## PRACTICE OBSERVED

### Practice Research

### General practitioners' retirement plans and what influences them

RICHARD WAKEFORD, MARIAN RODEN, ARTHUR ROTHMAN

Abstract: The results of a study of the attitudes of 197 general practitioners aged 55 and over towards retirement and their plans for retirement are reported. Few wished to retire very early, and only a further 40% definitely planned a clean break from practice. Nearly half planned on taking "14% hour retirement," even though most (78%) will be entitled to full pension rights. Job satisfaction and health were the most important factors influencing the timing of the returement. Severaty seven per cent thought that there should be no formal retirement policy. 79% wanted no compulsory retirement age, and 80% wanted as further controls or safeguards directed at older practising general practitioners as safeguards directed at older practising general practitioners for the processing of the practice of the processing practice of the processing that the practice of the practising general practitioners. Presonal discussions with respondent sage 465 and over Personal discussions with respondents aged 55 and over

and the general practionness in the sample ever not tooking. Personal discussions with respondents aged 65 and over aggressed that there are many older graeral practitioners who has to practice to some time, whether that they will know when the control of the c

Office of the Regius Professor of Physic, Cambridge University School of Clinical Medicine, Cambridge RICHARD WASHERDE MA, sensor receipt hassis at RICHARD WASHERDE MA, sensor receipt hassis at ARTHER ROTTHMAN, 15th, visualing fellow

Gerrespondence to: Mr R E Wakeford, Clinical School Offices, Addenbrooke's Hospital, Cambridge CB2 2QQ

Introduction

Whether general practitioners retire early, late, or at an age that is regarded as conventional 65 years has important implications for manpower planning—for example, in connection with the demand for and establishment of sociational training schemes. With the exception of a survey that was limited to inner London, little appears to have been established about general practitioners' retirement plans and the factors that influence these. Indeed, the only relevant study of retirement intentions and related attitudes of which we know was restricted to anaesthetists in Yorkshire. Older medical practitioners in North Amerias were found to be less successful on mesures of clinical performance. and there are to participate in continuing medical education. Coupled with the fact that 29% of practising general practitioners in the UK aged 65 and over a ret in singlehanded practice, compared with 14% overall. Department of Health and Social Security. Statistics and Research Section, personal communication, 1984 and this not receiving daily informal "peer review." this max cause concern about older general practitioners in the UK 11 would therefore be useful to know about the retirement plans of these dictors and what influences these plans.

A study was undertakenering conventional retirement age or who had passed this personal continuing and the processing of the prevention influence them to weak carrier to later retirement. Then the retirement intentions of a national sample of such general practitioners were examined.

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Conducting personal interviews with a national sample of respondentials to face to experience, vet postal questionnaire did not seem appropriate for collecting data on such a personal subject, and a poor response rate could be expected. A compromise method where eighbon enterwise. Though the expected A compromise method where eighbon enterwises. Though the discussing them in depth, it has been found reliable in surveying broadly the sees and attributed of general practitioners. We therefore decided in collect primary data by means of automat (elephone interviews word) experiences where the enterwise which is a distinction and additional sample of decided to collect primary data by means of automat (elephone interviews). The national sample of decides we stream from the Medical Direction on the assumption that the age of doctors at qualifications of 3. The directions exceeded from the study as portained subsects who autified much later practitioner practitions produced the enterties of the study in the collection of the study in the study of t

### Results

Results

Of the 20 discovers in the inational sample, 28 were no longer practising counting to retirement or death, and a further 24, who were undervised still to be in practice, could not be reached for interview often because of answering systems—the interveew of discovering systems—the interveew of admission to be emergency, and were interviewed represent a "Powerspone rate." In admission of the discovering systems—the interviewed represent a "Powerspone rate." In admission of 786 telephone, cills were made.

The mean age of the 176 representation was 61.4 wars, 42.8 were ggg 15.

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The practice, roughly a third were in "small or large" from a 186 were the 186 wars.

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"A comparison with satisfacts from the Department of Health and Social Society 1185. Statistics and Research Socials 1841, personal community of 186 wars an unstract for principals.

A comparison with satisfacts from the Department of Health and Social Society 1841, personal community of 186 wars and 186 wars.

1844 suggestivithal women, singlehanded doctors, and serve old doctors were underrepresented in the sumple 150 creaming 4.8 were an entire tried principals and 550 or over in Britain are women.

With the exception of short personal for mixed and serves, almost all of the With the exception of short personal for mixed and serves almost all of the 186 wars.

Professional aritimes—Table I shows the repondency professional the doctors had no other activities. Table II shows where the repondents

| Activity               | "- Of general peacutewisers" |
|------------------------|------------------------------|
| NAME OF TAXABLE PARTY. |                              |
| Industrial medicine    | 44                           |
| Private practice       | 1*                           |
| Nursing home et.       | 1.4                          |
| Poincourgeon           | 18                           |
| Medical training       | LO                           |
| Hospital sessions      | 7                            |
| Receich                | U                            |
| Other:                 | 28                           |
| None                   | ta ta                        |

\*More than one response was allowed. This today, to describe the DHSS and medical services for specific and homes for hands appear people medical services for specific reams, boarding schools, and homes for hands appeal people.

Journal-Meetings and courses at postgr Hospital consultants. Local medical waveries Intrapractice meetings. Meetings with other practices. Other

reportedly obtain their continuing medical obustion. Journals and post-graduate sentires were most frequently mentioned, but meetings with produced sentires were most frequently mentioned, but meetings with Palamone 8th . Cradia 4th . the Lawer 25% . Tomain of the Road Coding of General Detailmone 5% . to de and section 5% . To the Road Coding of General Detailmone 5% . whose and sections 5% . and the section with a 16th and 19th 4th . Returned plant 19th 4th 4th . Returned 19th 19th 4th . The section with the lawer of the section of the

infections were not written into respondents partnership agreement Most general restrictioners in the simple 12% will be entitled fold present Most general restriction of the simple 12% will be entitled fold present processor. We have proclaimed additional veral societies by a processor of the processor of the

TABLE 111- "What do you see as being the major factors which would influence you to

|  | "- i it general peaculweer |  |
|--|----------------------------|--|
|  |                            |  |
| Lack of soft spiritarison                        | 4.2                        |  |
| Poor health                                      | 19                         |  |
| Not become abreast not providing good service    | 11                         |  |
| To pursue other interests                        |                            |  |
| Family   | 2                          |  |
| hanges in the law after ting pensions retirement | i                          |  |
| Other  | 4                          |  |
| No arrower                                       | 4                          |  |

|                                | The grant of the state of |
|--------------------------------|---------------------------|
| let stole into                 | **                        |
| Needed by parents              | 14                        |
| Money                          | 13                        |
| Encouraged to stay by partners | *                         |
| Health                         | 4                         |
| turing paid service            | i i                       |
| So other interests             | 1                         |
| Other                          | 2                         |
| No answer                      | 14                        |

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beld vews concerning formal retirement policies consistent with their position as self-employed professionals. 77% and that there should not be a reduced to the policy of the policy of the policy of the policy of the decision were less are about the that there decision experts. 77% wasted no compulsion retirement age, and 87% wanted no further formal controls, steparate of the policy of the policy

| Classification of<br>retreement intension<br>sectext | Prevent age |               |       |                      |
|--|-------------|---------------|-------|----------------------|
|  | n NI        | 61-65<br>n 73 | nn is | respondents<br>n 189 |
| Want out wen   | 1           |               | 0     | 1                    |
| Lican break  | 46          | 42            |       | tu:                  |
| Gradual  | 49          | 42            | 57    | 430                  |
| Sever  | 4           | 10            | 4     | - 11                 |

Discussion

For almost all general practitioners, general practice is a lifetime career, almost always spent in the same place. For many, their only medical activity consists of providing care for the patients on their MISE list, many abor device their whole life to their practice. With list and the same place is the provided and sensitive statement thus becomes a difficult, complicated, and sensitive statement that becomes a difficult, complicated and sensitive statement that the common approaches to and arrangements for a proposaches to and arrangements for the common test specifical about their retriement plans—specially planning the date. The findings of this study suggest that nearly half of general practicines about their retriement, lies a few per cent at most doing to some veas earlier than age 65. All this midicates a substantial continuation of the present position, whereby 5% of the principals in general practice in Britania are over the age of 65. DISS Statistics and Research Section SIAL, personal communication, 1984. Only a few of the recepondents in this votal were women, however By Chother 1985. 3% of general practitioner trainers were women.

(DHSS (SRIA), General medical services some basic statistics, 1894). If women's unentions of externent are different from men's they will not be reflected in this study.

Although the need for income and the possibility of poor health were important in influencing general practitioners to think of returning later or earlier (respectively), plos statistication or lack of it had the most influence. Thus many without to "die in harness" and quoted their perceptions of their patients urging them not to return the properties of the prospect of compulsory returnent. It is of course open to discussion how accurate these perceptions of their patients urging them not to return the open of the prospect of compulsory returnent. It is of course open to discussion how accurate these perceptions more doctor overtied than patient overneted—particularly when nearly half of our respondents reported that they did not look forward to retirement. Whether it is in the interests of patients that their general practitioners were asked about the described of the prospection of the pro

This study was funded by a grant from the King Edward's Hospital Fund for London. We thank all the dectors who participated in the study, the DHSS Statistics and Research Division (SRTA) for providing statistical information, and Professor Gord Norman for statistical advice.

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### Appendix

Vietes of Dr.A. and Dr.B. on retiren

Views of De, A and De Romentmens.

De A is Tan Bose to mich same there partner rural practice for 50 years. The practice provides its own is used bours over but uses a locum one; a week. His practice provides its own is used bours over but uses a locum one; a week. His practice provides and assimptions returned age. Patients should be the ones to deside whether ones continued. A state of the state of the Artificial State of the Continued State of the Cont

not soking forward to extrement.

DE B is 7 and the been in the same inter-city praises for 16 years, which he noted fare engigating to the UK from Eastern Europe. He took 24 hour returnment is 7 The praises her his free primeries and uses desproising genes to be interested in 15 The praises for the first premise and uses desproising genes to surround. He has no medical accordance on the holbs. He was surround in 16 the source of the surround and no interest worked medicane. Trendshire to my holbs. He was surrounded in the surrounded to the problem of the source of the source of the problem of the source of the so

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# Questioning Practice

## Chickenpox isolation: is it worth the trouble?

We received the bulliaring letter from Dr.F.C. Kataliar and whed they cancel practitioners and a community parliamy to unities his question. Its solutions of shiften to the his kings of necessary.

Children who have, bukenpox should be isolated for one week from the appearance of spots or until dry scabs have formed, the text-tooks rell us. Some schools will not allow shidren back until all their spots have disriperated But is resistant on children with shickenpox necessars. And is it effective. "Chickenpox is highly contagnous. Over 85% of susceptible household contacts will cach the disease. 95% of American women contacts and the shickenpox necessars." It is, however, a clustered mild disease, and leves shidren develop scripus complications. The idea behind toolaing, shidren with this kenjor will be disease. The short period of intervity before the appearance of the risks. It is, however, it offers that the shid with his kenjor will have mitted this classmates before he goes into isolation. So what is being gained by our attempts to contain the endemandinese! Not much, I suspect. Plents of well children with spots are enforted and the shid of t

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De Goree R Lector—Dr Kavalier presents a reasonable argument, with which I am sure many peatimenes agree. The rodation of shalden with an illness that is southly recognised only when the rach appears, set in most infections on the prodomal vage, is noneme. The fast that shickenpors is contracted by a regernal woman means that all children booked be exposed to the virus. The real problem is that society has an aversion to people with spear and an error practice one to incline with right society and with the proposed to the virus. The real problem is that society has an aversion to people with spear and on the practice one to incline with right society and with the wholest people with spear and early register on which the problem is the medical profession may above needed.

It a propulation of children can grow up happs in the knowledge that it is better to have, whe report an early age and that it is not across in terminal profession may also be needed.

educate the staff. They should also attempt to make it local policy that sports, bildern come to school if they are well. Every general practitioner should also princed the education when presented with cases of the kemps or when asked to talk about infectious diseases to groups—Guide Past Health Centre, Storthumberfalla Marke 2004.

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 Chatholic Comptons (1978) (240) (

De Staart Came—Lee most of its victims chickenpox is a mild docuse. It is infectious. Song spread mainly by the respirators tract. The degree of infectitivity, however, is not a great as, her variety, in measles, and about his control of the properties of the properties of the production of the properties of the production of the prod

Dr. Ville. Adjace—I) is difficult to dute the origin of evidence the individual with studency attemther text of the community, agrain, exhibits to individual with studency attemther text of the community, agrain, exhibits he bound in wise into our text exhibits. It is reasonable to assume that the Victorian physicians considered it necessary to soldie the person with shicking to trapect orders chieffer from this highly continguous disease—the methods and meritative of children who caught the disease. Serious complications from shickingnoss are rare in shifteen indus. Persons complications from this children who caught the disease. Serious complications from this children who are serious exceptions that the industry in the male children from mealers exceptions. On the other children from reasily exceptions will there industry to the complications of varietile presument amore common in the susceptible shall but also material difficulties during the first hirter months of pregnancy is sociated with interesting during the first inferior method of 5%.

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Michiepre Robertson J. Honorhold phonous: London: Grecham, 1894
 Kragman N. Karchill, Jakonous diseases et dialon. Nr Logic. Modes, 1981