



UEMO STATEMENT

HOW TO RECRUIT AND RETAIN YOUNG DOCTORS IN GENERAL PRACTICE/ FAMILY MEDICINE

As previously pointed out by UEMO, the scientific evidence at an international level indicates that healthcare systems based on effective primary healthcare, with highly trained professionals working in the community, deliver better and more cost-effective care, compared to systems with a weak focus on primary care.

The need for medical care in the coming years will increase considerably as a result of ageing populations, increasing chronic disease burden, service backlogs due to the COVID-19 pandemic and increasing expectations from users of health services.

Unfortunately, General Practice/Family Medicine is currently not an attractive career to young doctors, and many experienced family physicians want to quit the profession, retire early or reduce their working hours. Workforce shortages in General Practice place unnecessary pressure on secondary (hospital) care and divert the attention of hospital physicians from patients that truly need hospital-based care.

UEMO calls for better strategic health and care workforce planning and investment in primary care to change that situation. This includes:

- Adequate remuneration considering the complexity of the work and responsibility bore by GPs;
- Providing non-financial benefits like GPs and family physicians being properly acknowledged, valued and respected, namely not only diagnosing and treating patients but also valuing preventive activity;
- Safe working conditions, with zero tolerance against violence;
- Increase in consultation time for patients; a limited number of patient contacts in a working day; limited numbers of patients per GP/FD – to ensure clinical safety;
- Organizing the total number of patients per physician based on indicators of population complexity and maintaining continuous monitoring of these indicators;
- Offering flexible working arrangements that promote work-life balance and conciliation with family life (a great number of GPs are women);
- Providing opportunities for professional development.

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Some of the major factors promoting the retention of physicians in rural and underdeveloped regions have been classified into different categories, such as financial, career and professional, working conditions, personal, cultural; and living conditions factors. (1)

Therefore, additional measures should be considered for rural and remote areas (often known as medical deserts), where it can be particularly difficult to recruit and retain GPs:

- Establishing a task force/national body to address the factors contributing to the development of a medical desert;
- Provision of additional incentives for GPs in medical deserts (e.g. more benefits and higher salaries);
- Regular monitoring of the population's health, health worker and health care indicators in medical deserts using national and local information systems;
- Modernization of health care delivery through the offer of contracts for mobile GP practices that can cover large and sparsely populated areas.
- Developing training curricula for rural health;
- Creating professional networks for e-consultations and e-teamwork;
- Training health workers in the use of telemedicine technology (e.g. mobile pocket-size ultrasound).

We must not forget that we need to attract new doctors to family medicine using the language they know best and meeting their expectations, to ensure that they stay motivated.

They have a fundamental desire to have an active part in changing the status quo of medical practice.

We must therefore not forget the path of implementation and training in the field of new technologies, as well as the possibility of reconciling clinical practice with academic work and research.

This new generation of physicians shares many of the same goals as previous generations. They simply prioritize some more than others and the common ground resides in ensuring an environment of growth, collaboration, transparency and results. In order to be more likely for young doctors to decide to choose a career in family medicine, it is necessary to develop a strategy requiring the consensus of all the relevant stakeholders: decision-makers, patients and physicians.

(1) Mohammadiaghdam et al. BMC Family Practice (2020) 21:216