Independent Practice Survey Results

The numbers of responses to each question were as below:

Question	No of responses	Response %
1) What is your age?	156	99%
2) Where do you work?	157	100%
3) If you answered 'England' can you specify area:	139	89%
4) How many years since starting in independent practice?	137	87%
5) What best describes your independent work set up?	140	89%
6) Gross income from independent practice?	135	86%
7) Has your gross income changed over the last 2-3 years?	132	84%
8) Please indicate the rough % of income, from your independent practice, within each category below? (Total must add up to 100)		
Private medical insurance	132	84%
Self pay	129	82%
NHS funded	113	72%
Other	20	13%
9) Has there been any change in each of these categories over the last 2-3 years?	122	78%
10) Roughly what percentage of your privately insured patients are required to pay a shortfall fee?	128	82%
11) Have you been threatened with de-recognition by a Private Medical insurer over fees?	131	83%
12) What are the issues facing anaesthetists working in the independent sector at the moment?	111	71%
13) Please feel free to give us your details if you would like to engage in more of the Association of Anaesthetists independent practice work	42	27%



Details of the survey

1) What is your age?

	No of responses	%
25 to 34	4	3%
35 to 44	23	15%
45 to 54	76	49%
55 to 64	45	29%
65 to 74	8	5%
75 or older	0	0%



2) Where do you work?

	No of responses	%
England	139	89%
Wales	3	2%
Scotland	7	4%
Northern Ireland	5	3%
Republic of Ireland	1	1%
Isle of Man	1	1%
Falkland Islands	1	1%





3) If you answered 'England' can you specify area:

	No of responses	%
South east	27	19%
London	19	14%
North West	19	14%
East of England	18	13%
East Midlands	4	3%
South West	39	28%
Yorkshire and the Humber	6	4%
East Midlands	3	2%
North East	4	3%





	No of responses	%
<2	8	6%
2-5	12	9%
5-10	13	9%
10-15	29	21%
15-20	28	20%
>20	47	34%





4) How many years since starting in independent practice?

5) What best describes your independent work set up?

	No of responses	%
I work in a formal anaesthetic partnership	62	44%
I am an individual practitioner	51	36%
I am an individual practitioner working in an informal group (shared office / billing etc but independently set fees)	22	16%
I also work independently	1	1%
I am also in an LALLP that does obstetrics	1	1%
I work in a Sedation Practice	1	1%
incorporated i.e. limited company	1	1%
I also work independently outside my local area	1	1%





6) Gross income from independent practice?

	No of responses	%
less than £10,000	12	9%
less than £25,000	19	14%
less than £50,000	43	32%
less than £75,000	29	22%
less than £100,000	16	12%
less than £125,000	8	6%
less than £150,000	0	0%
more than £150,000	7	5%
prefer not to say	1	1%





	No of responses	%
Increased	21	16%
Decreased	61	46%
Stayed roughly the same	49	37%
Same, but working 33% more hours to achieve same income	1	1%





8) Please indicate the rough % of income, from your independent practice, within each category below? (Total must add up to 100)



9) Has there been any change in each of these categories over the last 2-3 years?

109 free text comments revealing the following themes

- Increase in NHS funded work
- Increase in self-funded work
- Accompanied in many areas by a fall in Private Medical Insurance (PMI) work
- Relative income from PMI falling, secondary to reduction in fees by 'fee assurance' Some anaesthetists choosing to stop independent practice due to the above



10) Roughly what percentage of your privately insured patients are required to pay a shortfall fee?

	No of responses	%
<20	55	51%
21 to 50	25	23%
51 to 75	13	12%
>75	14	13%



25 Free text comments revealing the following themes

- 'Fee assured' status, required by some PMIs, is limiting fees charged by members to maxima
- Non fee assured consultants variable but some comments suggest up to 30% of patients required to pay a top up fee. This appears to be predominately BUPA assured patients from comments but accept only a small number of comments
- Some consultants refusing cases unless they are happy with the scale of the fee when 'fee assured'.
- This may be limiting patient choice as patients cannot always choose to pay more for particular expertise



11) Have you been threatened with de-recognition by a private medical insurer over fees?





- Over 30% of respondents have been threatened with de recognition over fees
- This has the potential to limit patient choice for particular expertise.
- There is a risk that individual anaesthetists will decide to discontinue working within the independent sector, limiting availability of anaesthetic consultants in the independent sector.

12) What are the issues facing anaesthetists working in the independent sector at the moment?

111 free text comments revealing the following themes

- Increasing threat from the PMIs
- Fee assurance resulting in lower fees to find the cheapest possible provider.
- Increasing indemnity costs, which in conjunction with above renders independent practice unprofitable such that younger consultants not starting out
- Younger consultants starting in independent practice penalised by PMIs with fee assured rates and an inability to raise their own fees.
- Many procedures no longer cost effective for the anaesthetist to perform
- Post op care by anaesthetists but larger fee to surgeon, many comments on parity
- Private hospital groups forcing fees for NHS work down with a take it or leave it approach
- We are our own worst enemies here by racing to the bottom
- PMIs being disingenuous with their clients, claiming overcharging by doctors as opposed to under remuneration by insurers
- No increase in remuneration for 17 years
- The Association of Anaesthetists needs to do more, a number of members commenting on a perceived lack of action by the Association of Anaesthetists on their behalf
- PMIs still trying to attack group practice by limiting fees charged by new members

