

# Foreword

It's nearly two years since the pandemic began, and today we find ourselves in a new, but no less critical, stage.

Against the ongoing backdrop of coronavirus, the health service is now contending with significant care backlogs, continuous high demand and the stark reality of the health needs of the population not being met.

Patients are facing crippling uncertainty as they wait for examinations, operations and treatment. The skill and professionalism of practitioners are required more than ever as the call to meet this deficit in care grows louder.

Doctors have performed with distinction, but now exhaustion and disillusionment are setting in.

Our research this year paints a worrying picture of rising burnout, declining job satisfaction and growing workloads against 2020 levels.

Doctors reporting an intention to leave UK practice is not new, but this year we see harder evidence of them taking steps towards this end, especially within the GP population.

Meanwhile, there is increasing pessimism around the ability to sustain the gains that were made early in the pandemic.

These imperatives – the recovery of services, the recovery of healthcare staff and the reduction in patient harm – go hand in hand, and balancing them will be central to success in the months ahead.

There is cause for hope.

Despite the difficulties, doctors still feel that the pandemic has led to positive changes, particularly in relation to teamwork and the sharing of knowledge across the profession. But we continue to see a range of different experiences. As a group, Asian and British Asian doctors, for example, were less likely than White doctors to agree that they were part of a supportive team.

At an organisational level, the continued focus on inclusive and compassionate cultures signals a system-wide consensus around the fundamental importance of practitioner wellbeing, another hugely encouraging sign.

It is absolutely crucial that we embed and build on these benefits in the months ahead. We all have a part to play in ensuring the stresses on the system do not harm the health and wellbeing of the workforce, or the patients they serve.

For us at the GMC, that means reassuring doctors that we recognise the severity of the present situation and want to support them as we move through the next few months. For employers, it means putting initiatives to improve working environments front and centre of their plans.

We know that culture and leadership are material to outcomes – both in shaping the care that doctors provide and in motivating them to stay in the workforce. Our research shows that the negative impact on wellbeing is the most common reason that doctors plan to leave the profession before their retirement.

The focus on retention must be matched by a commitment to sustainable recruitment. This includes both developing the next generation of UK-trained talent and giving overseas doctors, who continue to be an essential part of the workforce mix, the tools they need to thrive. Physician Associates and Anaesthesia Associates, due to come under GMC regulation, are also a vital piece of the puzzle.

This two-pronged approach – improving workplace experiences coupled with sustaining workforce supply – must be the shared agenda of all of us in the health system. First-class patient care demands it.

The challenges we set out in this report are large and long-standing, magnified by the pandemic but not created by it. To tackle them we must come together with a focus and determination proportionate to the scale of the task.

We know the solutions – now let’s work together to implement them.



**Professor Dame Carrie MacEwen**  
Acting Chair



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