

Making the most of your appointment

GP appointments last 10 minutes but you may only get 7 minutes actual face to face time. You might have a list of different problems and symptoms for the GP to sort out, and you may need to have a physical examination. After discussing treatment options and agreeing a plan with you, the GP also has to type up the consultation notes, add tasks to their worklist for later in the day (eg to create and dictate a referral), print and sign a script for any medication etc) before calling their next patient. It's a lot to fit into 10 minutes, and a recent national survey by Aviva reported that many patients feel their appointments are rushed.

In our practice we know many patients have to travel quite a distance to get here, sometimes relying on a lift from friends or relatives, or may have taken time off work, so we try to sort everything out in the one visit if we can, rather than cut you off in mid flow! But this can mean clinics can sometimes run quite late, especially if the GP has had a particularly unwell patient to sort out during the morning.

What we do:

- We schedule "catch up" slots during the morning
- We aim to tell you if your GP is running late as soon as you arrive, and apologise if things start to slow up whilst you are waiting.

What you can do:

- **Plan what you want to say.** Mention all your symptoms or concerns at the beginning of the consultation. Some apparently unrelated or trivial symptoms might help make the diagnosis. This also helps your GP to prioritise the most urgent problem.
- **Be brief.** If the doctor needs more details they will ask.
- **Avoid the "doorknob" moment.** Don't leave your biggest worry until the end—start with it.
- **Be honest.** Your GP needs to know if, for example, you haven't been taking your medication, or they cannot make an accurate diagnosis.
- **Be ready to disrobe.** Wear an outfit that is easy to get on and off if you need to be examined.
- **Keep a diary** if the problem is recurrent, like tummy ache or a headache—note the time of day, what you were doing, what you ate etc.
- **Make a list of questions** to ask such as what to do if things get worse, are there any side effects, how will you know if the treatment is working, what your options are.
- Above all, **don't be afraid to ask** if you don't understand or want more information.



Dr Baird

As announced in the winter newsletter, Dr Paul Baird will be retiring at the end of April 2016. He has been with the Practice for 25 years and he will be hugely missed by patients and staff alike. His last working day will be 29th April and his appointments are already filling up, so if you only want to say farewell to him do drop in on his last day, when we plan to give him just light duties.

As you know we don't operate a list system— all patients are free to see whichever doctor you choose—so if Dr Baird is your usual doctor it's a good idea to start seeing a new doctor, or try them all out! We have not yet appointed his replacement so over the summer we will be relying as always on our regular team of lovely locums, including Dr Rose, Dr Griffiths and Dr Coffin. From 1st May Dr Fowler will be our Senior Partner, and Dr Beale is taking over Dr Baird's minor surgery and cryotherapy ("the wart clinic") duties.

Inside:

- Our recent CQC inspection
- The new Patient Participation Group
- How to get the most from your doctor's appointment (and why they sometimes run late!)

Portesham Surgery, Malthouse Meadow, Portesham, Dorset DT3 4NS
Telephone: 01305 871468 email: receptionist@gp-j81609.nhs.uk

CQC Inspection

Our second inspection from the CQC (Care Quality Commission—like Ofsted for schools) took place on 9th February. The Inspection report takes 6-7 weeks to be finalised and published, so it will be April before we can let you know their findings.

We were one of the first practices in the area to have a CQC inspection in February 2014, which was done by just one inspector who was here for around 6 hours. Soon afterwards the powers that be decided that all practices should be given an official rating (Outstanding, Good, Requires Improvement or Inadequate). We therefore have the dubious privilege of being one of the first practices in our area to have had two inspections! This time we hosted no fewer than five inspectors (two from the CQC, one GP specialist, one practice manager and a pharmacy specialist) who were here for nine hours.

The new inspections focus on five key areas and asks whether the practice is:

Safe (do we protect our patients from abuse and avoidable harm);

Effective (patients' care, treatment and support achieves good outcomes, helps you to maintain quality of life and is based on the best available evidence)

Caring (staff involve and treat patients with compassion, kindness, dignity and respect)

Responsive (our services are organised to meet your needs)

Well-led (the leadership, management and governance of the organisation ensure we provide high-quality care, encourage learning & innovation, and promotes an open and fair culture).

We will let you know how we got on!

Patient Participation Group

Our new Patient Participate Group (PPG) has now met twice. The group is made up of volunteer patients who are helping us to look at how to improve our service to you. So far the group has focused on communications between us and patients, and has already come up with the following ideas:

- Staff photoboard—a poster is now on display in the reception area showing all our staff photos, names and roles.
- Patient Group noticeboard—PPG group members could be an important channel for people who, for whatever reason, might not want to speak directly to the Practice. To facilitate this we plan to put a new board in the waiting room with information about the group members, and a comments box, so that you can raise ideas or concerns directly with the group if you are not sure about talking to the staff here.
- Surgery Snippets—our occasional newsletter is available from reception and on the website, and we have recently also summarised it for inclusion in the Bride Valley and Chesil magazines. We also take copies to the village prescription collection points. However we don't put copies in the waiting room so we will start doing this, and also producing a larger print version which can stay on the waiting room noticeboard.

Group members currently come from Portesham, Abbotsbury, West Bexington, Long Bredy and Puncknowle, and represent a range of ages, but we would like to find another two members from the Burton Bradstock and Winterbourne Abbas areas, ideally working people or those with young families so that we have a good range of opinions and experiences represented at the meetings.

We are also keen to add to our “virtual group” of patients who have in the past given us their email addresses who we can occasionally contact to seek a wider range of views or when we are running surveys.

Do speak to a member of staff if you are interested in contributing, or email Portesham.feedback@gp-j81609.nhs.uk. Thank you.