APRIL 2019 NEWSLETTER

PREGABALIN AND GABAPENTIN

Please be aware that these drugs (used for the treatment of epilepsy and chronic pain) have been reclassified as 'controlled drugs'. The reclassification has occurred due to abuse of these drugs. Previously it has not been possible to send controlled drugs via the electronic prescribing system. This has now changed since 28th March – so we have spent the whole of March telling patients these scripts need to be collected only for it to change again by April!

MEDICATION SHORTAGES

For several years now (and well before the referendum result of 2016) there have been interruptions to the supply of certain drugs without explanation and sometimes for months on end. We have NO CONTROL over this and neither does the pharmacist. Instead of asking for an alternative and then taking exception to the alternative given, might I suggest you ask the pharmacy for names of the alternatives available? If no alternative is specified you will be given the safest and most cost effective to suit your clinical need.

OVER THE COUNTER MEDICATIONS

Want to help the NHS? It would help if patients could purchase items available over the counter rather than insist on a prescription (as the NHS is charged a lot more than the cost of the item). We should not be prescribing simple analgesia, antacids, antihistamines, emollients, shampoos etc on a routine basis. If you can do your bit to help the NHS it would be greatly appreciated. NHS England has issued clear advice that such items should be purchased privately where possible – if you can help the NHS, please do so.

EMERGENCY APPOINTMENTS

Please note we will only address the reason for the emergency within an emergency appointment. Please do not ask for anything else to be addressed as this adversely impacts on the patients waiting (and the GP's mood and blood pressure). 🗇 🌚

OPEN SURGERY

Monday open surgery is aimed at 'one problem per patient' and a rapid turnover of patients. It is ideal for problems that can be dealt with quickly and which would not need a full ten minutes. This was the plan. If attending inappropriately, we will do what we can in the available time but you will be asked to come back. What is 'saving time' for you results in a huge knock on effect on waiting patients. Your consideration would be greatly appreciated. We have recently had to cancel the routine appointments at the end of open surgery as we are not finishing in time.

New Text Messaging Service

We are trialling a new service to reduce the number of patient contacts (by phone or at the window) to try to facilitate quick responses and improve patient access. It is vital we have your correct mobile phone details. The message gets sent directly to your mobile. You will not be able to reply – but hopefully there will be enough information in the text to reduce the need to reply. We think this will free up reception time and your time. Please give us feedback if contacted.

Primary Care Networks

The next re-invention of the wheel is the setting up of Primary Care Networks – working collaboratively with neighbouring practices to improve patient access to services with the dwindling number of GPs available. No, me neither! We are in a lovely network with neighbouring practices and will be working hard to see if we can make this work. Wish us luck.