

Sir

General Practice needs more than recruits and money: we need to refind our vocational attachments

You report on a five-year plan, announced by Simon Stevens, CEO, NHS England, to revitalise and stabilise our evidently ailing General Practice ('GPs to offer 30 min slots ...', *Daily Telegraph*, 21.4.16). Stevens' plan – to aggressively recruit from abroad and deflect much GP work to pharmacists – may ease the workflow but it has a fundamental flaw: it will further fragment our already shattered personal continuity of care.

For many decades our better General Practice was nourished and integrated by the vocational commitment of its practitioners. Erstwhile GPs grew personal and professional roots that identified with the communities they served – often for several decades. The resulting personal bonds of familiarity enabled a kind of pastoral healthcare that has all but vanished. In the last decade such care has been eviscerated by the employment of doctors working in part-time, short-term contracts, in ever larger and more impersonally managed health centres where patients and doctors become increasingly unfamiliar and estranged.

The inevitable loss of human connection and meaning is a very large part of the loss of morale and poor recruitment and retention among our home-grown doctors.

Simon Stevens' plan does not address these subtle human losses: with good intent, it could make them even worse.

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