

3rd International Conference on **General Practice & Primary Care**
&
24th International Conference on **Dental Public Health & Dental Hygiene**

August 16-17, 2018 Madrid, Spain

Who do i see when i'm sick?

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Statement of the Problem: In an already overstretched health service, it is getting ever more important to make sure that healthcare encounters are rationed appropriately. Unnecessary appointments waste valuable GP consultations and increase waiting times for patients in need. This in turn puts pressure on emergency departments when patients use the service to get access to a doctor when no accident or emergency has occurred.

Methodology: 120 GP appointments over a one-week period were analysed to identify whether the presenting complaint was appropriate to be booked in to see a GP or whether the patient would be better served by an appointment with a different healthcare professional

Findings: Of the 120 GP consultations only 67% were deemed appropriate. Of the remainder, 33% could have self-cared with the suitable information, 33% could have been managed by the practice nurse, 22% could have been seen under the community pharmacy minor ailments scheme and 12% could have seen the in-house practice pharmacist. One in three patients did not need to be seen by a doctor

Implementing Change: A patient leaflet was designed detailing common conditions and the most suitable healthcare professional to see. A traffic light system was used that ranged from 'green' (self-care) diagnoses, through conditions needing pharmacy, nursing or GP care, to 'red' emergencies as well as extra information on certain conditions and local services. These leaflets were available at the reception in the GP practice and given out at all consultations. Posters and information leaflets were also developed for reception staff to aid telephone triage to the most appropriate healthcare professional when taking bookings from patients.

Leaflets have been given out at all appointments at Grafton Medical Partners, which has a total of nearly 40,000 patients.

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