

GP dispensing practice: Heinekin for the health service



Dispensing practices provide rural Britain with a ready-made solution to the problems of delivering cost-efficient healthcare services in rural areas.

Skilled and equipped to deliver a wide range of high quality medical and pharmaceutical services to rural people, England's 1,100 dispensing practices can be likened to Heinekin, the famous Dutch beer which for more than 40 years has been known as the beer that refreshes the parts that other beers cannot reach.

In rural areas GP surgeries operate on-site medicine dispensaries in areas where a community pharmacy is not easily accessible or where pharmacies do not operate at all.

Rural challenges

Westminster politicians will be well versed with the need to rural-proof policy, and take into account the specific challenges that surround the delivery of services in rural areas when redesigning medical or pharmaceutical services.

In a recent Commons debate on local government funding in rural areas¹, Sue Hayman (Labour, Workington) pointed out the significant cost of running services in rural areas, which include increased transport costs and the distances that need to be covered by service users (patients) as well as providers. She warned MPs that people who live 'on the edges' of an area, particularly, when it is remote, "are often missed" because of the difficulty in delivering services.

Exacerbating the problem is the fact that rural areas often have the eldest populations and they can hide pockets of deprivation behind the idyllic average that is often associated with rural areas.

Delivering rural healthcare services

Recruitment and retention within remote and rural healthcare is more challenging than in urban areas for a variety of reasons:

- Changes in the workforce demography have a proportionately greater impact in rural areas where the workforce is smaller
- An ageing workforce challenges succession planning
- A wide range of skills are required in areas where other healthcare services may be very sparsely located, but skills will decay where practice exposure is low.

As England redesigns the community pharmacy network and the delivery of pharmaceutical services in rural areas, policy makers should consider what better use can be made of existing and viable rural healthcare resources.



▲ A mother and daughter dispensing team: GP dispensaries can provide welcome employment for whole families in rural areas

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Dispensing GP practices are ideally located to help the NHS deliver efficient and effective pharmaceutical services in rural areas.

- Independent assessment by the GP regulator shows that dispensing practices are skilled and equipped to deliver high quality NHS healthcare and pharmaceutical services (see next page for more information)
- They are traditionally based in the centre of small local communities,

Health in rural areas

Rural areas exhibit a unique pattern of disease – which places unique challenges on healthcare service delivery:

- Higher suicide rates
- Higher incidence of alcohol-related disease
- Higher numbers of accidents (on roads, through climbing, farming, diving and fishing)
- Higher palliative care workload: patients living in remote areas often prefer to or are enabled to die at home, rather than in a distant centre
- Seasonal fluctuation in population

Source: NHS remote and rural setting steering group.²

and they have vast experience of experience of managing the unique health challenges of rural areas, dealing with geographically disperse, socially isolated and vulnerable patient populations, regularly going the 'extra mile' to help patients

- Dispensing income boosts the practice's financial resilience, providing funding for resources that would otherwise be unavailable and which can be used to reduce pressures elsewhere in the NHS and in social care.

What can I do?

- Dispensing GP practices all have the potential to help the NHS in England deliver a safe and effective primary medical and dispensing service – but many fail to deliver the maximum efficiencies required. Infrastructural challenges such as inadequate financing, medicines shortages, sub-standard IT and broadband, and recruitment and retention problems affecting nurses and GPs all put pressure on rural GPs. This jeopardises patients' chances of receiving the preventative care that avoids unnecessary admissions and keeps patients out of hospital.
- With your help dispensing practice can be transformed into a hub for the delivery of integrated health and social services in rural areas.
- Why not contact the Dispensing Doctors' Association today to arrange a visit to a dispensing GP practice? There, you will see for yourself the vital role these practices play in rural areas.

What is a dispensing doctor?

Dispensing doctors are general practitioners (GPs) who provide primary healthcare to around nine million rural patients.

Nearly 3.6 million patients of these live remotely from a community pharmacy.

At the request of the patient, dispensing doctors are allowed to dispense the medicines they prescribe for patients who live more than a mile from the nearest pharmacy. This service acknowledges that such patients may not have easy (or indeed any) access to a pharmacy and provides patients with access to medicines and general healthcare under one roof. This includes the operation of branch surgeries and near-patient tests for patients in rural areas.

Dispensing practices go the extra **country** mile



Delivering safe, proactive and cost effective care has become a signature characteristic of dispensing practice in England, according to recent reports from the GP regulator, the Care Quality Commission

Analysis of reports received from CQC inspectors shows that there are more 'outstanding' and fewer 'inadequate' dispensing practices than the average for England³ and that dispensing practices around the country regularly demonstrate their willingness to go the 'extra country mile' to deliver compassionate care in their local communities. The following represent a small selection of recent reports of outstanding DDA member dispensing practices from the CQC:

East Leake Medical Group, Leicestershire

The East Leake Medical Group, near Loughborough, Leicestershire, has been rated outstanding for its responsiveness and leadership. Assessing the practice for its responsiveness to people's needs, inspectors heard staff say that the practice put patients before financial concerns to provide its dispensing service because it wanted to "avoid people having to travel to receive their medicines". A survey carried out by the practice identified that all patients who used the dispensary were happy with the service, which allowed them to collect their prescriptions in a convenient location without having to undertake an extended journey on public transport.⁴

Pendleside Medical Practice and the Castle Medical Group, Lancashire

Two practices, the **Pendleside Medical Practice** in Clitheroe, Lancashire, which shares a dispensary with the **Castle Medical Group**, have both been awarded outstanding ratings – for caring, responsiveness and the quality of its leadership.

Inspectors applauded the practices for procedures to monitor prescriptions that had not been collected, learning from incidents or 'near misses', and its systems to assess the quality of the dispensing process.^{5,6}



The dispensary team which supplies patients at the Pendleside and Castle Medical Group surgeries ▲

New Springwells Practice, Lincolnshire

Rated outstanding on measures of caring, responsiveness and the quality of the leadership, the New Springwells Practice, in Sleaford, Lincolnshire, was applauded for its policy of providing extra GP appointments, reception and dispensary services in times of high demand; patients told inspectors that they felt that staff 'went the extra mile'.⁷

Alston Medical Practice, Cumbria

The medicines delivery service at the Alston Medical Practice in Cumbria (pictured below) also contributed to an outstanding rating for the practice. The practice was rated outstanding for caring and responsiveness. Inspectors heard examples of staff taking shopping or medication to house-bound patients, and checking up on patients who missed appointments.⁸



- References**
1. Commons debate: Local Government Funding: Rural Areas. <http://bit.ly/1Q4CY0H>
 2. Scottish Government. The final report of the remote and rural steering group. <http://bit.ly/1MrGnMQ>
 3. Dispensing Doctors' Association website article. Seven features of inadequate general practice. <http://bit.ly/1Xt33Ni>
 4. CQC inspection report. East Leake Medical Group. <http://bit.ly/1N6mriE>
 5. CQC inspection report. Pendleside Medical Practice. <http://bit.ly/1oTZxWY>
 6. CQC inspection report. Castle Medical Group. <http://bit.ly/1XCthgi>
 7. CQC inspection report. New Springwells Practice. <http://bit.ly/1Vj0q0U>
 8. CQC inspection report. Alston Medical Practice. <http://bit.ly/1VQWPYI>

About the Dispensing Doctors' Association

About the Dispensing Doctors' Association The Dispensing Doctors' Association (DDA) represents over 6,600 doctors currently working in 1,450 dispensing practices across the UK. It is the only organisation that specifically represents the interests of dispensing doctors and their 8.8 million patients. The DDA meets regularly with ministers and other agencies to promote the contribution dispensing doctors can make to rural health, and achieve fair remuneration and reimbursement for their services. DDA members are always delighted to talk to politicians about the service of rural dispensing, and to host visits to their practices. If you would like any more information on dispensing, or are yet to visit a constituency practice, please contact the Dispensing Doctors' Association office on: Email: office@dispensingdoctor.org Tel: 0330 333 6323 Web: www.dispensingdoctor.org