

*Consultations by Appointment Only*

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## **Update from Cove Bay & Kincorth Medical Centres – June 2025**

### **Staff Update**

After being with us for around 11 years, it's time for Fiona our receptionist to part ways and relax. Fiona has been a friendly face at our Cove practice for a long time and will be a big miss to our staff and patients alike. Wishing Fiona a long and happy retirement!

### **Scottish Government**

The Scottish Government has recently announced that it will be providing investment to provide 100,000 extra GP appointments per year. It is important that the context of this is made transparent to the public in terms of expectation.

Firstly, general practice already provides 650,000 appointments per week; this investment, therefore, represents a 0.3% increase in appointment capacity. It is the equivalent of one additional appointment per 56 patients per year. The resource to provide these appointments also comes with a specific government remit and is to provide nurse-led health checks to a specifically identified group of people aged 35-60 who rarely, if ever, previously attend general practice. We will be provided with a list in this regard rather than it being open to patient request. Our Practice will be funded to provide 168 check-ups (just over 1% of our list). At present funding has been promised for one year only.

The specified government agenda from this work is to reduce cardiovascular mortality in Scotland by 20% over 20 years. This is very worthy. General practice has a strong track record of delivery when appropriately resourced. The dynamism and flexibility within general practice allow this to progress at pace and start with immediacy – we are already planning to start this work in May. We are, however, extremely concerned by political rhetoric linking this limited, specifically targeted resource with an enhancement of general GP availability. It is in absolutely no way designed to provide this and it concerns us that public expectation may be raised that it will do so. It will not.

General practice continues under immense strain borne from widely acknowledged under-resourcing that has led to a drop in proportion of health spending from 11% to 6.5% over the last decade. Accompanying this is a huge increase in demand and expectation related to factors such as moves to more community-based care and a population that is getting older and, with it, more complex health needs. Despite these factors, the number of GPs to patients is dropping (this has fallen from 1 per 1500 to 1 per 1700 over the last decade). In comparison, the number of hospital consultants has risen by about 30% to cope with demand, and despite this, we still see hugely long hospital waiting times.

General Practice teams are giving their all to provide as best a service as they can within this scenario, but it is increasingly impossible to provide anything close to the service we would like. General practice can provide solutions to many of the current crises in the NHS and do so with characteristic efficiency and speed but simply cannot do so without true recognition of the level of investment needed. Restoring the proportion of health spending to previous levels is essential and can bring with it huge benefits across the whole of the NHS – our leaders are attempting to highlight the level of these gains that general practice has the potential to provide if supported.

This currently announced limited and targeted resource, whilst welcomed as a “slow burner “ to reducing cardiovascular harm, will not in any way support general practice in improving access or other key areas such as continuity and depth of care, which we desperately seek to do and must not be expected to do so.

As we enter a pre-election year, we can expect a plethora of political statements and manifestos from all parties around plans to recover the NHS. We absolutely do not seek to influence – it is not our place. We must, however, demand clarity and honesty.