

How are repeat prescription requests managed?

If you are issued a repeat prescription you will need to request your medication each month.

Local NHS guidance advises we give no more than one month's supply at a time, unless in exceptional circumstances. This avoids wastage, avoids the patient possibly holding large quantities of drugs, and allows us to tailor prescriptions as and when needed. In order to request a further supply of your repeat medication you can either use our website, leave your completed prescription counterfoil in our repeat prescription box in

the surgery or ring the prescription line.

We are fully signed up to "Electronic Prescriptions" (EPS). This means that instead of printing you a physical prescription, the prescription is sent directly to the chemist of your choice who then downloads the prescription and issues it for you. We would encourage all patients on regular medication to sign up for EPS. For further information please pick up a leaflet in the Practice or enquire with your chosen pharmacy.

Facts & Figures

Some interesting facts and figures. All data compiled between May 2013 - May 2014.

- We had approximately **8,150** patients registered at any one time in the year.
- **1,052** visitors to Dartmouth were treated in our surgery (in addition to registered patients).
- The GPs undertook **22,106** "face to face" appointments
- **18,523** patients consulted under our "telephone triage" system
- **15,480** patients visited our nursing and healthcare team
- The GPs carried out approximately **1,400** home visits
- **187,539** prescription items were issued to **6,697** patients
- **31,731** blood test results were actioned by the GPs
- **21,830** hospital letters and discharges were actioned by the GPs
- Just over **62,000** telephone calls were handled by our receptionists
- We had **24,174** individual visits to our website
- **90%** of patient contacts in the NHS were carried out by General Practice
- Only **9%** of the total NHS budget went to General Practice

WORKING WITH DARTMOUTH MEDICAL PRACTICE



Patient Leaflet

Dartmouth Medical Practice is very grateful to all those who took part in the Survey of Patients' Opinions undertaken by the Patient Participation Group on our Practice's provision of healthcare. We have compiled this leaflet to respond to your main concerns.

Why can't I get an appointment to see my preferred doctor when I want one?

General practice has changed significantly over the past few years and continues to do so at an ever-increasing rate. There has been a dramatic rise in the number of patients with chronic health problems. More and more patients are being seen by their GP with conditions previously dealt with by hospitals. Our population is ageing, and general practice funding has decreased significantly in real terms over the past 5 years. All this has placed a growing burden upon General Practice and we are constantly trying to manage how we achieve the best balance.

We always have enough appointments overall. If patients wish to see a specific doctor our Receptionists will do their best to accommodate you but there can often be a delay.

We recognise the value of continuity of care but have to ensure that we retain a balance between enabling patients to book routine appointments in advance and having appointments available for patients who become ill suddenly. The doctors all enjoy working as a team and sharing your care.

Any GP you see or talk to over the telephone makes a corresponding detailed entry in your computer records so that a comprehensive history is always accessible thereby ensuring continuity of care. This includes results of all your investigations and any hospital letters.

Drs. Eynon-Lewis and Morris work full-time for the NHS and divide their time between General Practice and medical education, in Dr Eynon-Lewis' case, and medical management in Dr Morris' case. Dr Anderson spends one of his working days as a community Ear, Nose and Throat specialist.

These additional partner roles add to the collective experience of the practice as do the specialist activities undertaken by Drs Mackeachan, Uhr Delia, Chopin and Freeman who all work between 30 and 40 hours a week. The good news is that Dr Viviana Ludwig (our newly appointed partner) will be joining us in the autumn and Viviana will be able to make an important contribution to expanding our provision of urgent care and continuing care.

Booked Telephone Consultations

If it is not necessary to actually see your doctor you can arrange a telephone consultation and the doctor will call you back in a 'time slot' convenient to you.

Out of Hours Medical Care

Weekend and overnight medical care is provided by Devon Doctors on Call and accessible by telephoning 111. This is in line with nationally accepted practice.

Devon Doctors is largely provided by local GPs and ranks as one of the best Out of Hours provider organisations in the UK.

Triage (On-call Doctor) System

Last summer we introduced our Triage Appointment System to try and improve access to healthcare in Dartmouth. About one third of GP Practices in the UK have introduced this system.

Anyone needing to see a doctor on the day contacts the surgery and receives a prompt return telephone call from the Triage GP. Wherever possible this will be within the hour, often much sooner. The Triage GP is also available to see urgent conditions all day from 8.30am to 6pm so there may sometimes be a longer delay in returning your call.

In many cases the GP will be able to deal with your concerns over the telephone, issue a prescription straight away if needed, or book you an appointment for the same day if your need is urgent. For the system to be effective it does require patients using the system to be available to take the return phone-call from the triage doctor. All children under 5 are automatically offered an appointment to be seen at their convenience.

How are investigation results and hospital correspondence managed?

As soon as blood results arrive at the surgery they are placed into your records and actioned by the doctors working that day. We notify you of any abnormal results that need further action or a prescription etc, but because of the large number of results and letters we receive daily it is not practicable for us to notify you if your result is satisfactory; if you are concerned about a result always phone the surgery for information.

If you have been in hospital, a discharge summary is e-mailed to us detailing your problem, any procedures / investigations you underwent and any changes to your medication. We amend your records and repeat prescriptions accordingly. The hospital informs you directly of any follow-up required. Dartmouth Caring's BridgeWorkers with whom we work closely, follow up any vulnerable patients after their discharge.

What happens when I am called in for a medication or disease review?

Anyone who is on repeat medication or has a long term medical condition such as asthma, heart disease or diabetes is placed on a chronic disease register. All of these patients will be invited as a minimum annually for a review.

Every patient's repeat medication is reviewed at least once a year by their usual doctor. As part of this review, specific tests plus or minus a face-to-face consultation with a doctor or a nurse may be required. If you have been asked to have a blood test as part of your review, we kindly ask you to have this done at least one week before seeing the doctor or nurse to ensure that the results are available to them.