

31 October 2015

Letters to the Editor

Financial motives must never inform a GP's decision to refer a patient

SIR – The concerns of clinical commissioning groups (CCGs) – the NHS bodies responsible for planning and commissioning regional health care – are primarily financial, with little thought for patients' wellbeing ("Bonus for GPs who cut cancer referrals", report, October 2).

I am a partner in a busy practice – one of the larger ones in our CCG. We are frequently sent our referral statistics. However, these statistics are essentially meaningless as the outcomes of the referrals are not taken into account.

Furthermore, they are referral numbers and not percentages. It should be obvious that smaller practices will have lower numbers of referrals.

No one other than the person consulting with the patient can judge whether a referral is appropriate or not. Years of experience make you realise that there are many reasons to refer a patient on for secondary care.

Medicine is a vocation – no one should be in it for the money. GPs

should fight to have their professional autonomy returned to them so that they may feel free to practise high quality, patient-centred medicine.

Dr Kate Mash
Salisbury, Wiltshire

SIR – Will the General Medical Council now take action against those individual doctors who sit on the CCGs and who authorised this scheme?

After all, if a GP were to accept money from a pharmaceutical company as an incentive to prescribe a particular treatment, this would constitute professional misconduct.

Dr Robert Walker
Workington, Cumberland

SIR – This offer to line GPs' pockets was in place some years ago. It failed then and it will fail now, as both GPs and their patients will agree that if there are symptoms indicating the possibility of disease then the patient should be referred to hospital for the appropriate tests.

An additional consideration for GPs

is the possibility of litigation should they fail to refer a symptomatic patient who is subsequently found to have an illness requiring treatment.

Though GPs' pay has fallen in each of the past five years, I am sure the profession will not be bribed where the health of their patients is concerned.

Malcolm Freeth
Bournemouth, Dorset

SIR – If GPs are encouraged to cut down on the numbers they refer to hospital, then patients will just take themselves to accident and emergency departments.

Once again, NHS management is robbing Peter to pay Paul and misrepresenting it as efficiency.

Dr Nigel Keegan
London SW10

SIR – Isn't it time the NHS offered bonuses to patients for not troubling their GPs?

Rob Dowlman
Heighington, Lincolnshire