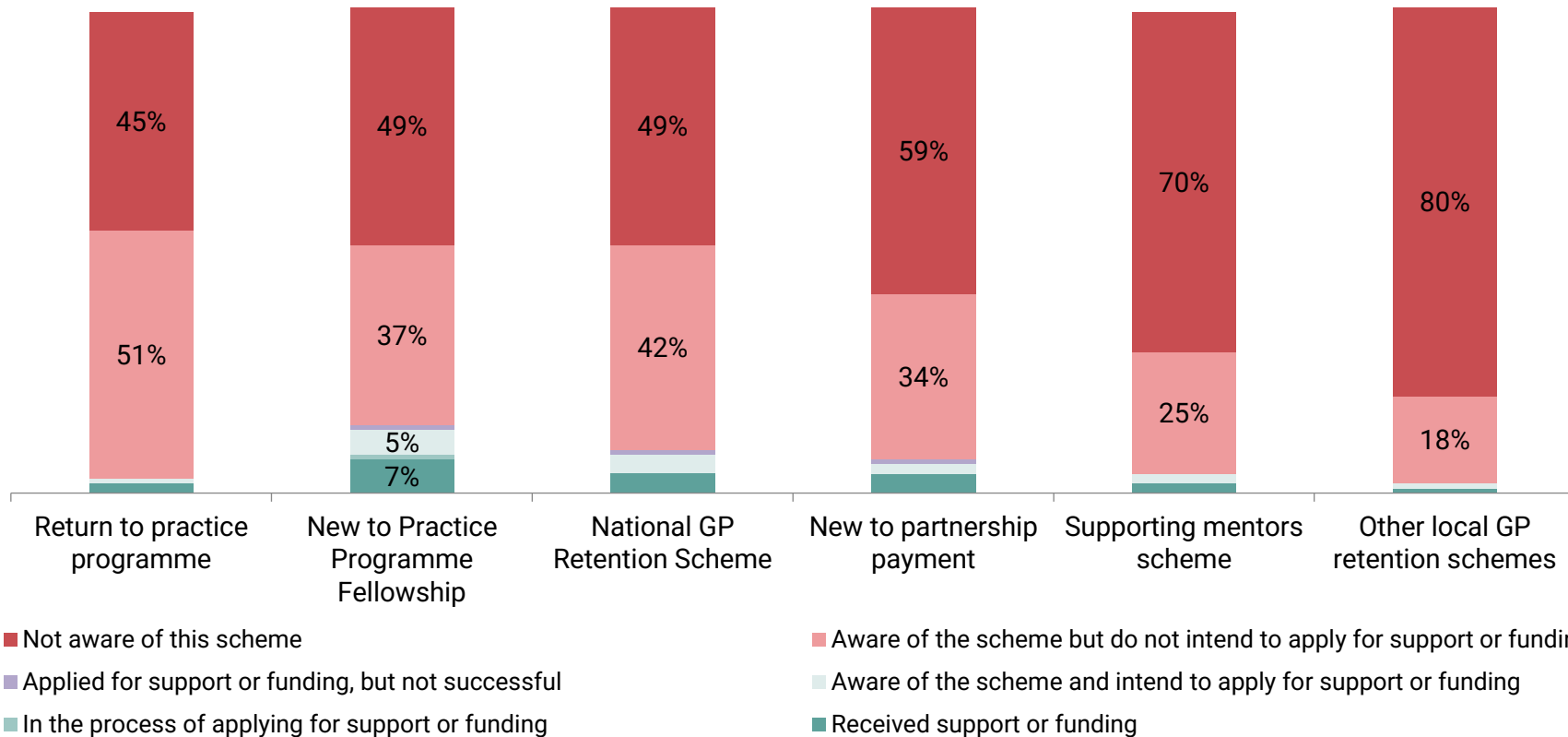


GP registrars and salaried GPs are most likely to cite a reduction in administrative workload (71% and 67%), compared to all other roles.



GP awareness of current and previous retention schemes are patchy, with uptake being low

Have you taken part in any of the following retention schemes?

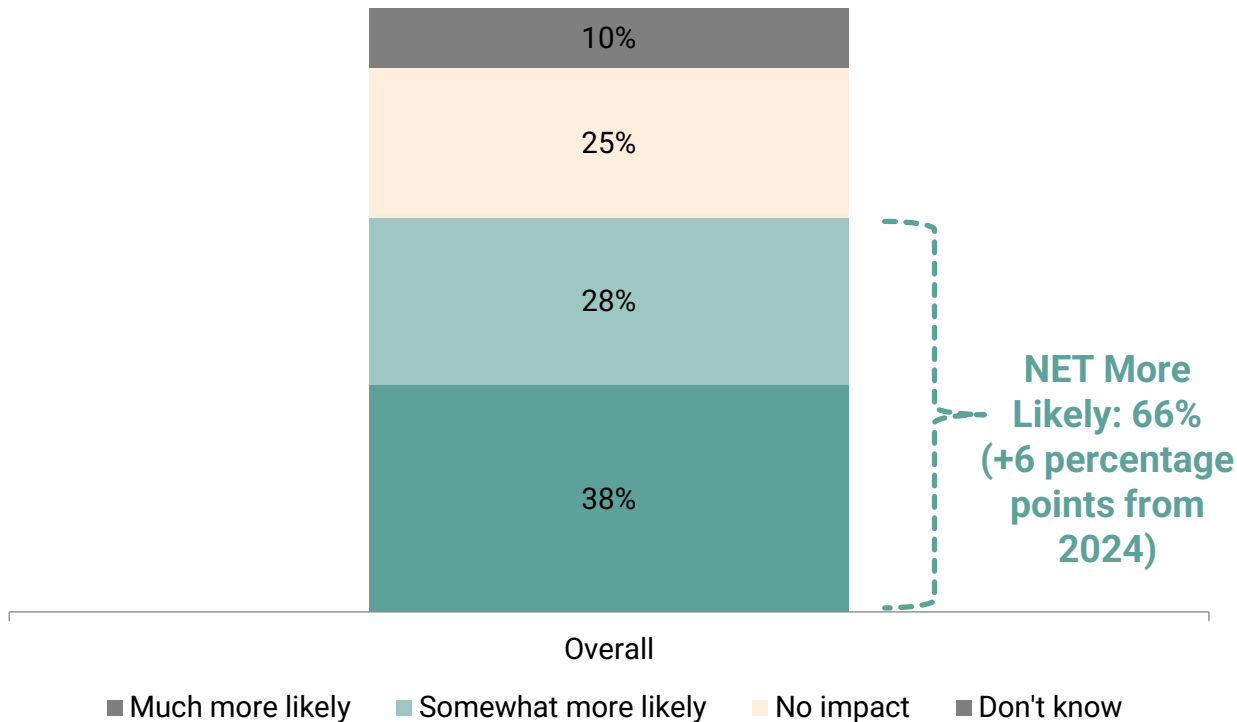


GP registrars in England are notably likely to have **not** heard of the National GP Retention Scheme (77%), with this being significantly higher relative to GP partners (28%), salaried GPs (46%), and locum GPs (39%).



Retention and returner schemes appear to have a positive effect on retention, with two thirds of GPs reporting they are more likely to continue in their role after receiving such support

You said that you have received support or funding for a retention/returner scheme, what impact has this scheme had on the likelihood of you continuing to work as a GP?



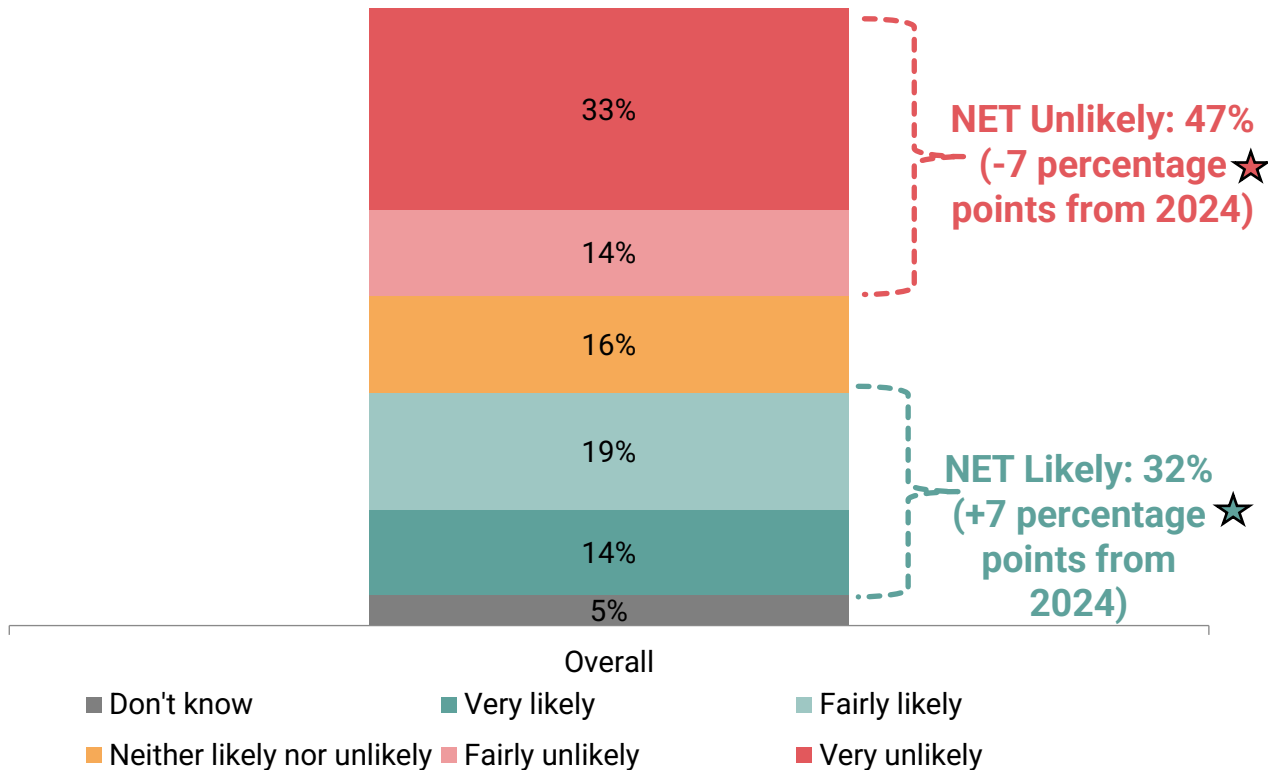
Salaried GPs are notably encouraged by support or funding, with 40% saying this has made them much more likely to continue their work.

This is significantly higher relative to GP partners, where only 27% say this.



One in three GPs say they are likely to consider becoming a GP partner in the future, with GP registrars being most likely to say this

How likely or unlikely are you to consider becoming a GP partner at some point in the future?



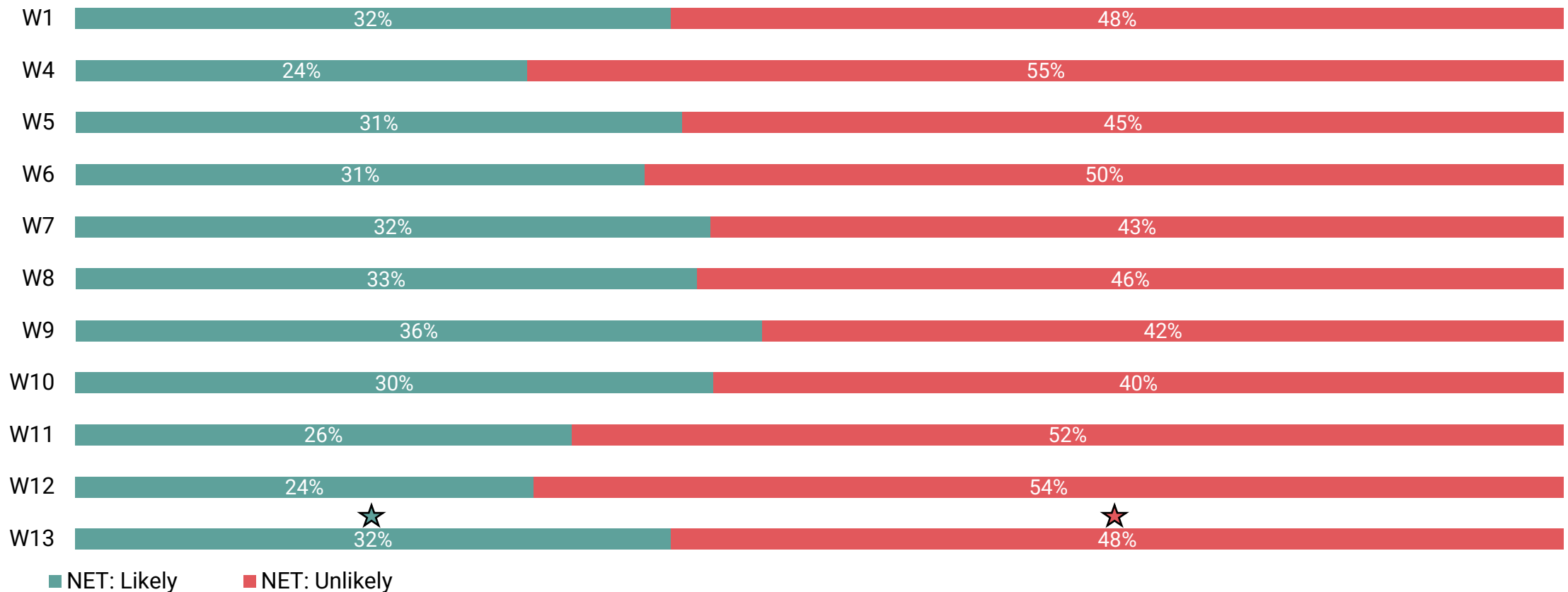
GP registrars are significantly more likely (44%) than salaried GPs (30%) and locum GPs (14%) to say they would be likely to consider becoming a GP partner at some point in the future.

Consideration is significantly higher among 25-34-year-olds (41%), relative to those aged 35-54 (33%) and 55+ (10%).



Relative to 2024, there has been a significant increase in the proportion of GPs who would consider becoming a GP partner at some point in the future

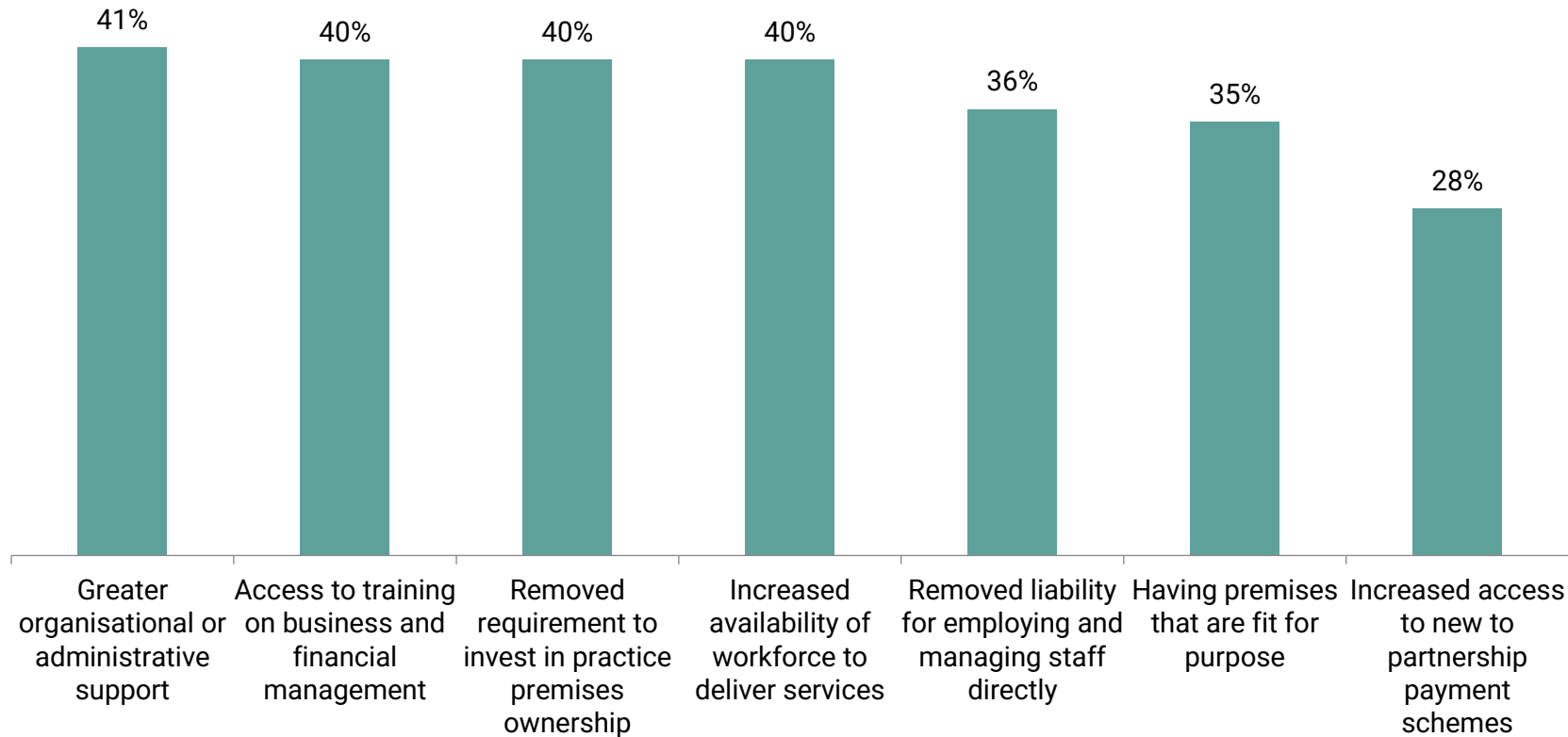
How likely or unlikely are you to consider becoming a GP partner at some point in the future?
NET: Likely vs. Unlikely - England wave-on-wave comparisons





Among those not interested in becoming a GP partner, a wide range of factors would make this role more attractive, including greater organisational and administrative support

**What would make becoming a GP partner more attractive?
Top 7 Only**



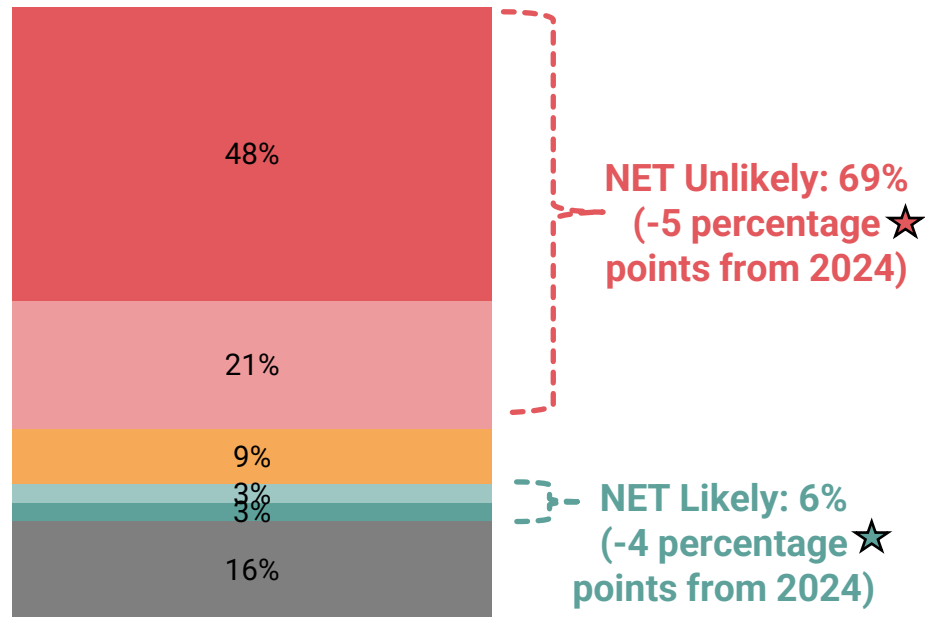
Women are significantly more likely to cite access to training on business and financial management as a factor (45%), relative to men (30%).

Those requiring a visa to work in the UK are notably likely to cite organisational and administrative support as a factor (61% vs 39% among those that don't require a visa).



GPs are broadly confident that their practice will not close in the next year, highlighting that existing workplace challenges do not necessarily encourage lack of faith in practices to survive as a whole

Thinking about the practice where you work, how likely or unlikely do you think it is that it will close or that your contract will be handed back in the next year?



Welsh respondents are significantly more likely than those of other GB nations to say their practice is likely to close (12%, vs 7% in Scotland and 6% in England).

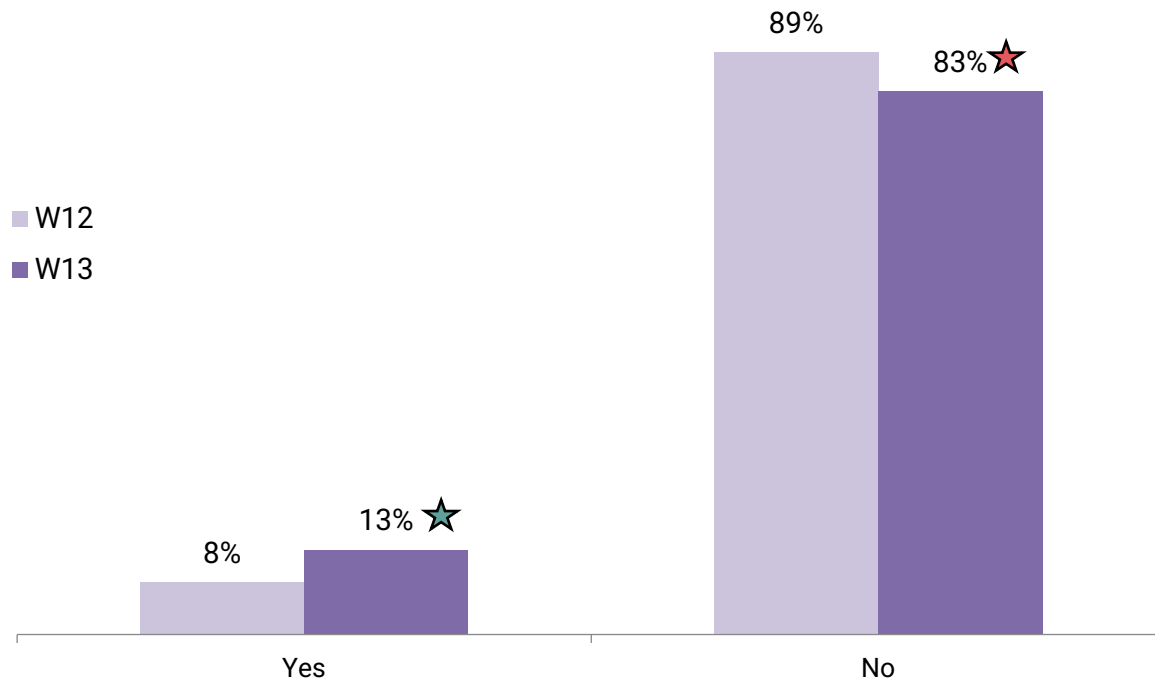
Compared to other roles, GP partners are notably likely to say unlikely here (89%).

- Don't know
- Very likely
- Fairly likely
- Neither likely nor unlikely
- Fairly unlikely
- Very unlikely

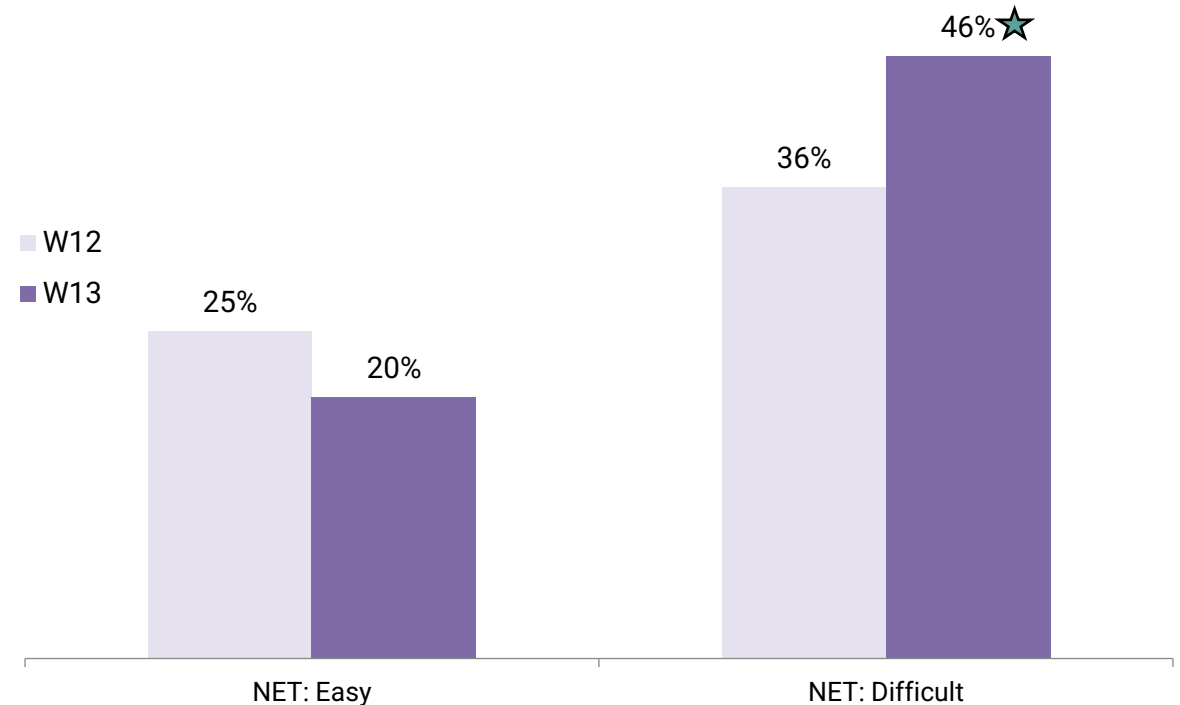


Almost half of visa-sponsored GPs say they found the visa acquisition process difficult, which represents a significant increase from 2024

Did you need a visa sponsor to work as a GP in the UK?
UK wave-on-wave comparisons



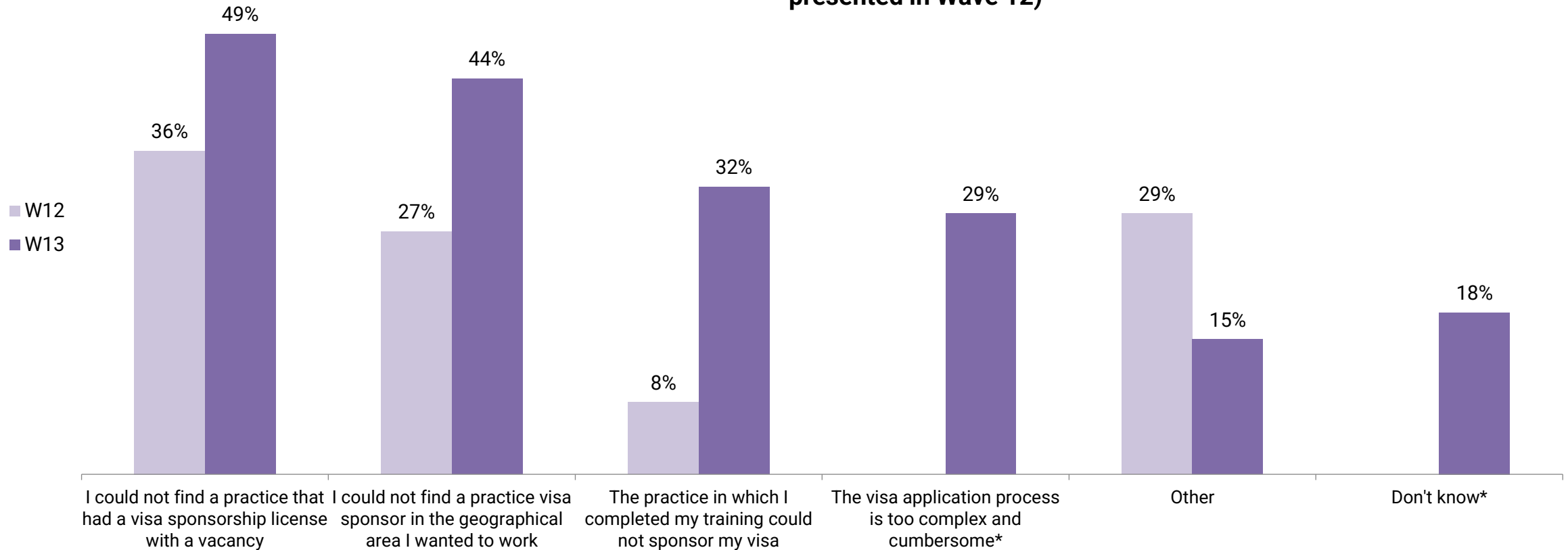
How easy or difficult did you find it to gain visa sponsorship to work in general practice?
NET: Easy vs. Difficult - UK wave-on-wave comparisons





Finding a practice with both a vacancy and a visa sponsorship license was the most common challenge encountered by those who found it difficult to get a visa

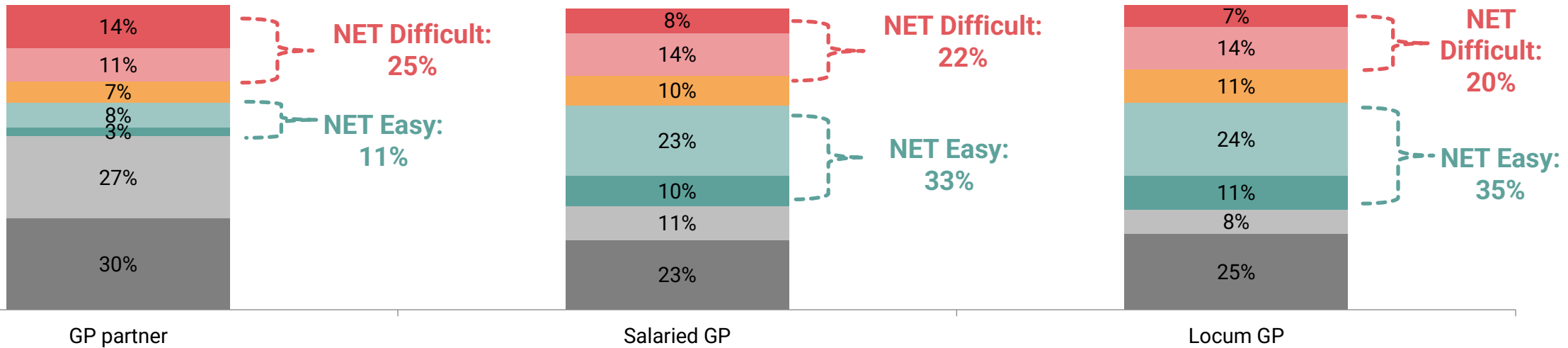
Which of the following reasons best describes why you found gaining visa sponsorship difficult? (*options not presented in Wave 12)



Recruitment and Employment Opportunities

GPs' experiences of recruiting over the past year are mixed, with GP partner roles being most likely to not have been recruited for

Thinking about the practice where you work, how easy or difficult would you say it has been over the past year to recruit for each of the following GP positions (excluding ARRS roles in England)?



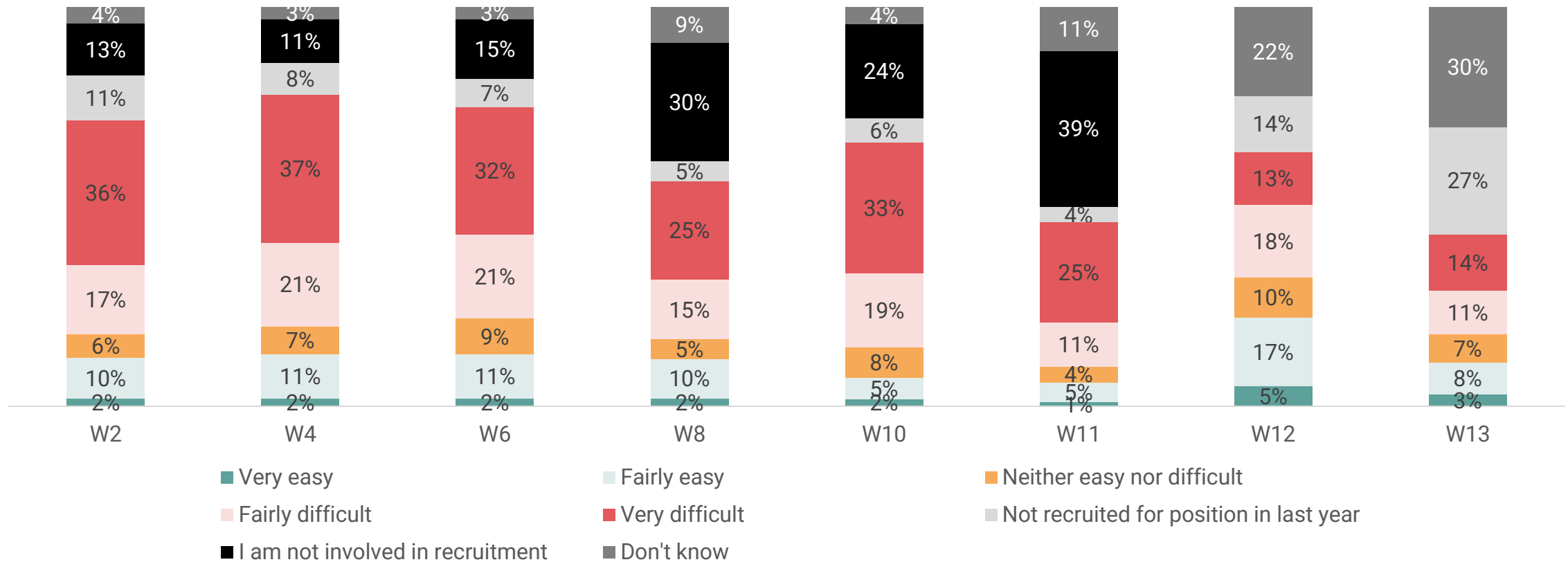
Don't know
 We have not recruited for this position in the last year
 Very easy
 Fairly easy
 Neither easy nor difficult
 Fairly difficult
 Very difficult

- English respondents are significantly more likely (35%) than Scottish (25%) and Northern Irish (20%) respondents to say recruitment for salaried GP roles has been easy.
- Those in affluent areas are more likely to have found it easy to recruit Salaried GPs (37%) and Locum GPs (40%), relative to those in deprived areas (32% and 35% respectively).
- Looking at ICB regions, those in the East of England (29%) are notably likely to have found it difficult to recruit salaried GPs.



In the most recent wave, a quarter of practicing GPs said that it had been difficult to recruit for some positions over the past year

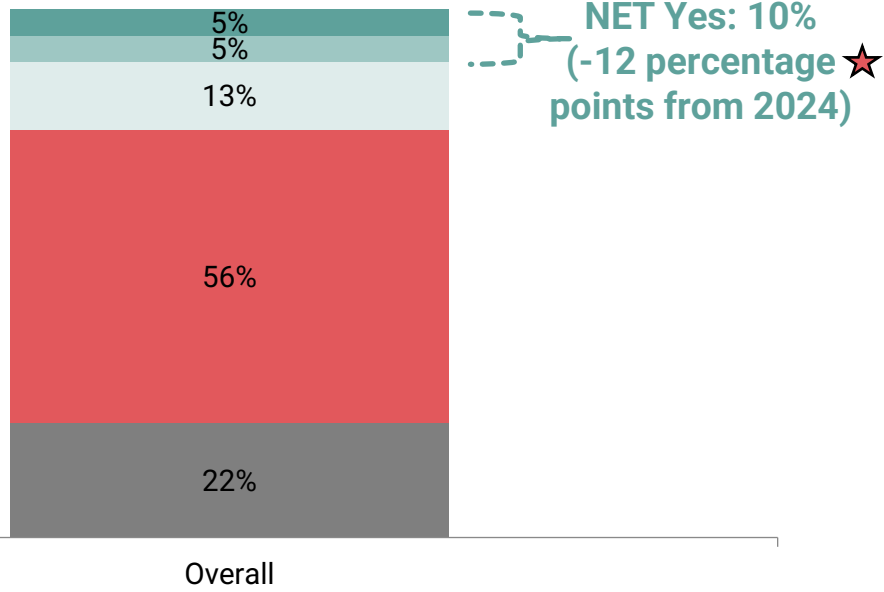
Recruitment of Salaried GP by wave - * note in W12 and 13 this question was only asked of those involved in recruitment





Just one in ten GPs say their practice has had GP vacancies open for more than three months

Thinking about the practice where you work, are there currently any GP vacancies that have been open for more than three months?



- Yes, more than one
- Yes, one
- None currently, but there have been in the past year
- None in the past year
- Don't know

Those in Northern Ireland are significantly more likely to say 'Yes more than one' (14%), relative to those in England (4%), Wales (4%), and Scotland (5%).

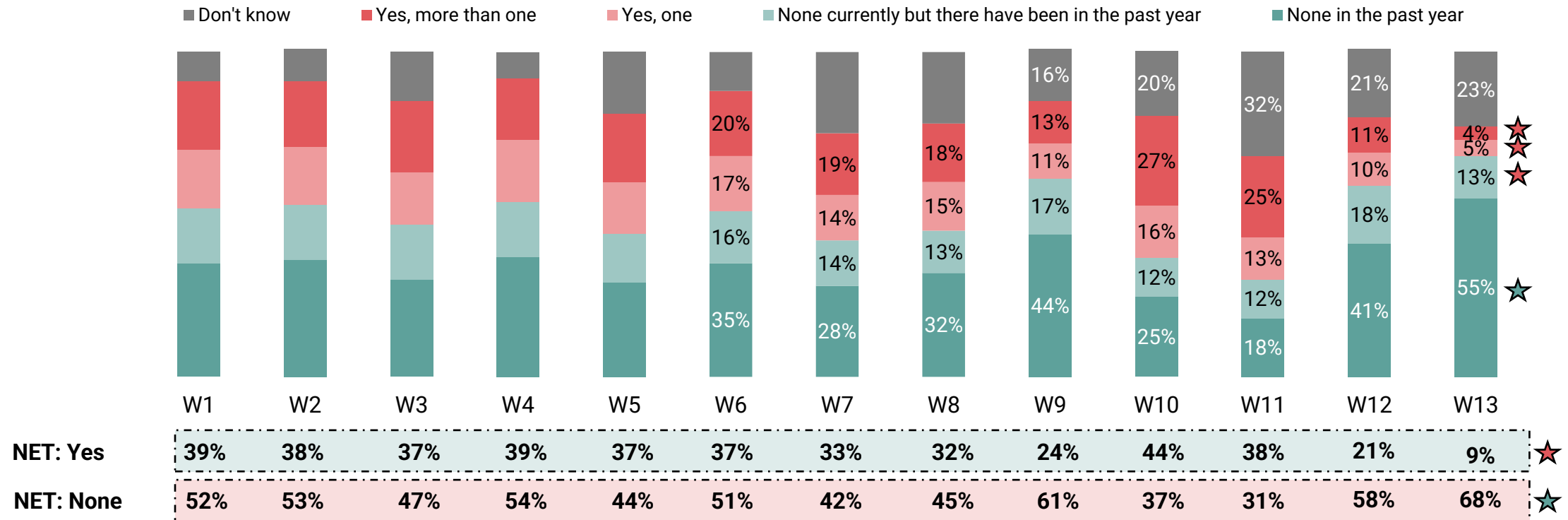
Those in East of England are notably likely to say 'Yes, one' or 'Yes, more than one' (14%). This is in particular contrast to the North West (5%).

Here, there were no significant differences on the basis of deprivation.



GP vacancies have hit an all-time high in terms of these not being open for more than three months

Thinking about the practice where you work, are there currently any GP vacancies that have been open for more than three months?
England wave-on-wave comparisons

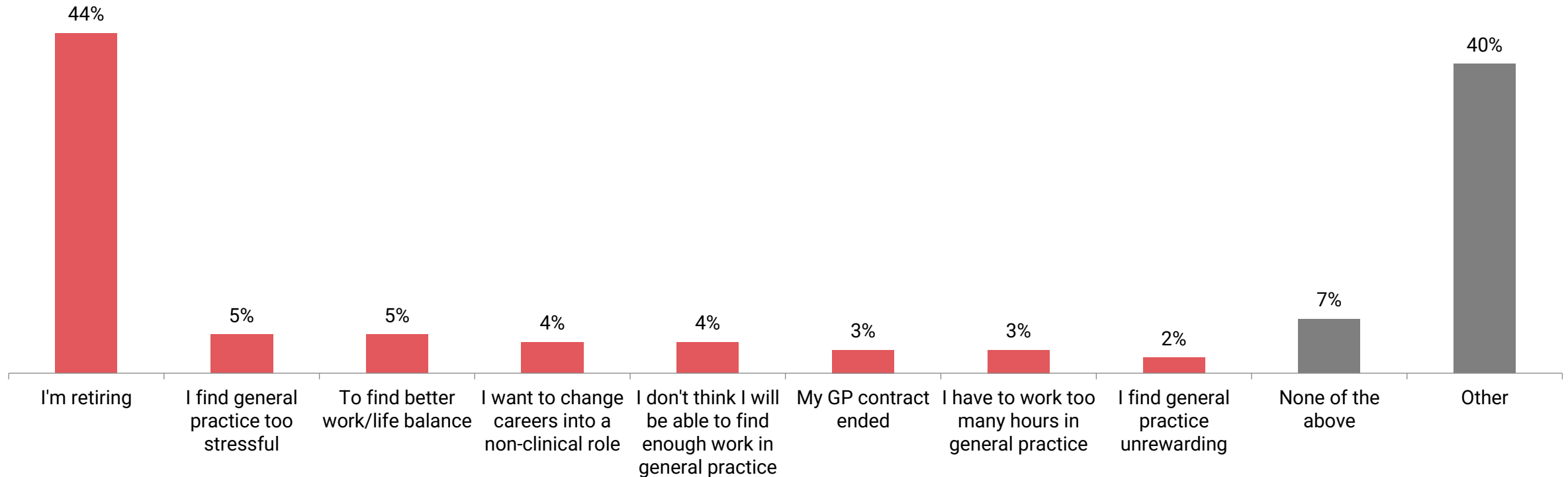


Sample size: Wave 1 (1,288); Wave 2 (1,250); Wave 3 (814); Wave 4 (1210); Wave 5 (1,080); Wave 6 (1,347); Wave 7 (1,569); Wave 8 (1,172); Wave 9 (619); Wave 10 (1,095) Wave 11 (1,539); Wave 12 (1,697); Wave 13 (1,645) | Base = All English practicing GPs | Q29 = "Thinking about the practice where you work, are there currently any GP vacancies that have been open for more than three months?" (Single choice)



Among those not currently practicing, the most common reason for this was retirement

Why are you not currently practicing as a clinician in general practice Top 10



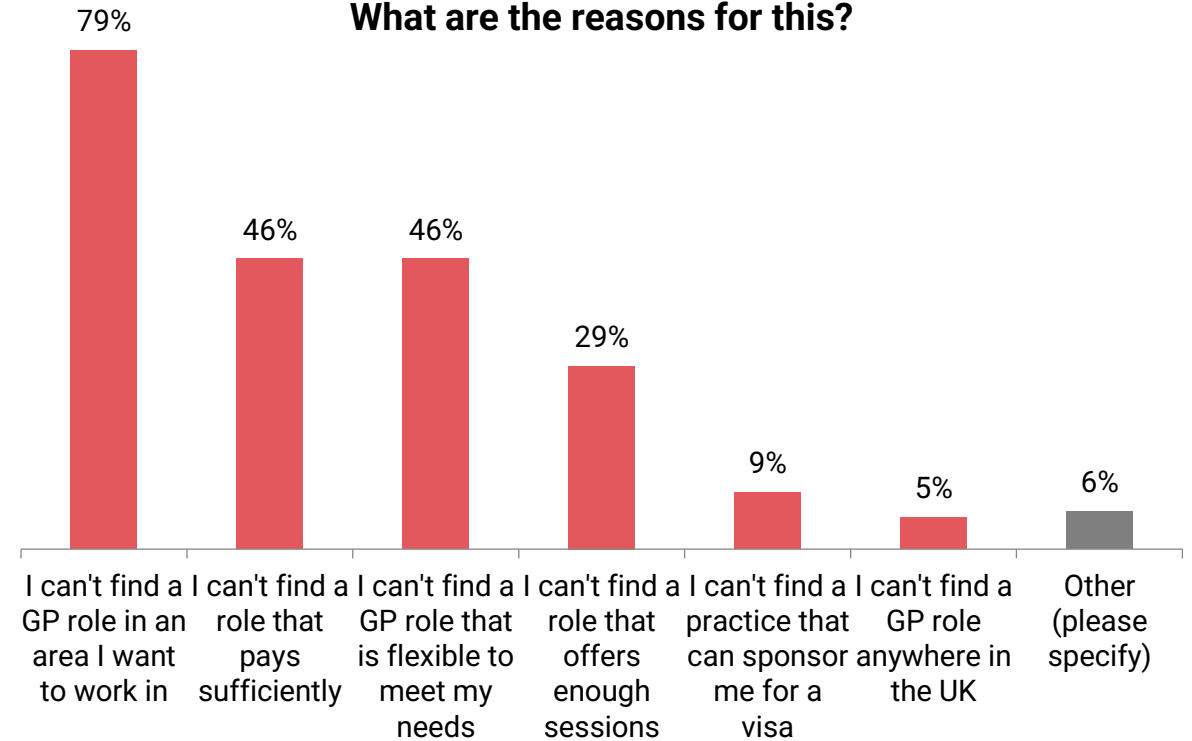


Over half of job-seeking GPs found it difficult to find an appropriate vacancy

40% of GPs have looked for a job in the past year – however this varies notably by role, with just 12% of GP partners saying this

67% of job-seeking GPs found it difficult to find an appropriate vacancy

You have said you found it difficult to find an appropriate NHS GP vacancy to apply for. What are the reasons for this?



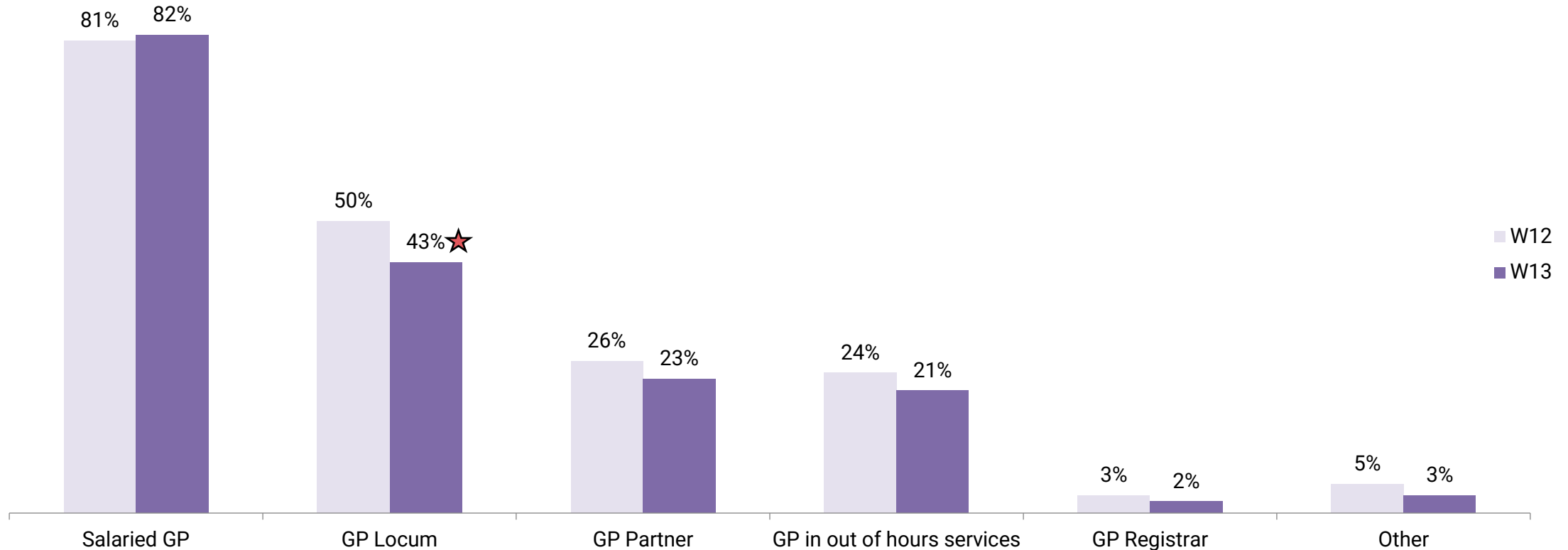
Sample size: n = 1,829 | Base = All practicing GPs | Q30 = "If you have looked for a new GP clinical position in an NHS practice over the last year, how easily did you find an appropriate vacancy to apply for?" (Single choice)

Sample size: n = 475 | Base = Job-seekers who found the process difficult | Q32 = "You have said you found it difficult to find an appropriate NHS GP vacancy to apply for. What are the reasons for this?" (Multiple choice)



Among those that have found it difficult to find an appropriate vacancy, this most commonly relates to the position of salaried GP

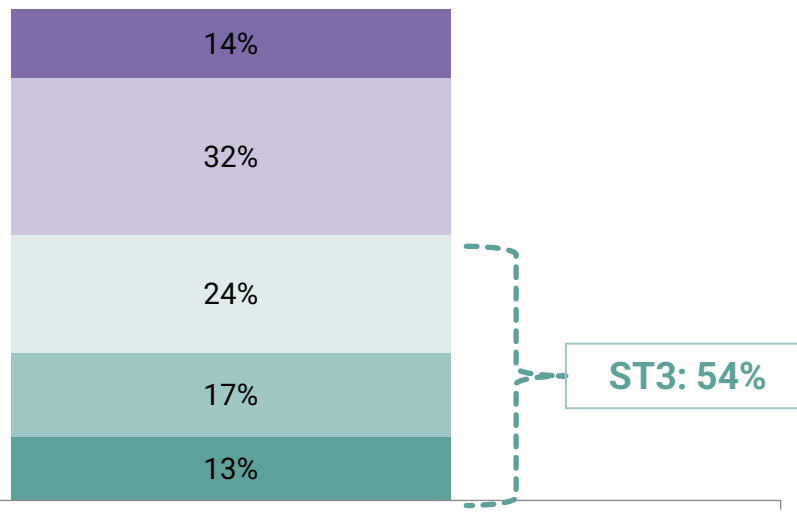
**You have said you found it difficult to find an appropriate NHS GP vacancy to apply for.
What are the reasons for this?
UK wave-on-wave comparisons**





Job-seeking among ST3 Registrars peaks closest to CCT, with four in ten actively looking with three months until they qualify

Which of the following best describes your current career stage?



- ST1 GP registrar
- ST2 GP registrar
- ST3 GP registrar > 6 months from CCT
- ST3 GP registrar ≥ 3 - 6 months from CCT
- ST3 GP registrar < 3 months from CCT

25% of ST3 GP registrars are looking for a job, with 9% having already found one and 56% not currently looking.

Among ST3 GP registrars < 3 months away from CCT, 42% are looking for a job, with 31% having already found one and 22% not currently looking.

So far, job-seeking ST3 GP registrars have applied for 11 jobs on average.

Sample size: n = 590 | Base = GP registrars | Q23 = "Which of the following best describes your current career stage? 'ST' stands for Specialty Training and whether you are in year 1, 2 or 3" (Single choice)

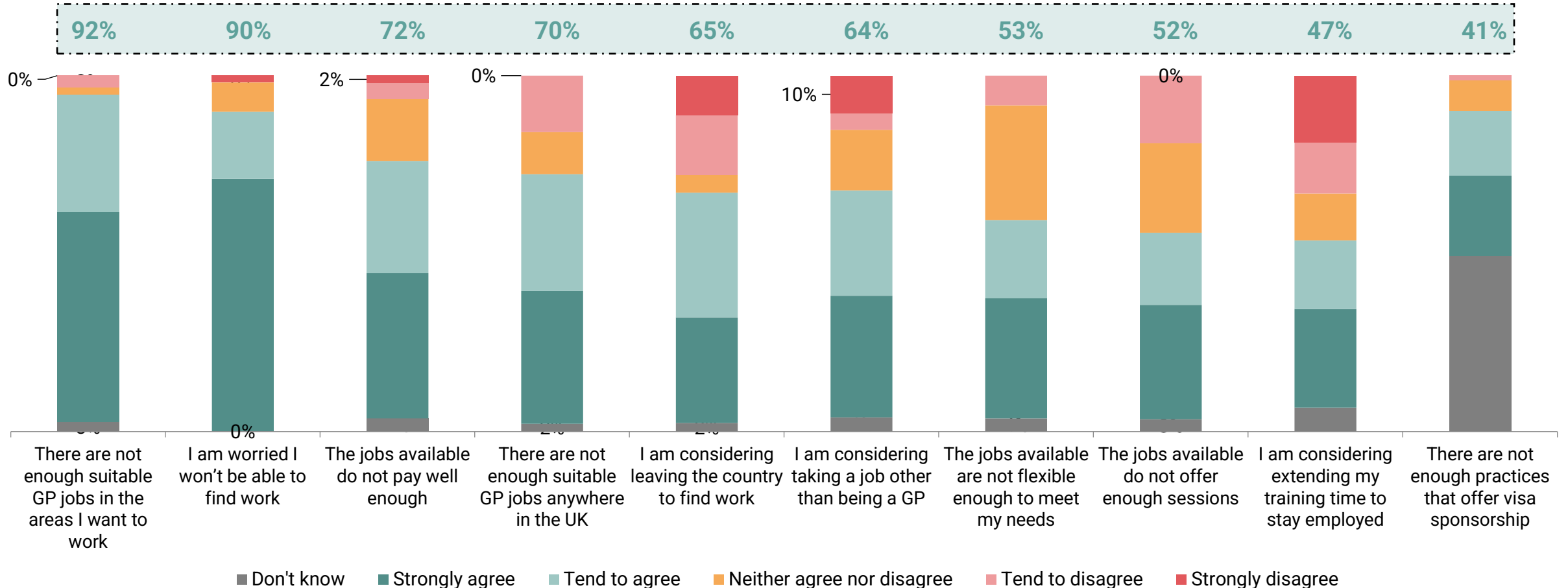
Sample size: n = 311 | Base = ST3 GP registrars | Q24 = "Which of the following best describes your current situation?" (Single choice)

Sample size: n = 77 | Base = Job-seeking ST3 GP registrars | Q25 = "How many GP roles have you applied for so far?"



Nearly two-thirds of GP registrars are considering either leaving the UK to find work or taking a job other than being a GP

NET Agree: To what extent do you agree or disagree with the following statements?

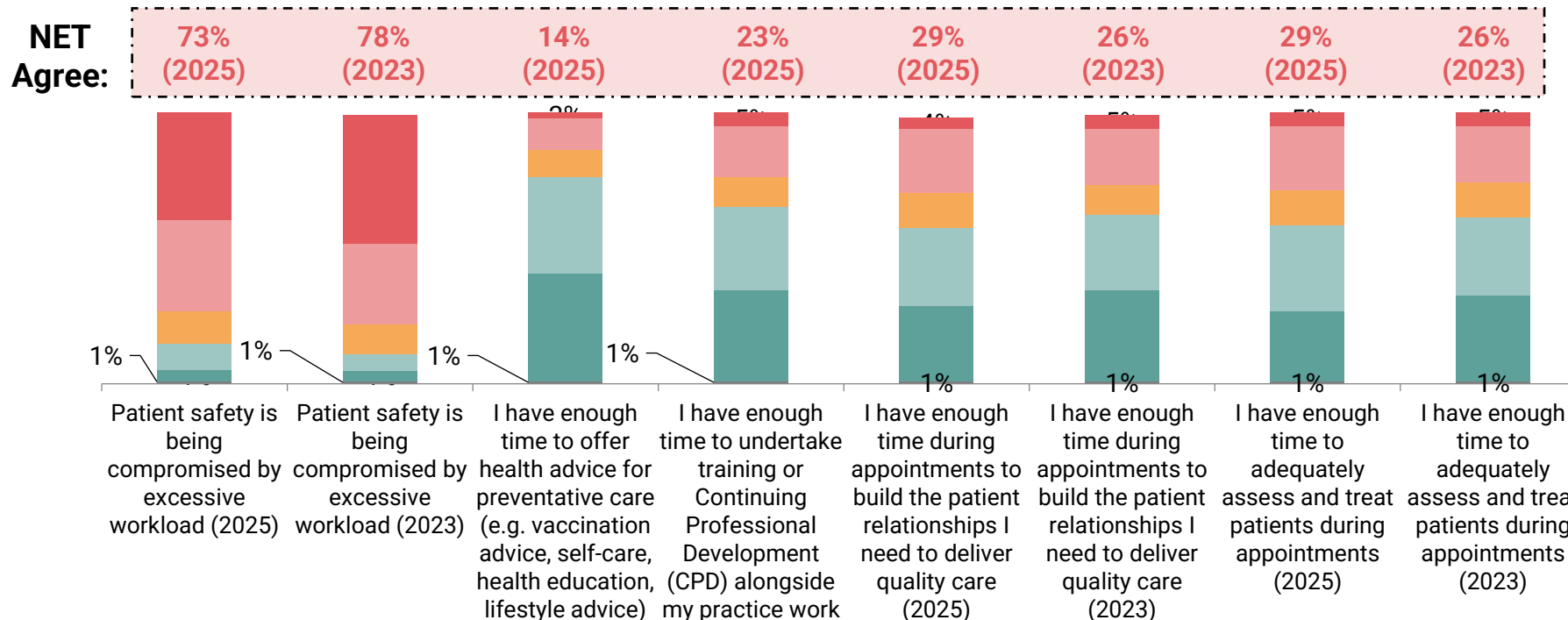


Current Provision and Models of Care



GPs widely report current provision being strained, with almost three quarters agreeing patient safety is being compromised by excessive workload

Agreement with statements about capacity to provide high quality patient care



73% of GPs agree patient safety is being compromised by excessive workload.

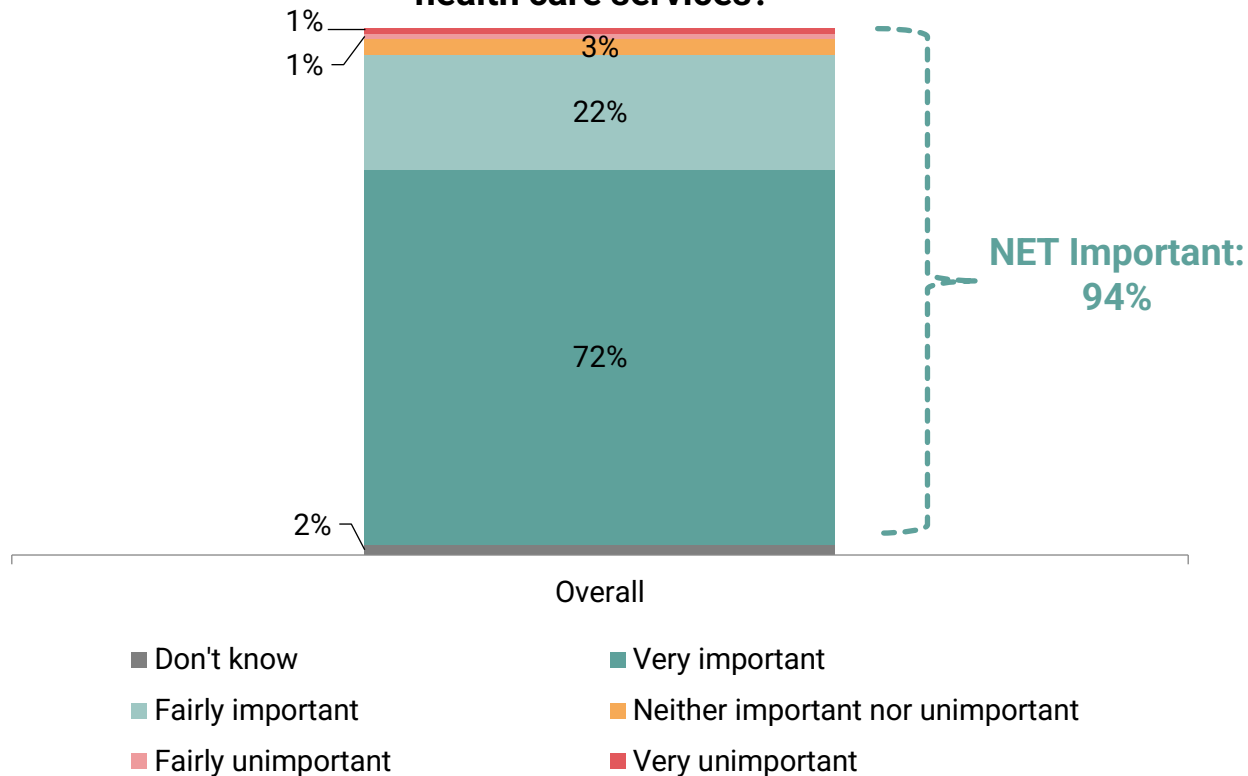
Here, Welsh (84%) and Northern Irish (85%) GPs are more likely to agree, relative to those in Scotland (71%) and England (73%).

Legend: Don't know (grey), Strongly disagree (dark teal), Tend to disagree (light teal), Neither agree nor disagree (orange), Tend to agree (pink), Strongly Agree (red)



GPs widely see the value of being involved in commissioning decisions, with over seven in ten identifying GP involvement as very important

To what extent do you believe it is important for GPs to be involved in making commissioning decisions about health care services?



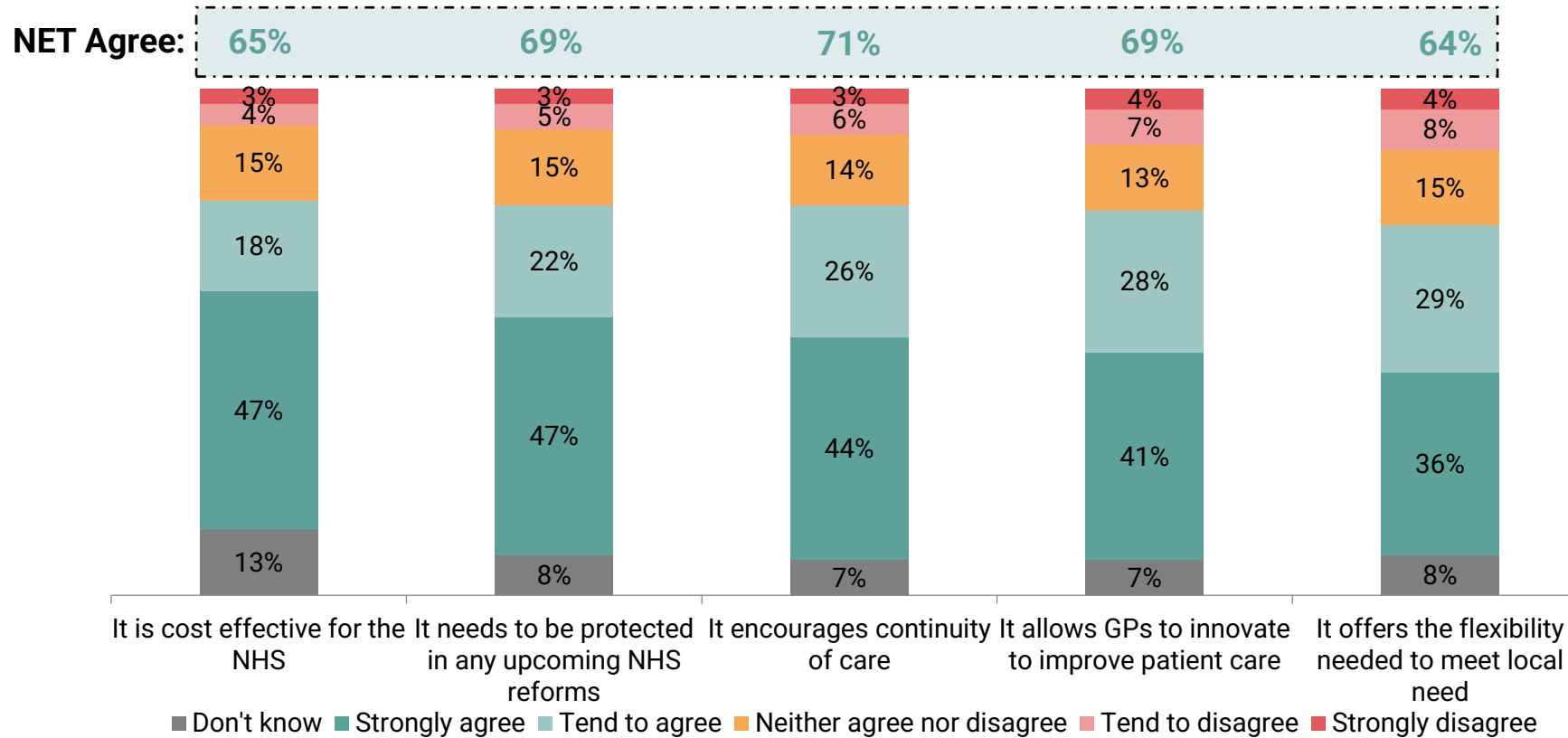
GP sentiment is broadly consistent across the demographic groups, albeit with those from deprived areas being more likely to say that involvement is very important (75%), compared to those in affluent areas (70%).

Respondents in Scotland (88%) are significantly less likely than those in England (95%) to find involvement important.



GPs have a widely positive view of the partnership model, with over two thirds agreeing it needs to be protected with any upcoming NHS reforms

To what extent do you agree or disagree with the following statements about the independent contractor / partnership model of general practice?



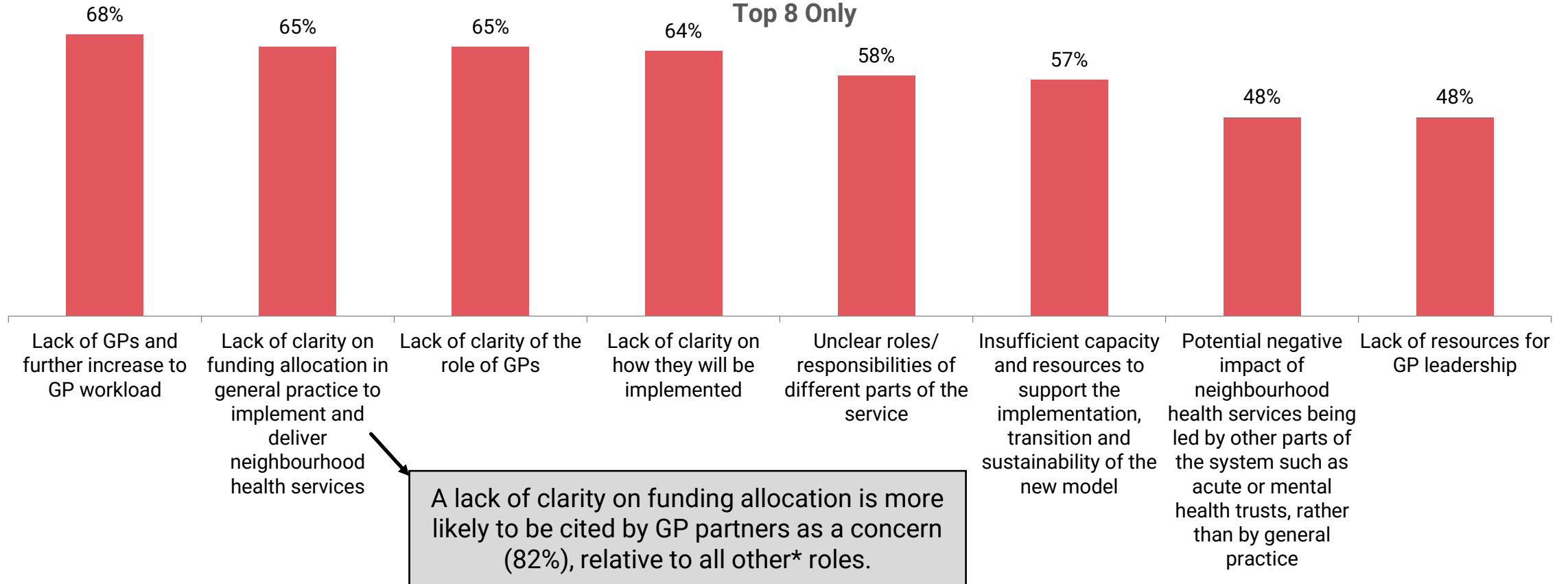
Scottish respondents (71%) are significantly more likely than those from England (63%) to agree that the independent contractor / partnership model of general practice offers the flexibility needed to meet local need.



Achieving clarity and protecting GP workload are key concerns held by English GPs in the context of the proposed 'neighbourhood health' services

What are your main concerns (if any) about the implementation of 'neighbourhood health' services as proposed by the 10 Year Health Plan for England?"

Top 8 Only



Workload



Over a third of GPs work more than 40 hours per week – despite their contractual hours often being lower

Average working times – by role

	Contracted Hours	Actual Hours
Overall	29.9	35.2
GP partner	33.0	40.8
Salaried GP	25.3	31.4
GP registrar	35.6	38.5
Locum GP	21.1	23.5

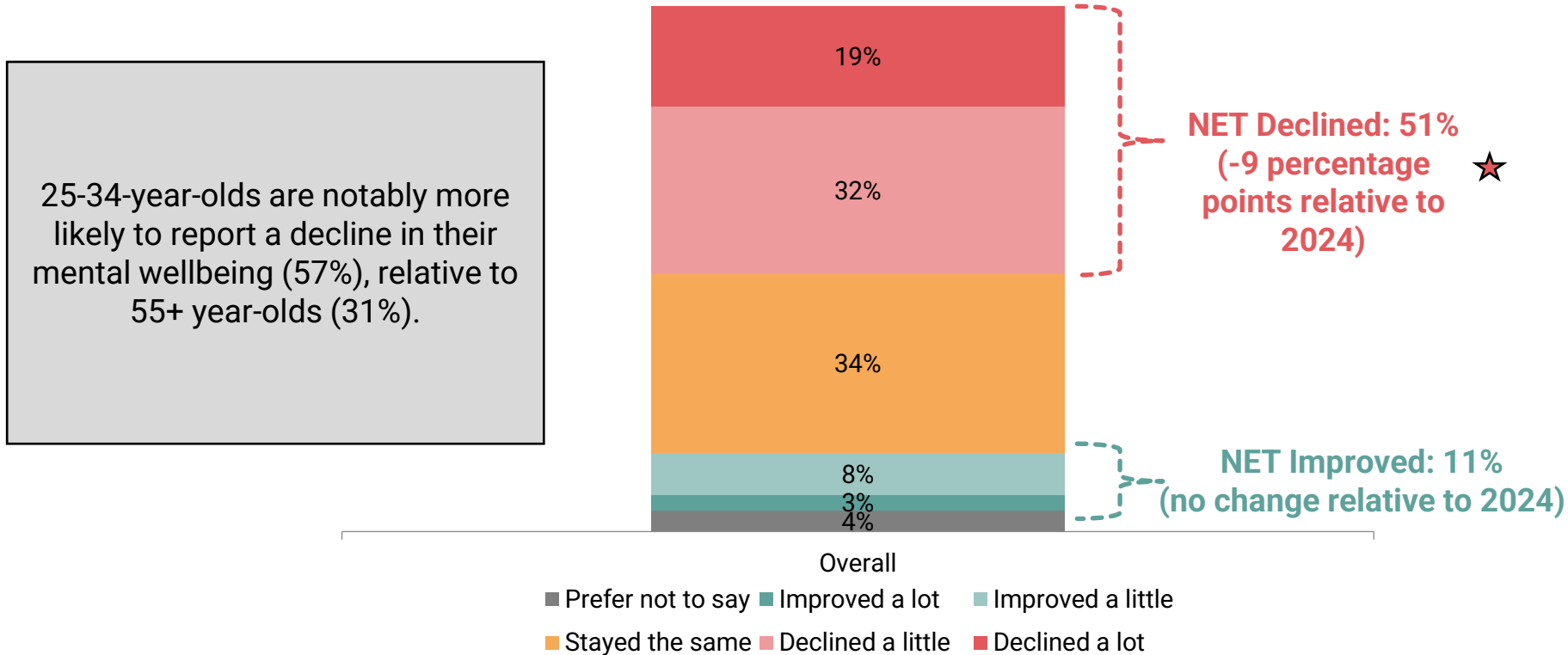
Just 10% of GPs, say they're contracted to work 41+ hours a week

However, 34% of GPs say that, in reality, they end up working 41+ hours



A majority of GPs say their mental wellbeing has declined over the past 12 months

How would you say your mental wellbeing has changed while working as a GP over the past 12 months?

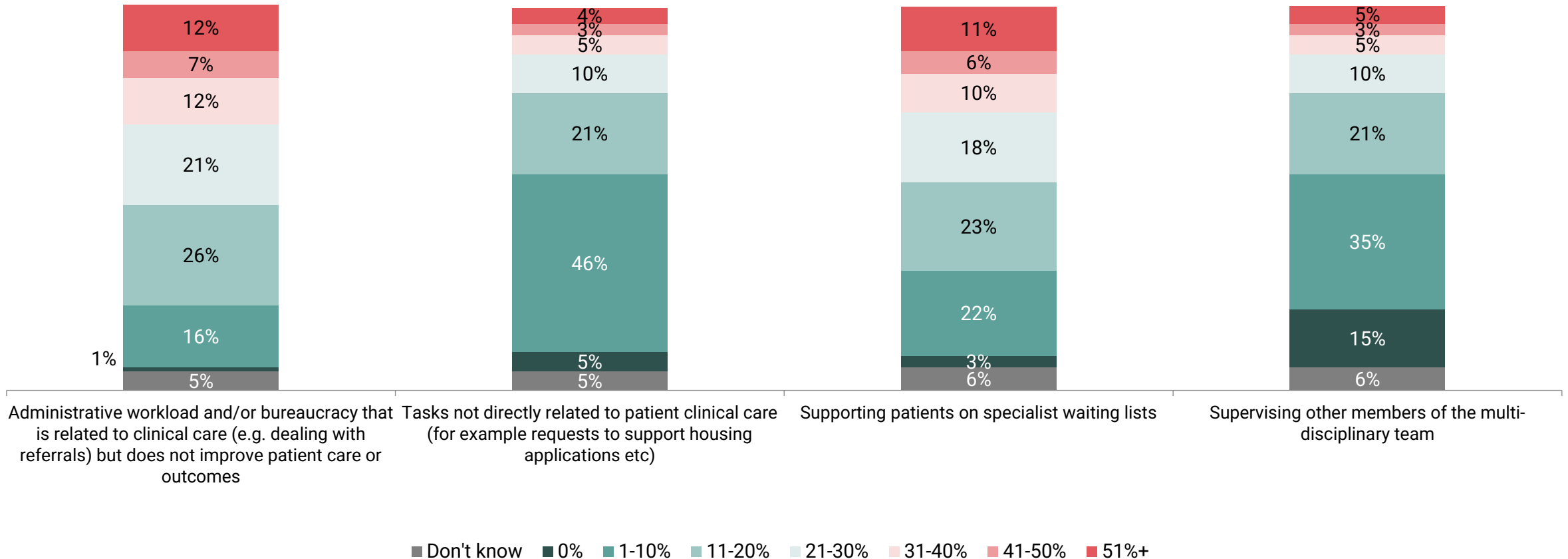


Sample size: n = 2,108 | Base = All practicing GPs | Q35 = "How would you say your mental wellbeing has changed while working as a GP over the past 12 months?" (Single choice)



Overall one in ten GPs reported that they spend over half their time on administrative tasks (12%) and a similar number (11%) spend over half their time supporting patients on specialist waiting lists.

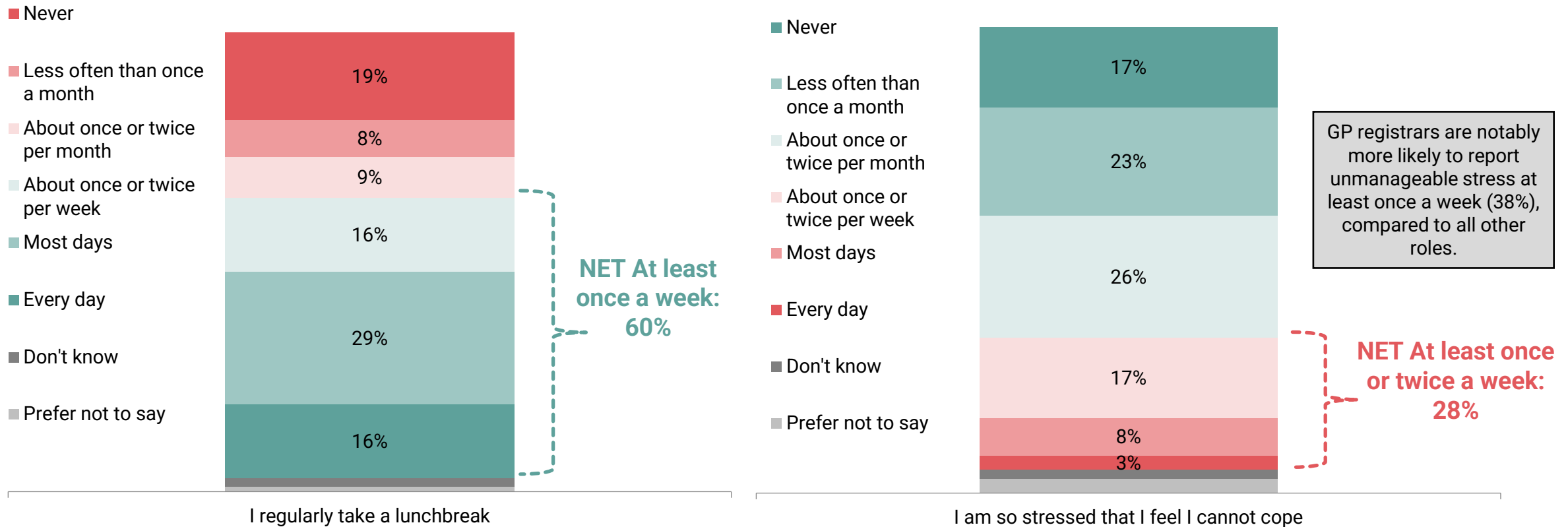
What proportion of your workload would you estimate relates to the following?





One in four GPs report feeling unmanageable stress at least once a week

Thinking about a normal week at work, how often, if at all, do each of the following happen?

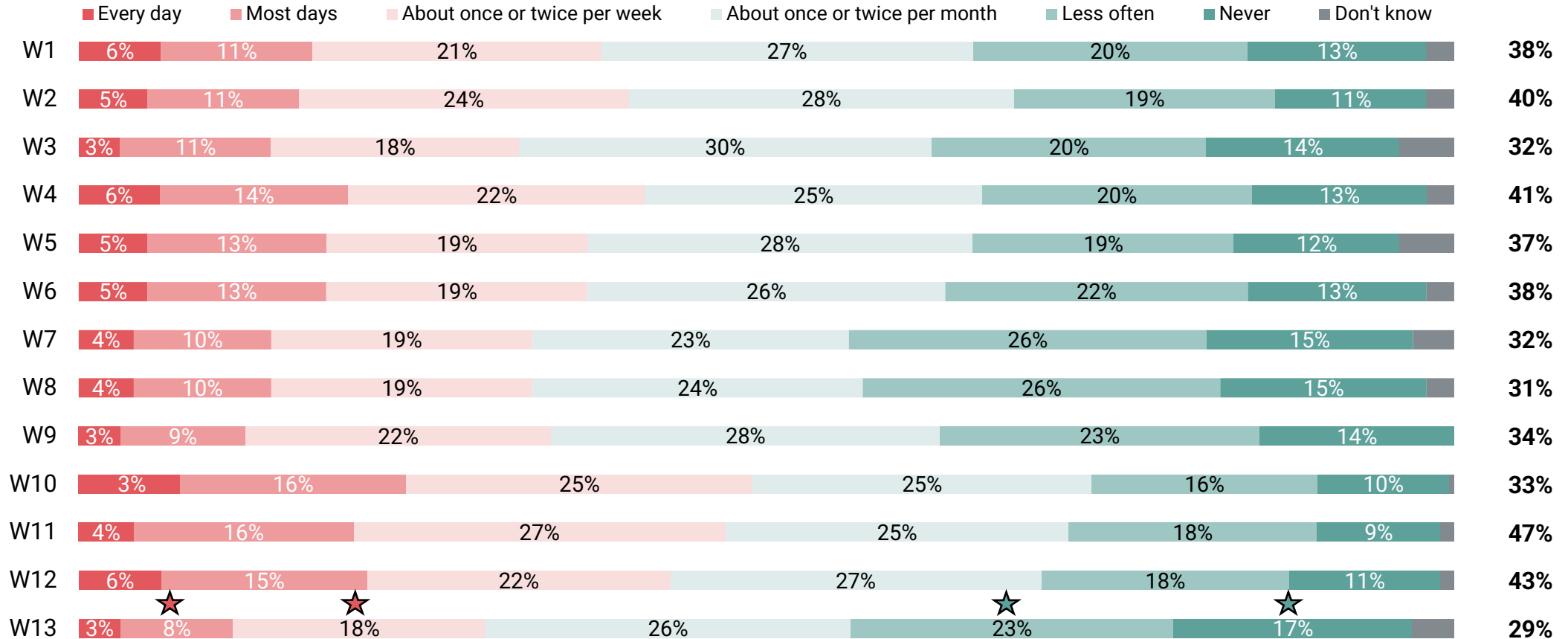




GPs are notably less likely to report being stressed at least once or twice per week, relative to 2024

Thinking about a normal week how often if at all do you feel so stressed you cannot cope England wave-on-wave comparisons

NET: At least once or twice per week

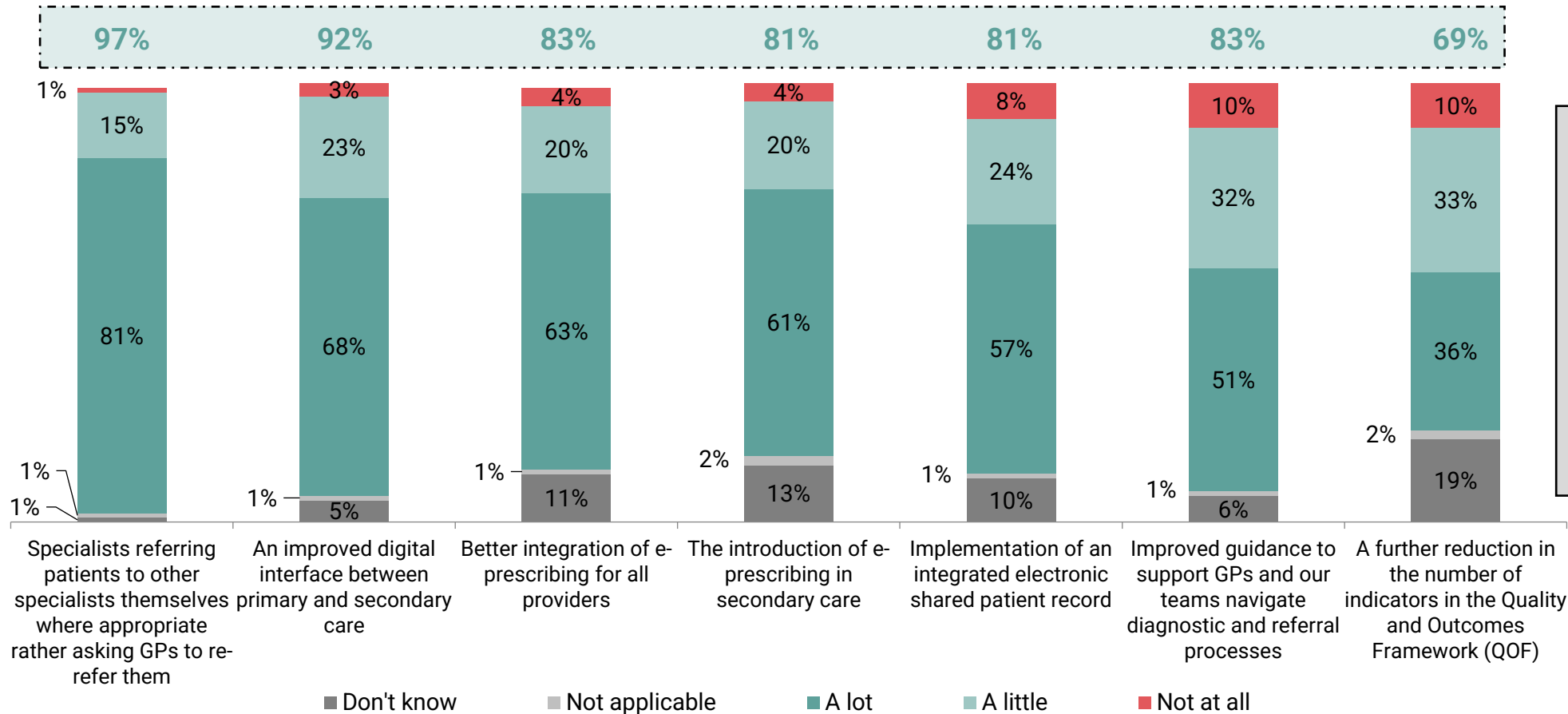




In terms of improving GP workload, specialist-to-specialist patient referrals are viewed most positively

NET At least a little:

To what extent do you think the following could help improve your workload?

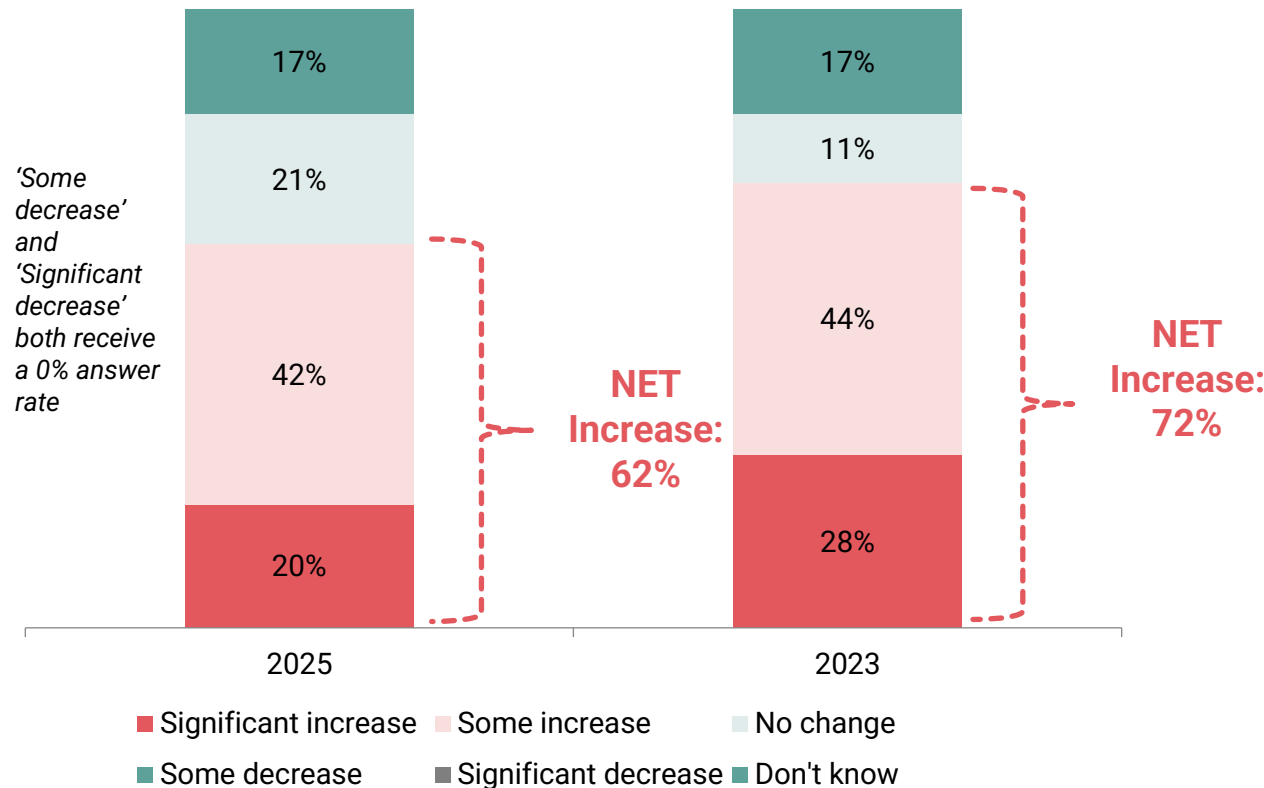


Those aged <35 (86%) and 35-54 (83%) are significantly more likely to say specialist-to-specialist patient referrals would improve their workload 'a lot', relative to those aged 55+ (70%).



Poverty-related presentations to general practice are widely considered to have worsened over the past year, with virtually no GPs reporting an improvement in this period, however this perception has decreased compared to 2023

Compared to last year, what change, if any, have you seen this year in the number of presentations to general practice that could either be linked to, or worsened by poverty?



Those operating in deprived areas are notably more likely to report an increase (71%), relative to those in affluent areas (54%).

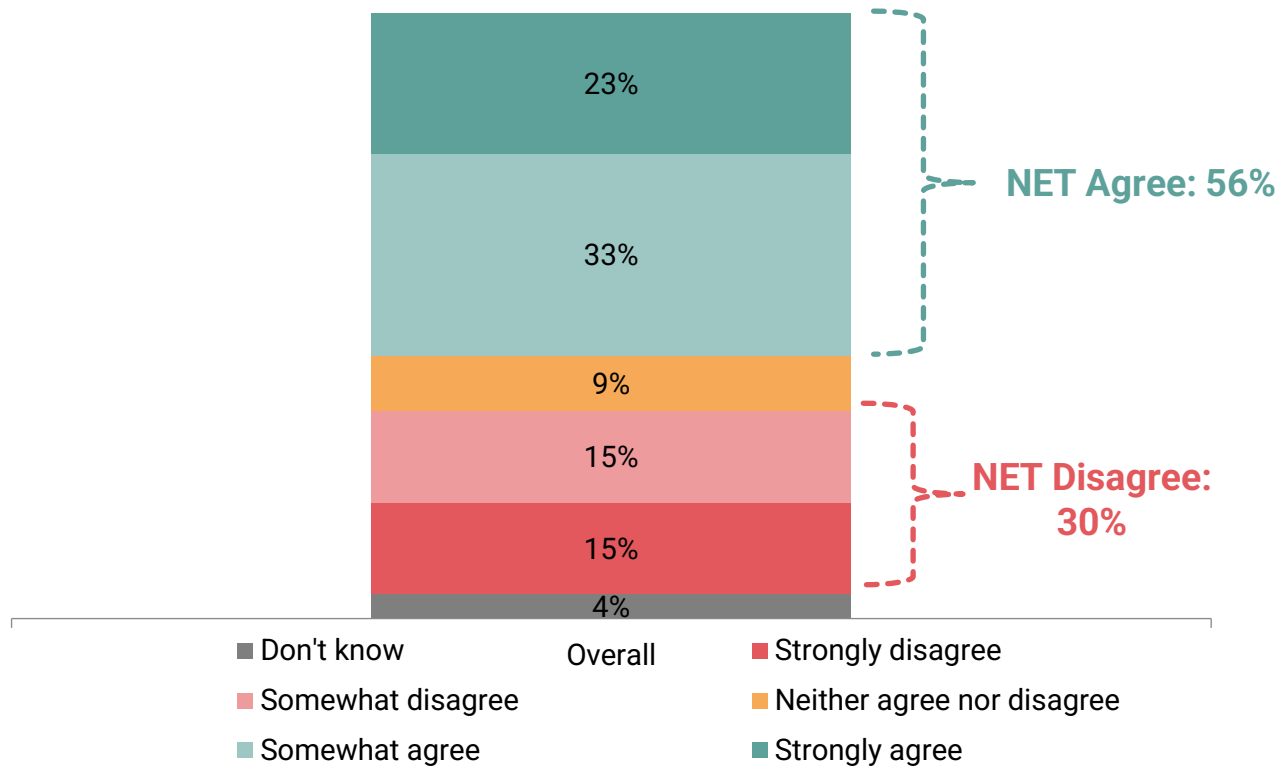
Those who say their practice building is fit for purpose are significantly less likely to report an increase (61%), relative to those that say the opposite (67%).

Infrastructure and Sustainability



Three in ten GPs say their building is not fit for purpose, with GP partners being notably likely to say this

To what extent do you agree or disagree that your practice building is fit for purpose?

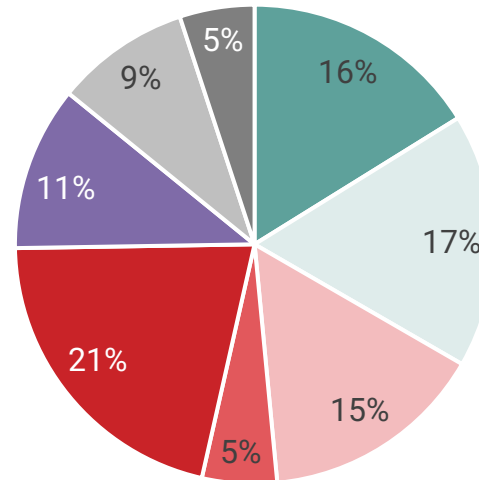


GP partners are notably more likely to disagree here (40%), especially in comparison to GP registrars (20%).



Just over one in ten GP Partners reported that they had tried and were successful in getting funding to improve their premises in the last year

Has your practice applied for funding to improve your premises in the last year?



- Yes, we applied and were successful in getting funding
- Yes, we applied but were not successful
- No, we tried to find funding to apply for, but none was available
- No, we tried to apply but it was too complicated
- No, we didn't try to apply
- No, we didn't need funding
- Other
- Don't know



GPs are unlikely to see infrastructural funding for their practice to be a one-off

Among GPs whose practice have **already received funding for additional works...**

62% say they need or have received further funding to continue these works.

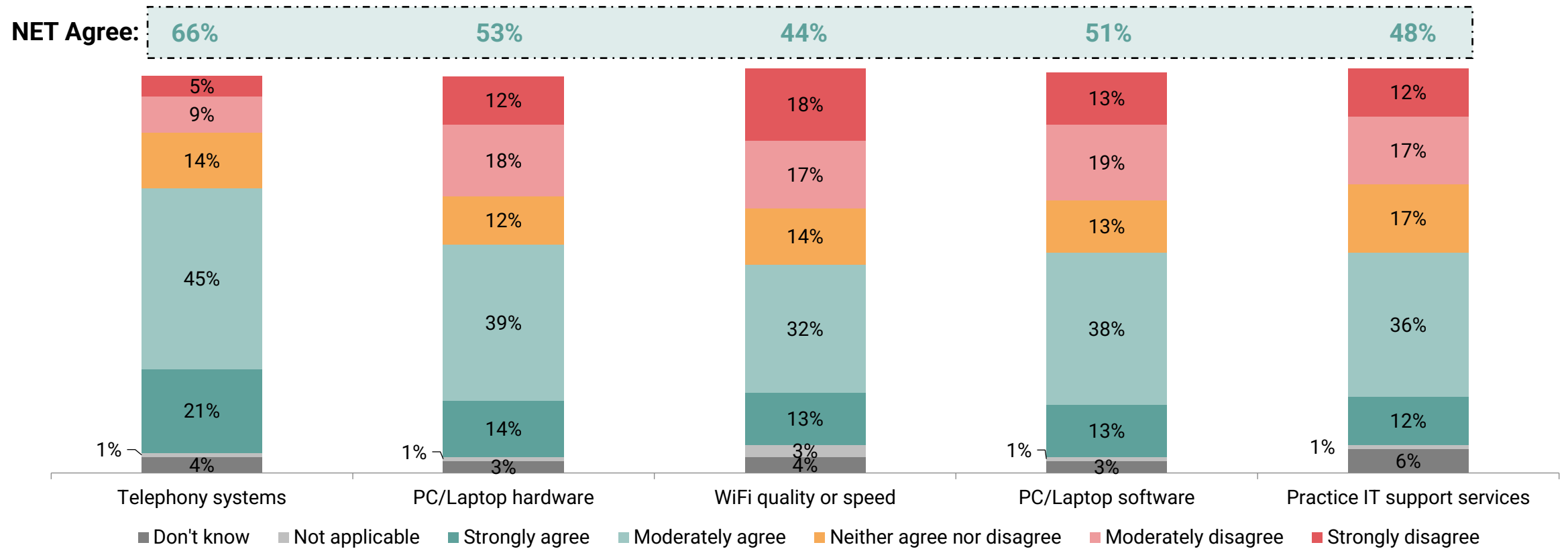
Among GPs whose practices require **further funding beyond what they have already received...**

The average estimated cost of **further** works is **£274,800**.



GPs have a broadly positive view of their practice's IT infrastructure, albeit with a notable minority expressing dissatisfaction regarding WiFi quality/speed

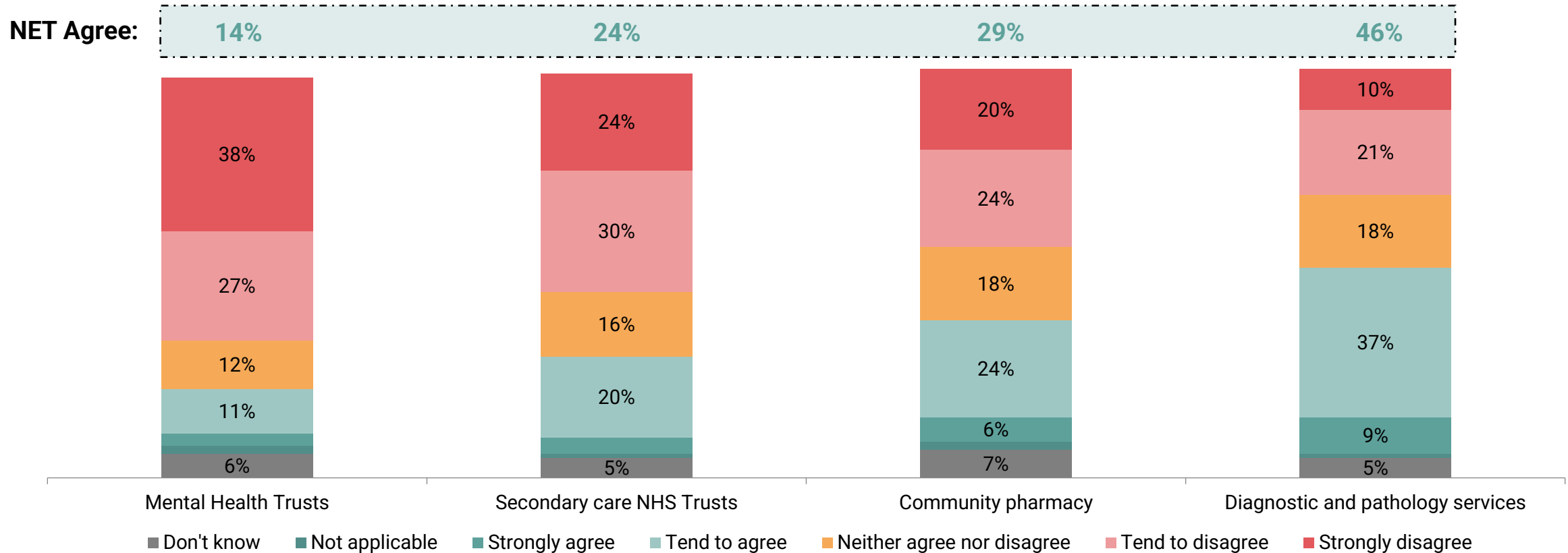
Thinking about the IT infrastructure at your practice, to what extent do you agree or disagree that the following hardware and systems are fit for purpose?





However, when asked to consider their practice's IT infrastructure in a real-world context, GPs are more sceptical – especially in the context of Mental Health Trusts

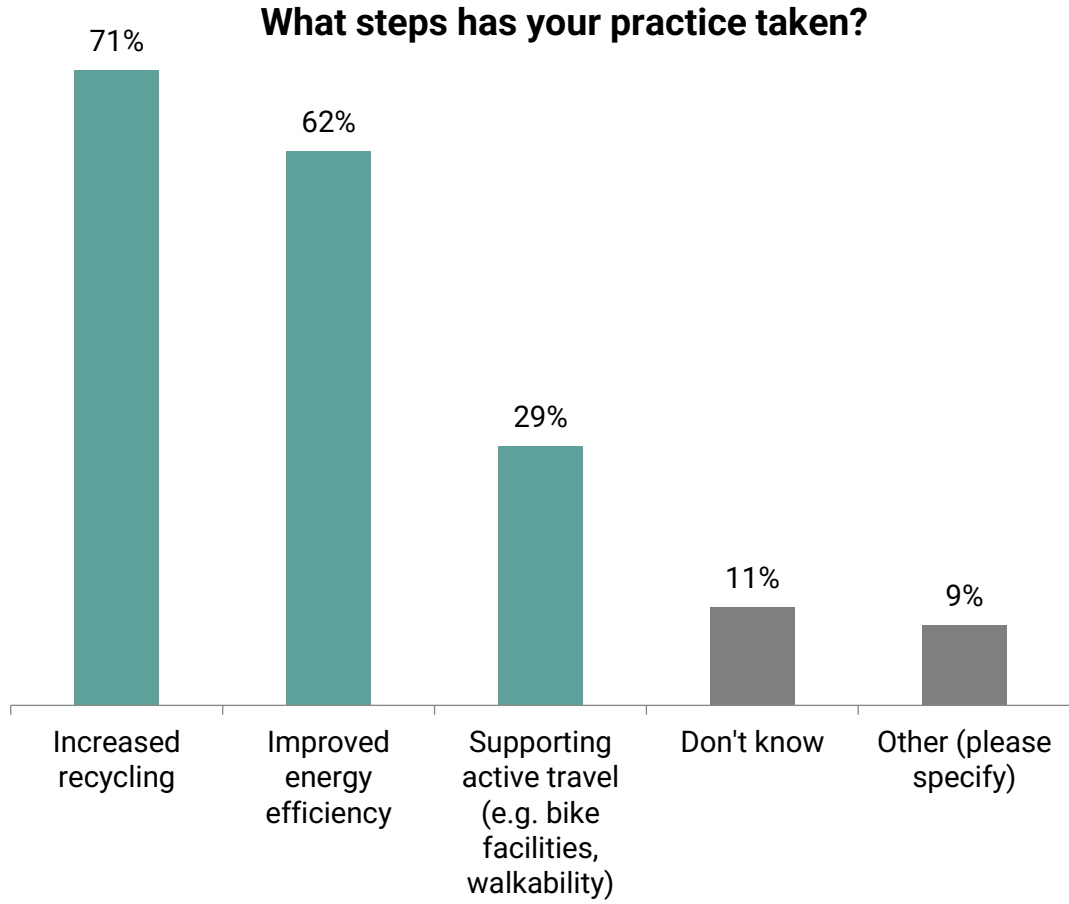
Thinking about the IT infrastructure at your practice, to what extent do you agree or disagree that the ability of your GP system to exchange information with the following is fit for purpose or of an acceptable standard?





Most practices have not been able to take steps to improve sustainability in the last 5 years

37% of GPs say their practice has taken steps to improve the sustainability of its premises in the last 5 years, albeit with almost a majority (49%) not knowing.



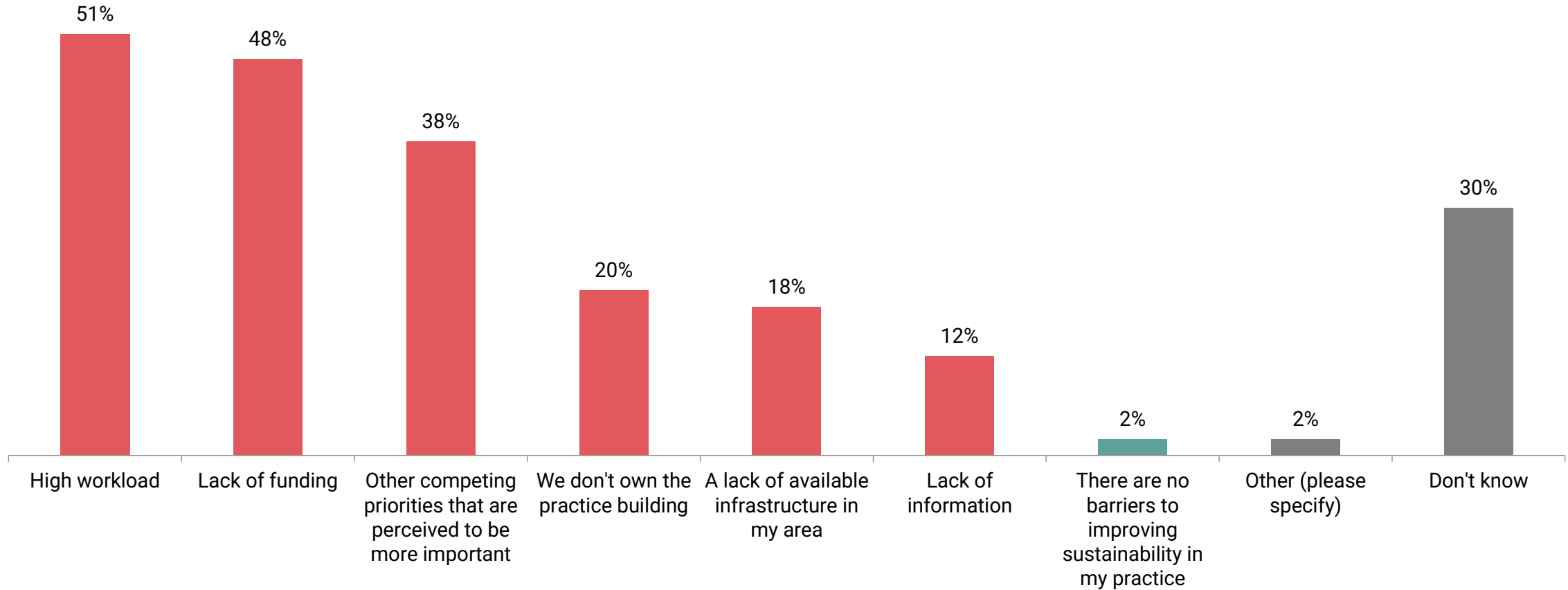
Welsh respondents are notably likely to cite increased recycling (85%), compared to those in England (72%) and Scotland (59%).

All reported sub-group differences (e.g., nation) are statistically significant at the 95% confidence level. Wave-on-wave changes marked with (★) indicate significance relative to 2024.



Capacity, whether through workload or funding, is, for GPs, the primary barrier to improving sustainability in their practices

What are the key barriers to improving sustainability in your practice?

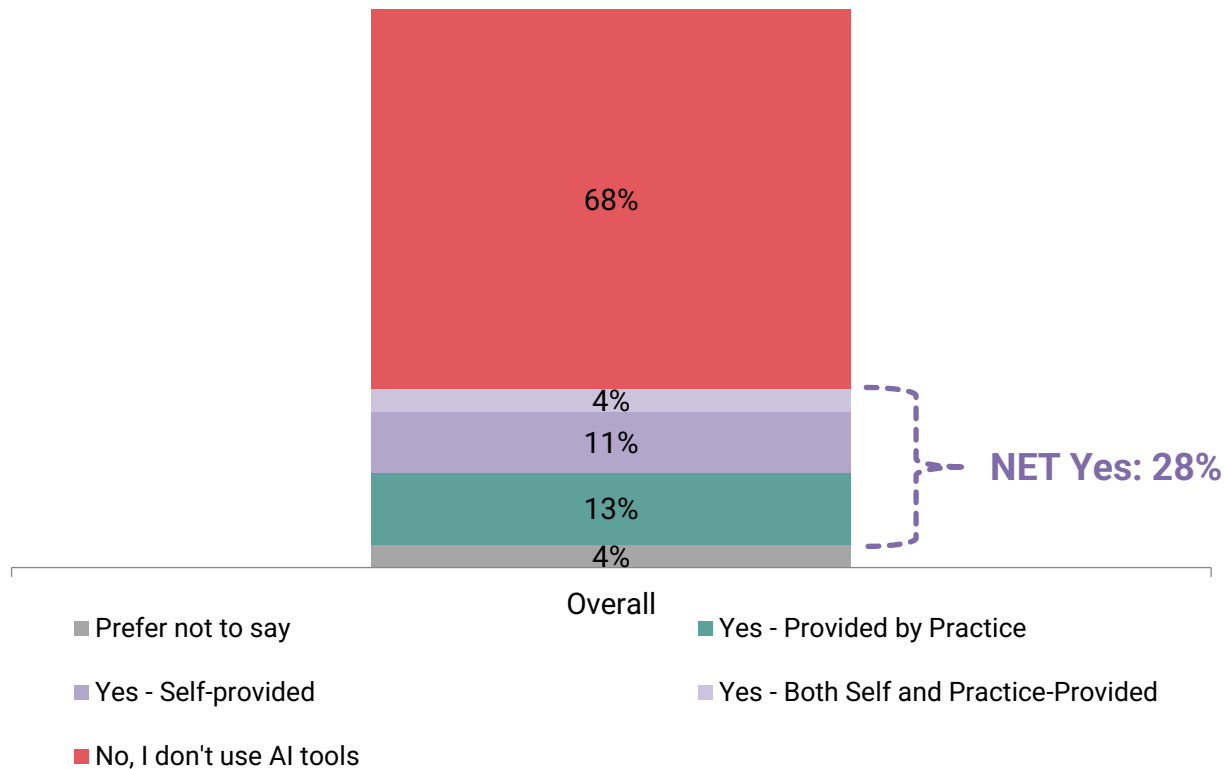


Artificial Intelligence (AI)



Over a quarter of GPs report using AI tools in their work

Are you currently using any AI tools in your work as a GP?

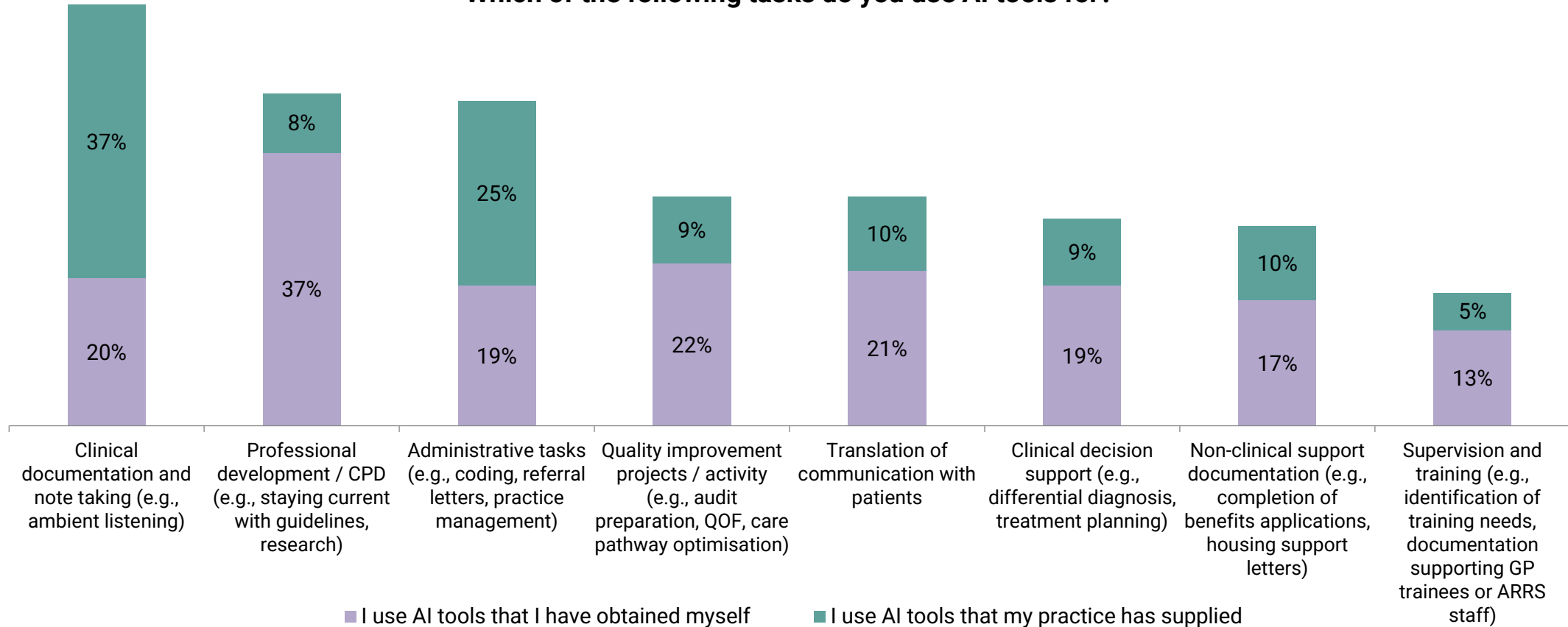


GPs in Northern Ireland are notably more likely to say they don't use AI tools at all (89%), compared to all other nations.



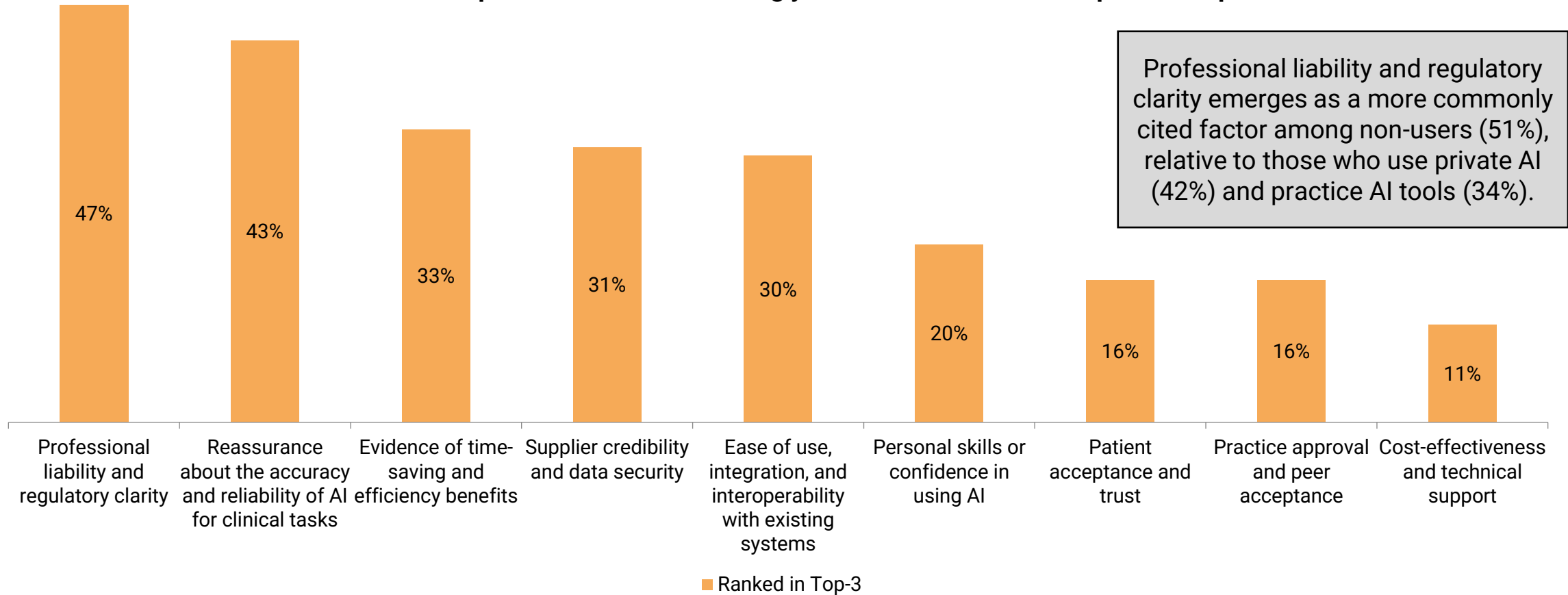
Practice-sponsored AI usage among GPs is most often for the purpose of clinical documentation and note-taking

Which of the following tasks do you use AI tools for?



Establishing AI tools as sanctioned, regulated systems appropriate for clinical use is a key factor for adoption by GPs (prior to usage)

What are the most important factors influencing your decision about AI adoption or expansion?

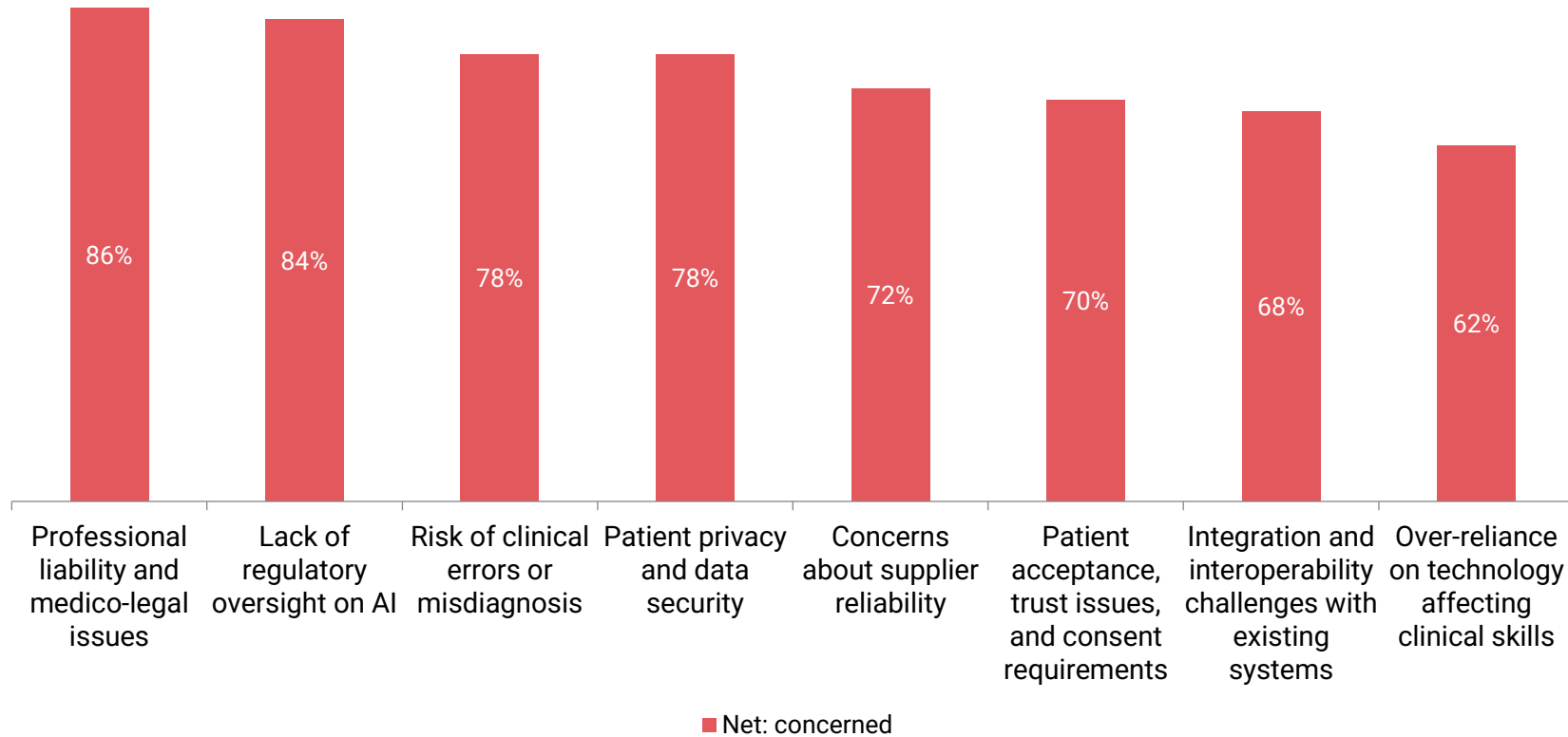


Professional liability and regulatory clarity emerges as a more commonly cited factor among non-users (51%), relative to those who use private AI (42%) and practice AI tools (34%).

A majority of GPs report being concerned about professional liability in the context of adopting AI at work, highlighting the importance of clear guidelines and accountability mechanisms

To what extent does any of the following concern you about adopting AI in your work?

NET: Concerned only – Top 8



AI non-users are notably more likely to be very concerned about professional liability and medico-legal issues (61%), relative to those who use practice (37%) or private (43%) AI tools.

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