



Dear patients,

PEG Article [02] – November 2022

This is our first information article to the patient community of Llys Meddyg and Gyffin Surgeries. In this letter we were keen to provide patients with an understanding of the Patient Engagement Group and the way it works, with but independently of the surgeries.

If you wish to leave us with feedback regarding this article, then do please do so through the link found on the PEG website page. We welcome your thoughts..!

Why you wont always see a Doctor

The demand for healthcare has increased steadily over the last three decades primarily because the population has increased, has become generally less healthy and their health problems have become more complex. This has required a re-alignment of health care provision with greater diversity of health care professionals delivering care. Because of advanced training and extended roles, non-medical professionals can meet a significant portion of the present health care demand. If you go to hospital, you may well be treated by an advanced care practitioner who is not a doctor but is part of your consultant's team. In the same way, when you 'visit' the surgery, your consultation may be with a non-medical health care professional, such as a nurse, physiotherapist, pharmacist, or occupational therapist.

It is not always necessary to see the GP because another health professional may have greater expertise in your health concern. Your GP has an extremely impressive range of expertise; he or she can rapidly diagnose acute life-threatening conditions such as heart attacks, manage chronic physical conditions such as kidney failure, mental conditions such as depression and fill an important social supporting role for those who are ill but not ill enough to be in hospital. However, there are conditions particularly of the muscles, joints, and skeleton where physiotherapy is the most important first treatment. If you had seen your GP with these conditions, it is extremely likely that he or she would have sent you straight for physiotherapy. Therefore, seeing the physiotherapist first provides faster access to treatment and spares a consultation with the GP who is then free to see another patient.

Many of the conditions which bring us to our GP are chronic. Examples of such long standing conditions would include diabetes, high blood pressure, heart failure, asthma and other life-long chest diseases, anxiety and depression, arthritis and dementia. Once diagnosed these conditions frequently require just monitoring and perhaps adjustment of medication rather than a new line of treatment. A health care professional with advanced training such as a practice nurse can monitor you and adjust your treatment just as well as your GP. Similarly, specialist areas such as maternity services or women's health can be delivered by appropriately trained personnel who simply don't need the breadth of your GP's knowledge to deliver effective care in that area.

Unfortunately, there are now just not enough doctors to meet the requirements of the NHS. This shortage of doctors affects the hospitals in just the same way as GP practices. GPs are now a scare resource and so they must direct their efforts to where they can do the best. GPs are most effective in the diagnosis of new health problems. They take a history (ask you questions), then examine you and order investigations such as blood tests and X-rays before reaching a diagnosis. They then start treatment or refer you to hospital for specialist treatment or surgery. If your visit to the practice concerns a health problem that has already been diagnosed by your GP, then there is a good chance that your consultation could be undertaken by another



health care professional. The care navigators who answer the phone are trained to help you decide whether you need to see a doctor. Think back over your last visit to the surgery; was the condition something new or was it a follow-up appointment for a health condition the surgery already knew about?

The days of always seeing a doctor are over. With increased demand for services, GPs must direct patients to other healthcare professionals who can look after their patients just as well as they can. Unfortunately, in the short term, the GPs have no alternative.

Saxon

Saxon Ridley – Chair

On behalf of the 'Llys Meddyg and Gyffin Surgeries Patient Engagement Group'