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# THE CASTLE MEDICAL GROUP

## Newsletter

### Issue 6 - July 2003

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#### The 10-Minute Consultation

At The Castle Medical Group we have a standard appointment time of ten minutes per patient. Ten minutes to take an initial, complete medical history, a complete medical examination and give medical advice. It doesn't seem very much time does it? This is especially so when a study done in this practice a few years ago indicated that the average patient takes approximately 30 seconds to reach the consulting room having been called through to the doctor and that the average time for a patient to undress is 1.5 minutes (Scottish Home and Health Services Department 1979). Thus only 8 minutes left for the rest!

Though 10 minutes does seem a very short time the overall encounter time has been getting better and longer over the years. In 1879, at St Bartholomew's Hospital in London, 120 outpatients were seen by the admitting physician and dismissed in an hour and ten minutes - a rate of 35 seconds per patient (Rivington 1879). Also in the late nineteenth century, three casualty officers dealt with 500 patients in a morning (RCGP 1976) The average consultation time for General Practitioners in Great Britain 30 years ago used to be 6 minutes per patient, with the patient having opportunity to ask about three questions (RCGPs 1973). Some General practitioners still have 6-minute consultations but most now operate on 7.5 minutes or 10 minutes as we do. In the USA the average consultation time is 12 minutes though this varies a lot and in many primary care settings can be as long as 20 minutes (Reynolds & Ohsfelt 1984).

What actually goes on between doctor and patient in the consultation has been studied and analysed intensively over the years. Inevitably as medical science advances the complexity of what the doctor has to consider increases. The development of preventative medicine has also added further burdens to the time pressed general practitioner who is now also expected to monitor blood pressures, enquire about such matters as smoking, drinking, exercise and weight and to give advice where appropriate. We now have National Service Frameworks (NSF's) detailing what the government considers doctors should be doing to monitor the health of patients with chronic diseases and to prevent ill health. These guidelines are very detailed and time consuming. Add to these things the rise in medico-legal claims making it important that doctors keep accurate and detailed records and the computer on the desk that demands our attention and there is plenty to keep the doctor busy.

The Royal College of General Practitioners examination (MRCGP) list twenty-one different skills the doctor must demonstrate to pass the examination (assessed on videotape of the doctor's consultations). These skills include:

"The doctor elicits appropriate details to place the complaint in the a social and psychological context"

"The doctor seeks to confirm the patient's understanding"

Another consultation assessment tool, used to train general practitioners lists seventy-three criteria a doctor should fulfil for an effective consultation (Calgary- Cambridge Observation Guide)

So the 10-minute consultation is not as straightforward as it may at first appear. Patients can help the doctor to help them in a number of ways:

- ❖ Try to be on time.
- ❖ Before going into the doctor try to have a clear idea of what the problem is and how it is affecting you.
- ❖ If you think the doctor is likely to need to examine you wear clothing that is easy to remove.
- ❖ If you want to ask the doctor about more than one problem tell the doctor at the start of the consultation that you have more than one problem to discuss. The doctor may decide to deal with a more serious problem first and ask you to return at a later date with your other problems.

### Do you really need to see a doctor?

It may not always be necessary to see a doctor for everything - for some things, it may be better to see one of the Practice Nurses who are based over at the annexe (next to the chemists down the road from the health centre).

There are three Practice Nurses: Merle Allen, Trudy Howe and Lorraine Martin. They provide a wide variety of services, and appointments can be made by telephoning the main surgery number in the normal way (421850 or 421900).

They provide chronic disease management for asthma and other respiratory diseases, diabetes and coronary heart disease. They also offer advice on smoking, diet and weight management.

The Practice Nurses are able to check blood pressures and cholesterol levels - blood pressures may be checked in the surgery or over a 24-hour period using a special monitor.

The nurses can offer a great deal of advice on women's health, and not forgetting men's health too! Many women come to the Practice Nurses for their cervical smears - doctors are doing fewer of these now. Advice is available on contraception and HRT too!

New patients are encouraged to have an initial health check with the nurses, who also welcome "well people" (young and old) to come along and have a health assessment.

For people travelling abroad on either business or pleasure, the nurses provide travel advice including vaccination.

Practice Nurses provide 20-minute appointments, so will often have more time than the doctors to discuss health matters.

### What to do if.....?

These are just a few notes that may help you deal with some matters without having to see a doctor.

**Your repeat prescription list of medicines has a message on the bottom of it saying: "Review Overdue"**

You don't have to do anything. This message is for the doctor who is signing the prescription not for the patient. It is intended to remind the doctor that it may be some time since the patient's medication requirements have been reviewed. Your doctor will check your records to satisfy themselves that they are happy for you to continue with the medication or if a check-up is needed. If there is a message written to you in person on the form such as - "please make appointment with practice nurse" then you should follow the instructions.

**You need a routine check on something such as blood pressure.**

Most people would not need to see a doctor for such a check. There is usually no urgency for this sort of check up to be done and our practice nurses will do most of them. (NB Not the treatment room nurses) Please ask the receptionist to book you an appointment with the

nurse at the next available slot convenient to you.

### **You need some more contraceptive pills**

The practice nurses monitor patients on the contraceptive pill and will be able to sort you out with a prescription. There is no need to see a doctor. If you are having problems the nurse cannot deal with the nurse will seek advice from a doctor. If you have run out of pills (though you should try not to) and need some more pills before the receptionist can give you an appointment with the nurse, ask the receptionist to arrange for a supply to 'keep you going'.

### **You think you need antibiotics**

Doctors are unlikely to prescribe antibiotics without seeing the patient face-to-face or speaking to them on the telephone. They are also unlikely to give antibiotics for conditions such as sore throats, earache, colds and coughs. These things normally get better on their own. You should use simple remedies such as paracetamol or ibuprofen in sufficient doses to try and ease the symptoms (a dosage guide is available at reception). These viral infections can take up to 7 to 10 days to go away and it is only after this length of time that most people should be thinking about consulting a doctor. This applies to both children and adults. Some patients are making appointments to see the doctor when they have had something such as a sore throat for a few hours. This is a waste of the doctor's time and prevents others with conditions that need to see a doctor from getting appointments.

### **You have backache**

Back pain is one of the most common problems to affect people. Most of the time back pain will improve on its own. The advice is to try and keep active and use pain-killers (an advice leaflet is available at reception). Most patients do not need to see a doctor with back pain. If the pain is

persisting for longer than a few weeks it might be advisable to ask your doctor to check you over.

### **You need a medical certificate for work**

You will normally need to see the doctor for an examination to obtain a medical certificate to be absent from work. However doctors, by law, do not need to provide a medical certificate for a period of incapacity of less than 7 days. You should complete a self-certificate for any periods of up to 7 days that you are off work sick. This practice will not provide certificates for periods of absence of less than 7 days despite some employers requesting them. If you think that your employer will not accept this, the receptionist will provide you with a letter which explains the law and which you can give to your employer. If the employer is still dissatisfied the doctor concerned will be willing to speak to your employer on the telephone and you have our blessing to suggest this to your employer.

### **You have been called in to have a cervical smear**

The practice nurses do the vast majority of the cervical smears. You should make an appointment via reception to see the nurse. Please do not book an appointment to see the doctor for a cervical smear unless the doctor has specifically asked you to.

### **You have Diarrhoea and Vomiting (D&V)**

Most D&V will settle within 4 to 7 days and does not require a doctor to see the patient. The vomiting will normally settle first, usually after a day or two but the diarrhoea may persist for some time, often up to a week or two. Whilst vomiting try to take just sips of water frequently or suck an ice-lolly. Some Imodium capsules will help to slow the diarrhoea and can be purchased from the chemist. Paracetamol will help to control the crampy abdominal pains that

often occur with D&V. Don't try to eat food until there has been no vomiting for at least 12 hours. When food is started try to keep away from dairy foods such as milk, yoghurts etc for several days. This also applies to children. If blood is passed with the diarrhoea this should be reported to the doctor.

More care must be taken with young babies under 1 year old. Vomiting in children of this age group, especially when associated with a fever can indicate more serious problems and a baby such as this who has persistent vomiting over a few hours should be checked by the doctor.

### Meningitis (HiB Vaccination Campaign)

If you have a child who was born between 2 April 1999 and 1 October 2002 you will receive an appointment for an extra dose of the HiB Vaccine.

We will be running a number of clinics at the health centre over the summer months (from the end of July to the end of September) - you have no need to contact the practice. Please wait to receive an appointment.

We strongly recommend that your child receive this booster injection to ensure that they are fully immunised.

### Health Visiting

- ❖ Clitheroe Breast Feeding Group - meets every Thursday between 12.00 and 1.30 in the Health Education Room at the Health Centre. Women who are already breast feeding, or antenatal women who want to talk about breast-feeding are welcome.
- ❖ Positive Parenting Group - a new group is about to start in July. Please contact the Health Visitors for more information.
- ❖ Streetwise Event - Year 6 children from schools across the Ribble Valley are being invited to participate in this annual event. This is a public health initiative and will be

held at Mytton Fold during the week commencing 30 June 2003.

- ❖ We welcome former student Health Visitor Louise Barnes to our team, replacing Liz McGladdery.

### A New GP Contract

You may be aware that GP's across the country have recently voted in favour of a new contract within the NHS. This is part of a host of reforms taking place within the health service, many of which are focussed upon improving primary care services (including GP's, Dentists, Pharmacists and Optometrists).

The new contract for patients will guarantee that they will receive the range of services they currently get, but with more choice of services in some areas, improved quality and speed of access.

The new contract for GP's goes some way to addressing issues of workload, and includes an option for all GP's to opt out of providing out of hours services.

In Clitheroe, GP's are already offering a wider range of services than in other local areas, with the added benefit of an excellent treatment room, highly skilled community nursing staff, and much-loved community hospital.

The new contract will help GP's to focus on providing high quality services for people with chronic disease, and will reward practices that offer a wide range of other services that are easily accessible.