

A Conversation with Whitewater Health

Any search on social media or a look at the news will inform you that GP services are facing extreme issues, not just in our area, but all over the country. In fact one in six GP practices is currently closed and there are cases where keys have been handed back and the health workers have walked away. Private health companies such as Virgin and Operose have taken over some practices but, in some cases, have closed them down because they could not make them pay. So why is this happening and what can be done about it here in Hartley Wintney? I spent some time talking with Practice Business Manager James Perrin and Annette Rushmere, Chair of the Patients Participation Group. I asked some of the questions that seem to be on everyone's lips.

Q: Prior to 2019, we knew our own GP and it was possible to see them within a week or so. We are now unsure who our GP is and we cannot easily get an appointment. Why has this changed?

A: The NHS as a whole has undergone huge changes since 2019. At Whitewater there has been a high number of staff lost, some due to market forces, partners have moved on, some doctors have left through stress and, post-Covid, some have left through exhaustion. All surgeries are experiencing difficulties with recruitment and retention of staff. Many GPs are electing to work as locums which is less stressful and better paid. The traditional model of care from cradle to grave with a family doctor has changed. Due to lack of investment, cutbacks and targets, the model is now to see a clinician from a far wider team of medical colleagues and seeing a GP should no longer be an expectation.

Q: It is rumoured that Hartley Wintney is not a popular place for doctors to come and work. Is this the case?

A: Sadly, this is true. Doctors and other staff in Hartley Wintney have experienced abuse and in two cases racial abuse led to the members of staff leaving. When a doctor faces gibes regularly, multiple times per day, this understandably takes a toll. Critical expressions and comments about accents as well as skin colour have been directed at doctors and it is often from older patients.

This negative reputation is known to other doctors who consequently do not want to work here. Threats are sometimes even made about knowing where a doctor lives or where their children go to school. Abuse also follows colleagues home; the majority of our staff live in the area and some people feel free to make unpleasant and abusive comments on social media. Thankfully, there has been no need, as yet, to employ security staff as there is in some GP practices.

Q: Does everyone who calls in need to see a doctor?

A: When a patient calls, the receptionist is trained to ask certain questions to ensure that the patient sees the most appropriate practitioner for their issue (again, receptionists are frequently subject to abuse). The most appropriate person may be a physiotherapist, nurse practitioner, senior nurse practitioner or paramedic. Not all issues need a GP. For comparison when a patient goes to A & E they are triaged, without complaint. This is the same process in the Practice and helps those who really need to see the GP to see them sooner. It's estimated that for 20 - 30% of telephone calls, there is no need to see a medical practitioner at all. Things like coughs and colds can be treated effectively with over the counter remedies. People seem to have developed a sense of increased expectation and have become more anxious since the pandemic.

Q: Why is an appointment restricted to ten minutes and one thing per appointment?

A: This is an NHS guideline and for a GP to listen to the patient, make a medical assessment and advise the patient, write up the patient record and then complete a possible action such as a referral letter or prescription etc in this time is highly challenging. Longer appointments mean less appointments in the clinic. At WWH we actually undertake 12.5 minutes consultations and some practices are extending to 15 minutes but of course this leads to less capacity in the system.

Q: Why aren't more appointments available?

A: As well as the appointments, GP's will have to deal with roughly 200 prescriptions every day and write or respond to about 100 letters, look at 100 test

results as well as e-consultations. Hartley Wintney has an ageing population which leads to many complex health needs, with consequently more prescriptions and complex health notes as well as the actual consultation. This all takes time. To be able to offer more appointments the practice needs more staff and more funding to accommodate the larger team; neither of which is currently available to us

Q How is the Practice funded?

A The Partnership is a private business and has a contract to operate GP services with the NHS. However the NHS places severe constraints in the contract with very little flexibility allowed. For instance in the current year the NHS has limited the contract increase for all services to 2.1%.

Q: Sometimes while the receptionist is asking questions, personal information is sought and, particularly with the screen it isn't very private and is off putting. Can this be changed?

A: There is an area to the right of the screen which offers greater privacy and patients are more than welcome to use this.

Q: There is a regular rumour that the Hartley Wintney surgery is closing. Is this true?

A: No. Regardless of people's perceptions, we're on the patients' side and we're committed to improving patient services. However, parts of the estates have increasing maintenance challenges and we do the best we can.

Q: What can patients do to help the practice which in turn will give them a better service?

A: If the issue is minor, such as a cold, use the pharmacy. If you are directed towards a medical practitioner other than a doctor, please accept it. If they feel you need to be referred onwards, you will be.

Please treat all staff with respect, they are doing a difficult job and doing the best they can, everyone wants to give the best service they can. Please be sympathetic if someone's appointment overruns. Together we can ensure that Hartley Wintney gives its residents the healthcare they need and deserve.

Irene Airton