

OUR DOCTOR WRITES

MAY 2008

In the Sunday Times on the 13th April there was an article entitled “*One ailment one appointment*” Apparently some surgeries have been putting up notices in their waiting rooms asking patients to limit their consultation to one problem. This has caused concern and consternation and I understand why. The reason that it has happened is a direct result of the pressure that is being put upon primary care and GP’s in particular. Appointments need to be available for all within 48 hours and also freely available beyond that timeframe. Over the last few years there has been a huge shift of patient care from the hospital setting and into General Practice. Family doctors are dealing with ever more complex problems and treatments in a holistic manner that when I started in practice 20 years ago would have been managed by a host of hospital specialists. I think that all of this is appropriate. GP’s are highly trained experts in the management of undifferentiated presentations of illness and the holistic care of individuals with complex and often competing health care needs.

The problem with putting notices up like this though is that the agenda of the consultation is being controlled entirely by the doctor from the outset. In the eyes of the patient multiple problems may all point to a similar cause, it can be difficult to know which of a series of problems may be the most important or the most urgent to bring up. I think that rather than limiting a consultation at the outset in a manner like this it is much more appropriate for both the patient and the doctor to work together in partnership and be prepared to deal with multiple or complex problems in further follow up consultations. This also brings with it an added benefit of time being used as a diagnostic tool.

There has been a pharmacy White Paper published by the Government recently which is set to fundamentally change the nature of dispensing practices in the UK. My understanding of the changes is that it should lead to an improvement in the services that we can offer to patients at the surgery in Bedwyn. The key difference is that at present dispensing can take place for patients who live more than a mile from the nearest pharmacy. Under the new system the surgery itself will be able to dispense for all of its patients as long as it has dispensing status and that there is not a pharmacy closer than a mile away. I will keep you informed through this column as more information becomes available.

Best wishes,

Dr Tim Ballard