

NHS Lothian Pharmacy First -

People can already make their community pharmacist their first port of call with common conditions, including; indigestion, colds, warts/verrucae, cold sores, diarrhoea, hay fever. The national Pharmacy First scheme is now available across community pharmacies in Lothian. Through this service people receive advice and / or treatment for skin infections, shingles and some urinary tract infections in women aged 16 to 65. Community pharmacists can also help with stopping smoking, emergency contraception, sexual health advice and can provide advice on prescribed medicines and how to get the most benefit from them. People can access the **NHS Scotland Minor Ailment Service** which allows pharmacists to supply medicine after a consultation, if needed, free of charge. Pharmacists can also advise if you need to contact your General Practice.

NHS Lothian is also introducing a community blood service **CTAC** where patients going to hospital for an appointment or being discharged from hospital and who need a blood test will be able to go to a centre convenient to them and have their blood test done by a community phlebotomist. Again, with no need to visit a GP.

Patients can also get lots of useful information about **self help**, treating common ailments & injuries themselves by visiting

NHS Inform
www.nhsinform.scot/

If you want to know more about the **Primary Care Improvement Plan**, please visit the **Scottish Government website**:

<https://www2.gov.scot/Topics/Health/Services/Primary-Care/Strategy-or-Primary-Care>



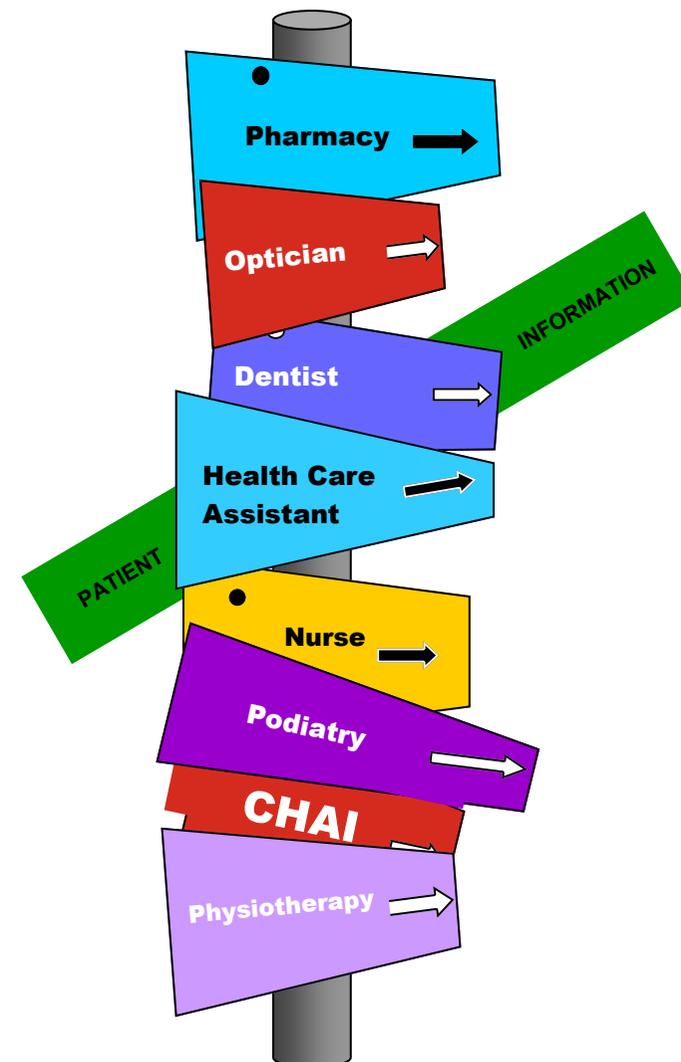
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With thanks to NHS Ayrshire & Arran



GP SERVICES ACROSS SCOTLAND ARE CHANGING



Right Person, Right Time, Right Place

GP services across Scotland are changing to make sure you get to see the right person, at the right time in the right place. Our aim is to provide safe, effective, person-centred, sustainable health care services at the heart of communities for our patients.

As part of our programme of change, NHS Lothian is implementing the Primary Care Improvement Plan which reflects the changes introduced from April 2018 within the new contract for GP practices. This describes new ways of working which will help address pressures being experienced in General Practice.

Why are services changing?

GP Practices have been under significant and increasing strain for the last few years. Our population is growing, as are the number of people who have long-term conditions and complex health needs. Since 2015 **consultation rates have gone up by 7% and telephone consultations by 37%**. Currently 21% of Scotland's GP workforce are aged over 55 and will be able to retire in the next 5 years. Unfortunately, there is not the equivalent number of newly qualified doctors to take their place and recruitment is a real issue. Many practices now have long-term vacant posts and some practices have had to close. More training posts are being created but this may take up

to 10 years to have any effect. **We need to act now.**

An overview of what we are doing

Currently, GPs see most people who come into our practice, even though there are other health professionals who may be more of a specialist in dealing with your symptoms. In the future, where it is safe, appropriate and improves patient care, some of the tasks currently carried out by GPs will be performed by other members of the multi-disciplinary team who will be based in our practice or made available to patients from another site.

The multi-disciplinary Team

Advanced Nurse Practitioners who are highly experienced senior nurses who can assess a patient, diagnose, prescribe and treat clinical conditions. They can also refer, admit and discharge where appropriate.

GP Pharmacists who can support prescribing processes, provide medication reviews and run specialised clinics.

Advanced Musculoskeletal (MSK) Physiotherapists who can assess and treat pain that affects muscles, ligaments, tendons and bones.

Mental Health Practitioners who will work with individuals providing assessment of possible mental illness at a practice level.

Community Link Workers/Connectors who will work with patients to help them navigate and engage with wider services.

It is important to emphasise that your GP will still be there and available to you when you really need them. The aim is that GPs, over time, will assume their role as **Expert Medical Generalists (EMGs)**

and support those patients with the most complex conditions.

When you call the practice, the Practice Care Co-ordinators will ask you some questions to find out who the right professional is to help you, to ensure that you are seen by the right person, at the right place and the right time. For example, if you have a muscular complaint, you may be offered an appointment with the Advanced (MSK) Physiotherapist.

What's happening now?

Not everything will change immediately. NHS Lothian's improvement plan covers the work we are doing over the next three years. This will involve planning how the new teams will look, recruiting and training the right staff and placing them in local communities where their skills and knowledge will be best used. We expect GP practices to change over time and when you visit for an appointment you may be seen by another healthcare professional. At all times your health and wellbeing will be at the centre of the service we deliver. Some of these changes have already been implemented and are working extremely well. Right now in Lothian, if you have an eye problem, you can go to your **local optician**. As eye specialists, they are able to use their specialist equipment and knowledge to diagnose and, depending on the problem, are able to write a prescription which you can take straight to your pharmacy. So no need to visit a GP.