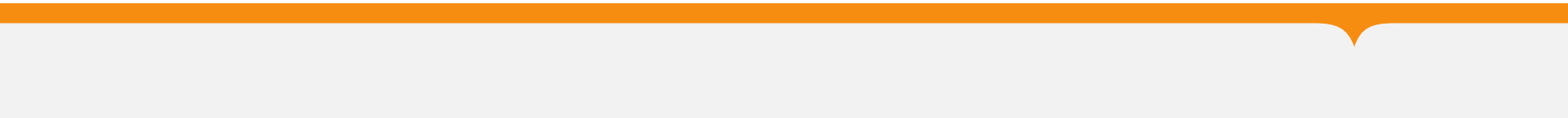


# Welcome to General Practice

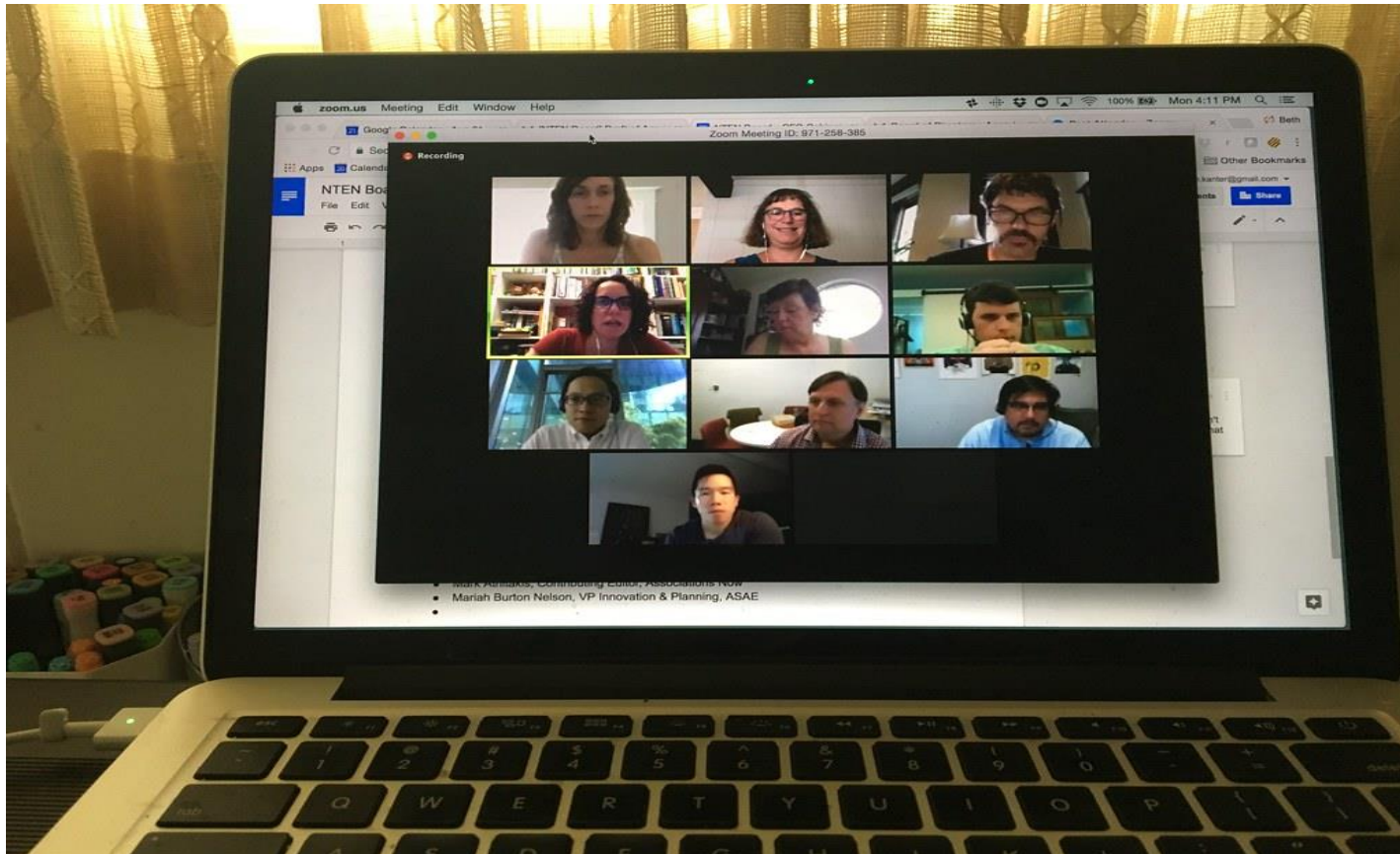


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# Introductions and technology



# Aims

- What does it mean to be a General Practitioner in the UK?
- How does General Practice link to the rest of the NHS?

# Do you know what a GP is?



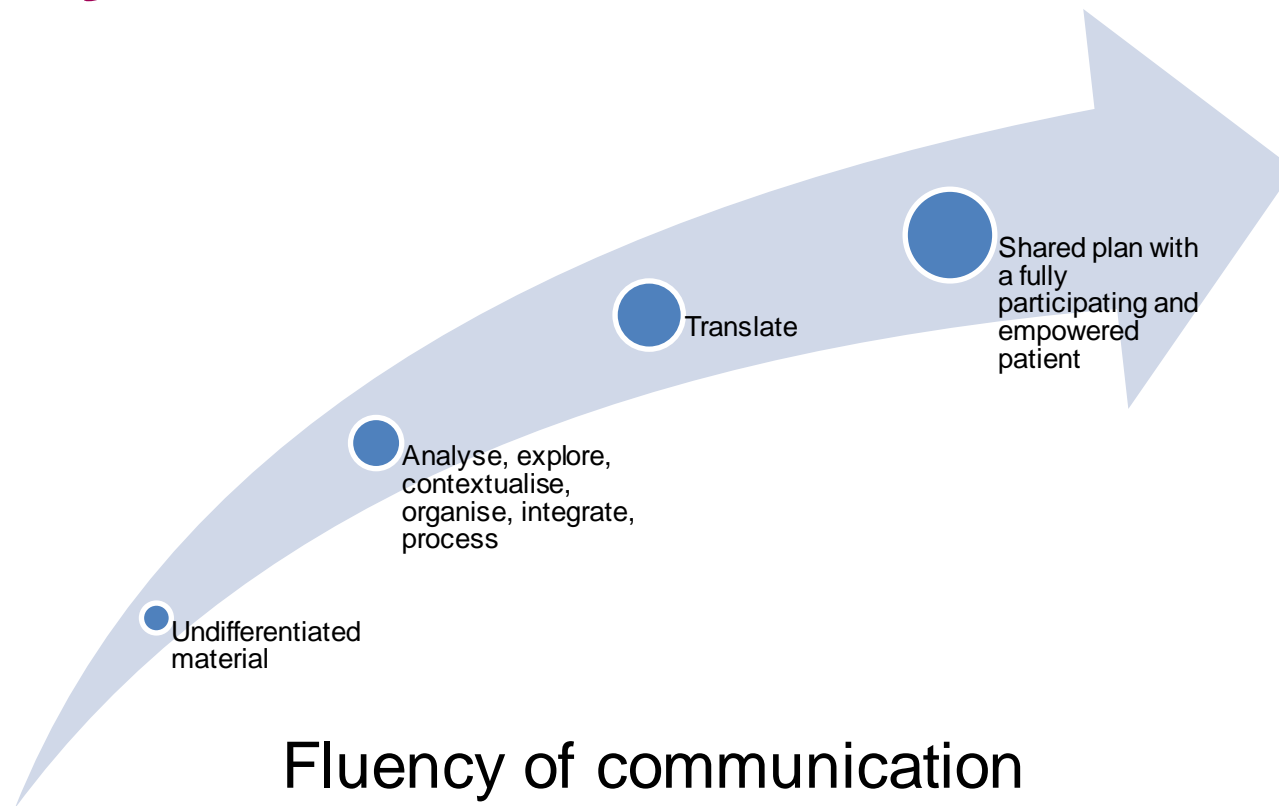
# Who consults with a GP?

## Who is the patient?

People come with stories involving symptoms and experiences, psychology and emotion, social context and relationships, their hopes and fears



# What does the GP do with the story?



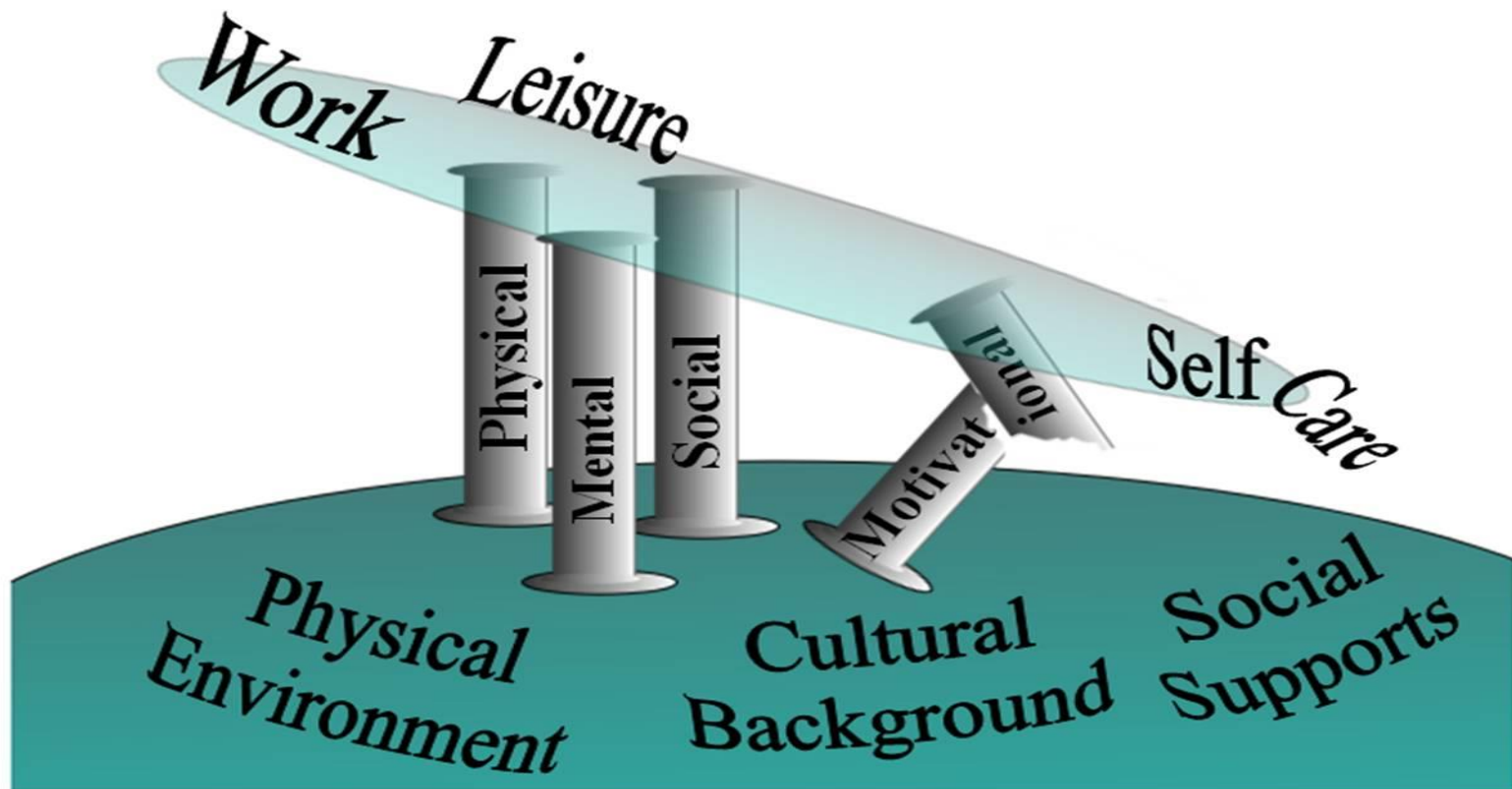
# How does the patient consult with the GP?



# VISIT



# Masters of Holistic Care

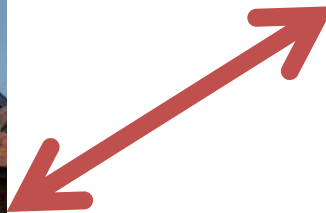




# The GP and Patient Partnership



# Primary/Secondary Care Interaction



# How does the GP interact with secondary care?

- GPs are medical generalists, managing huge and limitless types of illness cost effectively
- Patients are highly selected to be referred - those very likely to benefit from specialist input
- This avoids secondary care being swamped and less efficient
- GPs protect against overdiagnosis and overtreatment

# GP referrals

- 1 in 20 GP consultations results in a referral being made to another service.
- The referral process often involves a transfer of clinical responsibility from the GP to another professional.

# Why GPs refer a patient to Secondary Care

- establish the diagnosis
- for treatment or an operation
- for a specified test/investigation which the GP cannot order
- for advice on management
- for reassurance for the GP/second opinion
- for reassurance for the patient and/or their family

# Referrals

- **Necessity** Are patients referred as and when necessary?
- **Timeliness** Is this done without avoidable delay?
- **Destination** Are patients referred to the most appropriate destination first time?
- **Process** Is the process of referral a high-quality one

# GPs manage risk and uncertainty

- Unnecessary investigations and interventions
- Avoiding iatrogenic harm
- Patient experience



# Birthplace of the NHS – the North West

- The NHS was officially opened on 5 July 1948 at Trafford General Hospital in Manchester.
- This unveiling marked the day that by law all UK residents were given the right to access health services offered by doctors, nurses, midwives, and dentists without having to pay directly



*‘Everyone - rich or poor, man, woman or child - can use it or any part of it. There are no charges, except for a few items. There are no insurance qualifications. But it is not a “charity”. You are all paying for it, mainly as taxpayers, and it will relieve your money worries in time of illness’*

# Prescription charges

- £9.35 per item
- Some exemptions/reductions with prepayments

# Private healthcare vs NHS

- Local variations in services available
- Patient choice

# The Primary Healthcare Team



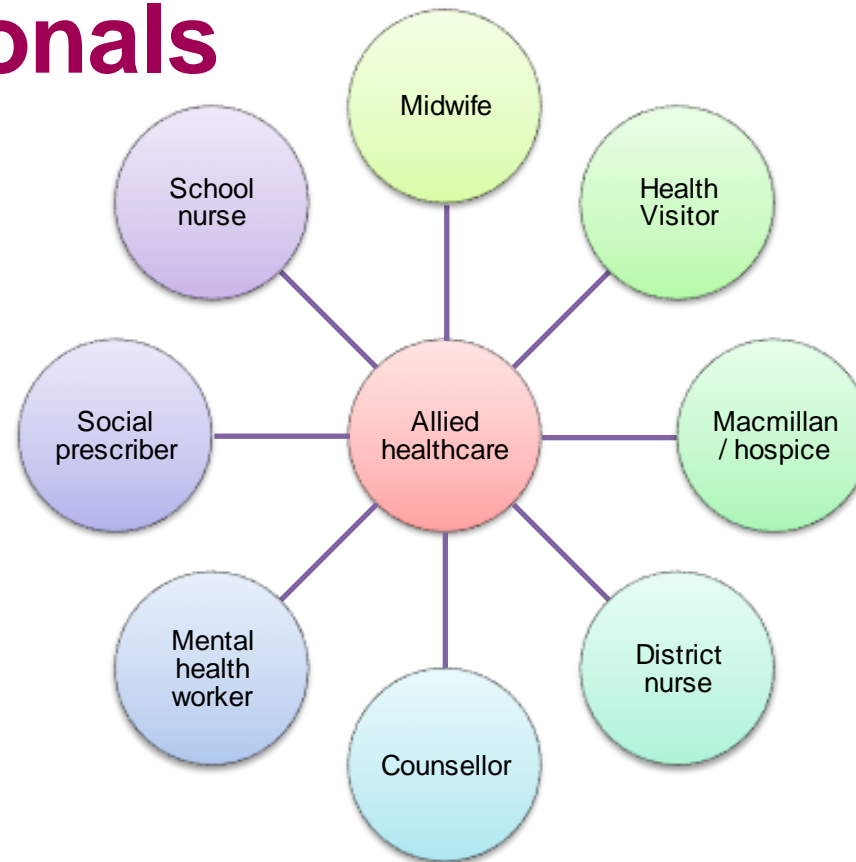
# The primary healthcare team

- Not all aspects of primary care need a GP's direct input, and some require very different professionals.
- We work with a variety of professionals, all with distinct roles.

# Primary healthcare team



# Community allied health professionals



# Community clinics





GP and nurse appointments are now available in your area during the evenings and at the weekend. To book an appointment, contact your practice.

**Your NHS, here for you.**



# Orchestral conductor of a concerto



# Longstanding trust-based relationship



# Knowledgable guide and support





# Making the most of the opportunities as a GPST....



# Don't underestimate the challenge



# Congratulations

**you have just embarked on an amazing journey....**

# Welcome to General Practice