

# Take your chance to improve rural health



Practices such as Port Ellen Surgery on Islay provide a one-stop shop for healthcare in rural areas



As Scotland elects its new Parliament, Scottish politicians must recognise the ongoing challenges to rural GP services in Scotland, and prioritise initiatives to improve the quality of life of Scotland's rural residents.

In particular, they must recognise the importance of dispensing income to rural general practice, as a subsidy to the NHS general medical service. They must also address ongoing deficiencies in the NHS pharmaceutical services regulations in Scotland that fail to recognise the GP dispensing service as a pharmaceutical service.

Over the past few years, the Scottish Government has announced several policies designed to encourage innovation and revitalise Scotland's rural areas, specifically: A Stronger Scotland<sup>1</sup> programme for Government and, more recently, the Future Islands Bill.<sup>2</sup>

Enhancing GP recruitment and retention in rural areas forms a key part of these plans.

### Intrinsic weaknesses

But, despite the welcome political and financial pledges, there remains an intrinsic weakness in the regulatory infrastructure of rural general practice. The current NHS pharmaceutical services regulations do little to alleviate the uncertainty and instability that persistently envelopes rural GPs, their practices or patients. The Dispensing Doctors' Association tells MSPs: "Where there is no community pharmacy a health board will require a GP practice to dispense medication but offer no right to the practice to continue dispensing should there be an application to open a pharmacy."

**“Dispensing income has an acknowledged role in cross subsidising the costs of the rural medical service”**

It is the view of the DDA that the GP dispensing service now has to be considered equivalent to pharmaceutical services.

Dispensing service income has an acknowledged role in cross subsidising rural medical services and, in the recent past, loss of dispensing has resulted in loss of the practice and significant additional costs to health boards to maintain patient services. Reductions in dispensing income for Scottish GPs already reveal their impact; recent NHS Scotland official data for 2014-15 shows a 10 per cent increase in the number of 2C (Board controlled) practices and a £1.5m excess expenditure cost to the NHS to retain vital medical services.

MSPs with a responsibility for rural communities are urged to do everything they can to protect rural patients and their rural dispensing GP service, ensuring Scotland's most challenging communities receive the health services that they deserve.

### How you can help...

With your help dispensing practice can be transformed into the 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 under one roof.

This includes the operation of branch surgeries and near-patient tests for patients in rural areas.

### References

1. Scottish Parliament. **Programme for Government 2015-16**
2. Scottish Government consultation. **Provisions for a Future Islands Bill**
3. The National Health Service **(Pharmaceutical Services) (Scotland) (Miscellaneous Amendments) Regulations 2014**
4. Health and Sport Committee report. **June 24, 2014**
5. NHS Scotland **Payments to General Practice Financial Year 2014-15**
6. Scottish Government. **Programme for Government 2015-16**

# Innovative GP services for a traditional Island community



**Writing in the** foreword to the Consultation on Provisions for a Future Islands Bill,<sup>2</sup> Derek Mackay, minister for transport and islands, describes Scotland's islands as "wonderful places to live, work, study and visit [with] proud traditions, rich and vibrant cultures".

Located in Port Ellen, in the south of Islay, the Port Ellen Surgery team are all too aware of the advantages of living and caring for residents and visitors to Scotland's fifth-largest island. Dispensary manager Jacqueline Campbell describes the island as beautiful in the summer, and she considers it a close knit island community and mentality – giving examples of people "mucking in together" when necessity calls: wind speeds on Islay can average 19 to 28 kmh and winter gales can sweep in off the Atlantic, gusting up to 185 kmh (115 mph). This can make travelling and living on the island during the winter difficult, disrupting ferry and air links to the mainland. For the surgery's dispensing team, this can also mean overcoming significant interruptions to the service of supplying vital medicines to island patients.

## Vital medicines supply role

As one of two dispensing practices on the island of Islay, Port Ellen surgery is a key supply point for NHS medicines – and when ferries are cut off in bad weather, it is down to the practice's resourcefulness and planning to ensure that patients get the drugs they need.

The resident Islay population of 3,200 is mainly centred around the villages of Port Ellen, Bowmore and Port Charlotte, although residents can live in the furthest reaches of a territory extending almost 620 sq km (239 sq mi). Over the year, however, the population can swell by 55,000 as people arrive on the island attracted by the scenery, history, bird watching and the world-famous whiskies.



Planning and resourcefulness by the practice dispensary keep Islay's patients supplied with vital medicines

It is due to careful planning and some resourcefulness by the surgery that patients are still able to access medicines during peak times as well as the most difficult winter months; and by overstocking on the practice's most commonly ordered lines the result is that patients usually manage to enjoy an uninterrupted medicine supply, says Mrs Campbell.

## Service design

Since 2013, Islay clinical services have been subject to review; the resulting model of care, which has involved the amalgamation of the island's three practices into one, is now being presented as a prototype solution for other rural areas of Scotland to adopt.<sup>6</sup> The service redesign aims to achieve economies of scale, and an autonomy that delivers sustainable but innovative services in the long term.

The island's GP service is pivotal to Islay's healthcare service redesign, and by demonstrating their capacity for innovation and change, the GPs on the island have overcome some of the most persistent problems facing rural NHS service delivery: GPs have boosted the overall GP workforce

capacity, improved recruitment and retention, and reduced the island's dependence on locum cover and expensive Board control.

As a result of the redesign, the island is now able to offer patients GP services every day and faster access to GP appointments, while still giving each practice half-day closing. And, as a teaching practice, Port Ellen surgery is able to offer medical students (16 during the past year) what Mrs Campbell describes as a "great experience" of delivering rural medicine. Technology has also come to the island, in the shape of I pads that are used on home visits to access patient information from the practice IT system.

Integral to the island's resilient healthcare services is the availability of medicines from the two practice dispensaries, which can be accessed by GPs whenever they are required. "At the end of the day, everything we do we do for our patients and if a drug is on the island and it is needed, patients can be sure they will get it," says Mrs Campbell.

"Patients really do get a fantastic service, and it is our dispensing service that plays a big part in making that happen."

## 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](mailto:office@dispensingdoctor.org) Tel: 0330 333 6323 Web: [www.dispensingdoctor.org](http://www.dispensingdoctor.org)