

- Dunblane Medical Practice - *Newsletter*

www.dunblanemedicalpractice.co.uk

Autumn 2018

Issue 18

Staff News

Babies, Babies, Babies!!!

Congratulations to Dr Emma O'Connor who had a baby girl in June, Dr Lauren Colquhoun who had a baby boy in July and Dr Kathleen Brennan who had a baby girl in September. We wish them all the best and look forward to having them back next year following their maternity leave.

Maternity leave is currently being covered by Dr Sharon Sayers, who works all day Monday, Tuesday and Wednesday and Dr Claire Spearing who works all day Thursday and Friday. Ad hoc cover is also being provided by various locums.

Practice Nurse

We would like to welcome Nicole Sinclair, who has joined our nursing team for 2 days per week. Nicole is a qualified nurse, who is training to be a Practice Nurse.

GP Retirement

Dr Wright will be retiring from the Practice at the end of March 2019, having been a Partner at the Practice for 28 years. We would like to wish Dr Wright all the best for his well-earned retirement. We have been fortunate, in the current climate, to have found a replacement Partner. Dr Chris Brown is currently a Partner at a Practice in Edinburgh and will join us in April next year.

It is not too late to have your flu vaccination. Please contact the Health Centre for an appointment!



Information Session Learn a little bit about what it's like to live with dementia and the small things that you can do to help people affected by dementia in your everyday life



Where: Dunblane New Golf Club
Perth Road
Dunblane, FK15 0LJ

When: Tuesday 27th November at the following times:
10am - 11am
11.15am - 12.15pm
1.15pm - 2.15pm
2.30pm - 3.30pm

Please contact: Donna Paterson on 07733 302772

OPEN LETTER TO PATIENTS

Dear Patient

GPs and GP practices are under unprecedented pressures. The following is an extract from a message delivered by the British Medical Association's GP Committee UK Chair at the recent annual conference.

“For 70 years, general practice has been the foundation on which the NHS has been built. It's been on this foundation of general practice, and the primary care we provide, that other NHS services have depended. We've managed demand, enabled efficient working elsewhere in the system, directed patients to the right specialist service, been innovative in care pathway design, and above all, managed clinical risk on behalf of the NHS as a whole.”

“But when nearly 40% of GPs intend to quit direct patient care in the next five years, and over 90% of GPs are reporting considerable or high workload pressures, we know that the foundation of general practice has serious structural faults. When instead of gaining an additional 5,000 GPs, we've lost over a 1,000, we know that the foundation of general practice is cracking. When over a 1,000 GPs have referred themselves to the new GP Health Service in England because of stress and mental health problems, or when hundreds of practices have closed and over a million patients have been forced to look for a new GP service, we know that the foundation of general practice is breaking down. “

Dr Vautrey said GP services had been undervalued and taken for granted.

“GPs work ethic and dedication to their patients has been exploited through a decade of underfunding and soaring workload pressure, with the assumption that the GP practice will always be there to pick up the workload that others say they cannot or will not do.”

“ The NHS fails to commission a specialist service, well don't worry, the GP can do it; local authorities cut smoking cessation or weight management services, but don't worry, just make an appointment with your GP and they'll prescribe what you need; a new specialist care home or a private hospital opens up in the area without warning or planning, but don't worry, the GP will pop around regularly to visit everyone; and then some bright spark comes up with a well-meaning idea that just requires the patient to get a letter from their doctor, but don't worry because that's what GPs are there to do, isn't it?”

“Well let me make it clear, it is now time to worry. The foundation of general practice on which the NHS is built is seriously at risk of collapsing and if the NHS wants to survive to an old age we need urgent action now. If we cherish our NHS it's time to save general practice.”

The crisis in General Practice is a national one, but locally we are experiencing the same problems. Several longstanding, well established practices in the Forth Valley area have recently been unable to recruit General Practitioners. No practice is immune from these pressures and currently the increasing demand and workload, allied to the reduced number of available GPs, has led to recruitment problems for all practices up and down the country. Dunblane will be no different. Currently GP practices are having to work harder with fewer GP partners, whilst seeing increasing numbers of patients, particularly the elderly with increasingly complex problems requiring more time. Managing all this, as you can imagine, has become somewhat problematic within practices.

Given the above, the current model and provision of general practitioner services is anticipated to change in the years to come. The new GP Contract recently devised, accepts that the provision of primary care services will be met by a greater number of allied health professionals attached to the general practice team. At present here at Dunblane Medical Practice, we work alongside, District Nurses, Practice Nurses, Health Visitors, Podiatrists and Physiotherapists. It is anticipated that in practices up and down the country, these services will be augmented with the provision of in-house Pharmacists, Mental Health Practitioners, Advanced Nurse Practitioners and potentially Ambulance Paramedics. This increasing list of healthcare professionals is an attempt to distribute the care and the workload more equitably within the practice team. More importantly, is the idea to have the patient seen by the most appropriate healthcare practitioner with the minimum of delay. This means that on phoning the Practice, you will be asked in more detail, exactly the nature of your problem, to allow the receptionist to direct you to the most appropriate team member. Ultimately, this might lead to either an appointment or a phone call from a Nurse or a GP in the Practice, or indeed you might now be directed to speak to or see a Pharmacist. In time, the same service may be provided by a Physiotherapist, a Mental Health Nurse Practitioner or perhaps even an Ambulance Paramedic, based here within the Practice.

The planned changes will be implemented soon and we hope you understand the urgent need for change to allow us to continue to provide as efficient and professional a service as possible in these difficult times. Despite the growing burden in General Practice and the workforce problems, we are determined to continue to provide an efficient and professional service to all our patients here in Dunblane.

Apart from the above, please also remember that:

- If a home visit is required, please request this as early in the day as possible to allow the on-call GP to plan the day as efficiently as possible. The GP or nurse may phone to clarify the need for a home visit.
- GPs sign several hundred prescriptions on a daily basis, often during any free time between surgeries. Each prescription has to be checked and signed off by a doctor and this therefore takes a significant amount of time. Despite this, almost all prescriptions are ready within a 48-hour period and most within a 24-hour period. Please therefore remember to arrange to have your prescriptions ordered in a timely manner, minimising the need for urgent same-day prescriptions.
- Please remember the Practice is not an emergency service. If you feel your problem is a medical emergency, please call 999 without delay. For less urgent problems, please remember you can call the NHS 24 advice line by phoning 111.
- Local pharmacists can now offer an increasing range of services and it can often be more advantageous to contact them directly to get information, advice and treatment regarding minor ailments such as coughs, colds, urinary tract infections, etc.

Many thanks for your consideration regarding all of the above and please be assured that all members of staff at the Practice will continue to work hard to meet your healthcare needs in the years to come.

Yours sincerely

Dunblane Medical Practice

MAKE THE RIGHT CALL



YOU DON'T ALWAYS NEED TO SEE A GP. Sometimes another healthcare professional or service may be more appropriate or you could self-treat at home.



Self Care at Home

Coughs, colds, sore throats, minor cuts and grazes - can be treated with over-the-counter medicines and plenty of rest



Local Pharmacy

Urine infection (females 16-65); Impetigo – aged over 2; Conjunctivitis – Over 1; Vaginal Thrush; Minor Skin Conditions; Coughs, rashes, minor aches & Pains; Smoking Cessation Support



Practice Pharmacist

If you have any queries regarding your medication, please ask to speak to our Practice Pharmacist



NHS 24

If you require urgent medical attention when the Practice is closed. Please call NHS 24 on 111



Minor Injuries Unit – Stirling Community Hospital

Minor Burns and Scalds; Infected Wounds; Sprains and Strains; Cuts and Grazes; Minor Eye Injuries; Minor Ear Injuries (not infection); Head Injuries



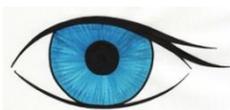
999 or A&E

Severe Bleeding; Choking; Breathing Difficulties; Uncontrolled Seizures; Severe Chest Pain; Suspected Stroke; Severe Burns & Scalds; Severe Allergic Reactions



Dental Service

Constant throbbing toothache; Abscesses; Crowns; Bridges falling out
Teeth sensitivity to temperature; Intermittent dull toothache



Optician

Blurred Eye; Sudden Loss of Vision; Sudden Flashes or Floaters
Infected Eye, Red Eye, Sore Eye, Dry Eye, Watery Eye



Musculoskeletal (MSK) Helpline - 0800 917 9390

If you are experiencing muscle, back or joint problems, please call the helpline. They can provide information and advice and can refer to a physio or MSK specialist if required.



GP Surgery

Severe tummy/belly pain

Long-term conditions, eg asthma, diabetes, heart disease, blood pressure; Anxiety and Depression; Skin lesions & anything not mentioned above.