

MARCH/APRIL 2017 NEWSLETTER

“Super” Practices (note the use of inverted commas)

Health ministers have apparently decided that ‘it is working better’ for GP practices to have lists of 35,000-40,000 patients. Junior health minister, David Mowat, states that the current 7500 practices in England may reduce to just 1500 and that they were ‘migrating over a period of time’ towards this model of general practice. The idea is each super hub will employ pharmacists, physiotherapists and will be able to ‘do more things at scale than they would be able to in just a single practice’. What? Like a ...hospital?

The huge attraction as a doctor going into general practice is the idea that you look after the health needs of a small population from cradle to grave. In a small practice in particular, there are huge benefits for patients with continuity of care. Smaller practices tend to top the patient satisfaction tables and very importantly, serious illness is less likely to be missed if you know the patient and their history well. Patients are also more likely to confide worrying symptoms if they have a good professional relationship with their doctor. Patients repeatedly rank continuity of care as a high priority.

Never underestimate the value of the doctor’s receptionist who knows you and some of your history and knows when to push to get you seen. This is not so important for those patients who request emergency appointments but is more important for those who do not request yet the receptionist feels uneasy about any delay. We rely on our receptionists to tease out the information so that we can prioritise our work appropriately.

General Practice in the UK is facing a very serious crisis as fewer junior doctors choose this career path. The politicians still reckon they can produce 5000 new GPs by 2020 despite the recruitment crisis and the fact a significant percentage of GP partners are due to retire within the next 5 years. The GP workforce has declined by 400 full time equivalent GPs in the last 3 months. Those of us remaining spend ever more clinical time away from our practices attending meetings trying to find a way to cope with the way the NHS has evolved due to endless interference and changes.

In recent years we have seen the demise of the Primary Care Trusts which thrust the responsibility of commissioning services onto GPs. Currently we are being asked to group together in a federation of practices to bid for GP provider services. If we do not do this, we risk losing any say in the services patients receive.

GPs are deeply committed to their patients and constantly fight on a daily basis for the best possible care. I would not wish to work in a practice of 40,000 patients and I think this move, if it goes ahead, will drive more doctors from the profession. If you want to retain village practices that offer a personal level of care and continuity, please write to your MP, make your opinions known to the CCG.

***STOP PRESS ***

Self-Care Policy

The CCG has just emailed all practices announcing that as of 1st April they will not fund any drugs for minor ailments where over the counter options exist.