

The Aultbea & Gairloch Medical Practice

Dr G A Mitchell ✕ Dr G P Baptist ✕ Dr K M Vickerstaff

NOTICE FOR PATIENTS

August 2018

GP PRACTICE SERVICE CHANGES

It is with regret that we have to report that we have been unable to recruit a replacement GP for Dr Grenfell who is leaving us so we need to make some changes to the way GP services are delivered locally during the day.

Patients may well be aware that for some time now it has been increasingly difficult to recruit GPs in Scotland and also across the rest of the UK. A quick online search for “GP recruitment crisis Scotland” comes up with lots of hits. Some headlines are included below:

One in four GP practices in Scotland has a vacancy ¹

GP practice closure due to staff shortage [Cromarty practice, Black Isle] ²

GP recruitment problems affecting patients, doctors tell MSPs ³

For more than 3 years we have been trying to recruit a GP to replace Dr Ramsay who retired in January 2015. We have had Dr Grenfell working with us since late 2017 but he is moving away from the area in August 2018. This will return us to the same GP complement that we had mid 2017. Previously we were able to plug the gaps in our rota with locum GPs but this option is also no longer readily available to us.

Our waiting time for a routine appointment with any GP or Advanced Nurse Practitioner (ANP) remains between 1 and 2 days, whereas nationally this is around 2 weeks ⁴. We expect that this will continue; the problem that needs addressed is our inability to staff 2 buildings with a GP on each of 5 working days every week.

Our GPs are unusual in that they work both during the day and overnight, providing “out of hours” (OOH) cover to our practice area during the week ⁵. We have 3 GP partners at present, one of whom works less than full time in preparation for retirement. When one GP is on holiday or undertaking necessary training to retain their registration and we are down to 2 GPs then it is not possible to keep a GP in both buildings all day every day without using GP locums to “top up” the rota. We have advertised for locums for the rest of this year but were unable to fill any of the weeks available. So we now need to do something different to make sure local GP services are sustainable. We have spent a long time looking at the options.

We are not alone in battling with these issues, as can be seen at other GP practices elsewhere in Scotland:

Dundee practice could close following difficulty in recruiting GPs ⁶

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HOW ARE DAY TIME SERVICES PROVIDED AT PRESENT?

	AULTBEA SURGERY	GAIRLOCH HEALTH CENTRE
Monday	GP on site 09.00 – 17.00 Practice nurse 09.00 – 17.00	GP on site 09.00 – 17.00 Practice nurse 08.00 – 12.00 ANP on site 09.00 – 17.00
Tuesday	GP on site 09.00 – 13.00 Practice nurse 08.00 – 12.00 ANP visits care home 09.00 – 12.00	GP on site 09.00 – 13.00 Duty GP available 13.00 – 17.00 ANP visits residential home 14.00 – 17.00
Wednesday	GP on site 09.00 – 17.00	GP on site 09.00 – 18.30 Practice nurse 09.00 – 17.00
Thursday	GP on site 09.00 – 18.30 Practice nurse 08.00 – 12.00	GP on site 09.00 – 17.00 Practice nurse 09.00 – 17.00 ANP on site 09.00 – 17.00
Friday	GP on site 09.00 – 17.00	GP on site 09.00 – 17.00 Practice nurse 08.00 – 12.00

Dispensed medication can be collected from the Aultbea Surgery at any time when the building is open during weekdays.

HOW WILL DAY TIME SERVICES BE PROVIDED FROM MONDAY 20 AUGUST 2018?

Our original proposal was to reduce the number of days that a GP is based in the Aultbea Surgery from 5 to 2 days a week. Gairloch Health Centre would have remained with a GP based there 5 days a week. Although far from optimal, this approach did give clarity to service users and provided consistency week to week. After discussing this with a number of stakeholders including representatives of the Community Council we have decided to alter this to a more flexible rota setup that, although not as predictable week to week, does mean that there will be a GP based in Aultbea more often overall.

After the changes there may be days when there is no GP based at one of our sites. The Gairloch Health Centre will probably be affected on fewer days than Aultbea because Gairloch is the busier of our sites. On these occasions there will always be a GP based at the other site so patients will be able to be seen urgently on the day, just not necessarily in the building and with the clinician of their choice. Alternatively they can choose to wait for an appointment when it is less urgent.

Dispensed medication can still be collected from the Aultbea Surgery at any time when the building is open during weekdays.

FREQUENTLY ASKED QUESTIONS ABOUT THE NEW SERVICE

Is the real reason this is happening because of budget cuts?

No this is absolutely not the case. We have enough funds allocated to recruit an additional GP and we continue to advertise the position. If we are able to recruit a new GP in the future then the changes will be reconsidered. Similarly if we could retain the services of GP locums, as we used to in the past, then we would do so and could continue with the current service with a GP in both sites 5 days a week.

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Why are you penalising people who happen to live near to a surgery where there is no GP that day?

We realise that these changes are not good news for anyone so affected. We have tried hard to recruit another GP to avoid having to disappoint our patients. We would like to apologise for the inconvenience caused. Having considered a number of alternatives this option will be the least disruptive to the majority of patients whilst allowing, we hope, the sustainable running of the Practice.

Are the changes “set in stone” and will they lead to further reductions in GP services in the future?

No. As stated above, if we are able to recruit a new GP in the future then the changes will be reconsidered. We are still advertising and trying other ways to recruit another GP. We know that we will probably have trainee GPs placed with us in the future and we will need to make changes then to make room in the rota for them to be able to see patients.

Why is Aultbea going to be more affected than Gairloch?

Over the last 14 years there has been a 25% reduction in patient appointments at the Aultbea surgery. Over the same period activity at Gairloch Health Centre has increased such that there are now almost 50% more patients seen at Gairloch than in Aultbea.

There are problems with the building in Aultbea which is owned by the local health board NHS Highland. They have decided that the Aultbea Surgery cabin extension which was installed in 2004 is no longer fit for purpose. Their plan is to return the building to something approximating its layout prior to 2004 which means there will be either 1 or 2 consulting rooms on site, rather than the 4 clinical rooms in use at present. So there will be less room available for GPs alongside the other building users.

We are aware of additional problems in the future that will affect our ability to provide a service in Aultbea. There is a national programme underway to upgrade GP surgery internet link capacity to make way for changes to our IT systems planned to take place from 2019 onwards. There are 15 surgery sites in the whole of Scotland that are currently unable to be upgraded; the Aultbea Surgery is one of these 15 sites.

What if we just ask for more home visits when there is no local GP?

Home visits are offered to all of our patients when there is a clinical need for them i.e. the patient is unable to attend the surgery because they are housebound, immobile or too unwell to travel. The NHS considers lack of transport not to be a reason to request a home visit. We are fortunate to have a volunteer car scheme in the area plus a tradition whereby family members, friends and neighbours generously help out with transporting patients to the surgeries. We hope that this will continue and just like happens at present for the many patients we have who live a long way from either of our surgery sites folk will be able to find a way to access our services.

It makes no sense to have a GP driving up and down the road to and from patients' houses using up the increasingly limited and valuable time when they could be seeing other patients. Also seeing patients at home means the GP is unable to view the medical record, cannot print prescriptions, cannot access certain medical equipment and it is often an unsuitable environment to carry out examinations.

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Will the surgeries be closed when there is no GP there during the day?

We are planning to keep our current reception staff in place with both buildings open 5 days a week as happens now. This will mean even when there is no GP or practice nurse consulting then Aultbea patients can still attend their surgery to collect medication that has been dispensed for them by Gairloch Pharmacy and delivered to site. Our staff will be available to answer queries, book appointments and direct patients to the most appropriate healthcare service.

There is a risk that a patient could turn up at the surgery who is acutely unwell on a day when there is no GP on site. This can happen now, for example when the GP is out on a house visit. Our staff will be able to direct patients towards the most appropriate healthcare provider which may involve travelling to the other site to be seen or calling an ambulance when necessary. We are fortunate to have long serving and experienced staff based at both surgeries.

What about Out of Hours (OOH) care?

Part of the reason for this change is to enable the GPs to continue to provide OOH cover during weekday nights. This has been the case locally since the UK wide changes to GP contracts in 2004 which meant GPs are no longer required to be responsible for their patients 7 days a week, 365 days a year. We still believe providing OOH cover is a valuable part of local healthcare provision. The alternative would probably involve patients having to routinely travel a long distance outside of the practice area to be seen by an OOH clinician who would be unfamiliar with their medical history.

We hope it is possible to continue to provide OOH cover as well as services during the day. For about half the year this will involve GPs working during the day plus being on call overnight for 2 nights a week. This could involve doing a continuous shift that lasts 44 hours! We will try and make this work. We rely upon and appreciate the continued goodwill of patients, for example not calling out the GP at night for routine concerns that could wait until the following day. We will keep our OOH workload under review in the light of local service changes plus other national contractual developments.

References:

- 1 <https://www.bbc.co.uk/news/uk-scotland-40131081>
- 2 <https://www.pressandjournal.co.uk/fp/news/highlands/1306154/gp-practice-closure-due-to-staff-shortage/>
- 3 <https://www.bbc.co.uk/news/uk-scotland-scotland-politics-37484019>
- 4 <https://www.thesun.co.uk/news/1265310/need-to-see-a-gp-the-average-waiting-time-for-an-appointment-is-now-13-days/>
- 5 <http://www.gov.scot/Resource/0048/00489935.pdf>
- 6 <http://www.managementinpractice.com/editors-pick/dundee-practice-could-close-following-difficulty-recruiting-gps>