

What could be done to help the public consider other professionals or services as an alternative to going to the GP?

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| Ccg hub services, advertising in local papers, radio, flyers |
| I think practices could consider triage as to whether an appointment is needed. NOT done by the untrained receptionist when appointments run out...! Nurse Practitioners excellent for minor illness/ minor injury. They should NEVER have removed the Walk In Centre which provided excellent nurse- led services. Advice given by nurses was often far better than GPs who give antibiotics for simple viruses because they do not have long enough in their appointments to actually give the correct reassurance and advice. |
| Media Education about self limiting conditions and on line resources such as patient.co.uk Better education for migrants arriving in UK Better education at school and universities/colleges. A proper dental service that sees patients Other parts of the NHS signposting to correct services ...often incorrect advice from hospitals , social workers, district nurses etc |
| Needs to come from lots of angles; advertising, word of mouth (ie. schools/ gyms/ etc not always defaulting to "ask your doctor"). Also GPs to be able to clearly direct people to alternatives. |
| the public needs more information on what other professionals or services ARE AVAILABLE |
| Signposting within the GP surgery itself when people call or walk in (e.g. "Do you know that the walk-in clinic also offers... Do you know your pharmacy can also...") |
| 1. List the professionals or services that are an alternative to a GP consultation. Display this. 2. A large poster /advert in waiting area saying what a nurse/other healthcare person could do for you. Ditto this advert to appear at chemist and on notice boards of supermarkets. |
| To see a nurse practionor for non urgent gp appointment Blood pressure etc carried out by nurse |
| A publicity campaign and better training for other health professionals. Also recruiting higer calibre support staff with a good level of qualifications. |
| Not all patients are equipped to deal with their issues. The more people know, the less they'll go to their GP - it's all about education. |

Should reception staff have a role in signposting patients to other options for managing their health issue? Please also say why.

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| No way |
| No, In my opinion as a clinician it should be a trained clinician doing this. |
| Yes |
| Yes. This is an underused workforce- often receptionists have lots of experience in helping patients to access the correct care for them. The public sometimes has an impression of them as "just receptionists" but they need to be viewed as a form of triage (whilst recognising their limits). |
| yes, I would be happy for their input |
| No. If they are, their title should be changed. People would not feel comfortable disclosing personal details to someone they thought was a receptionist. Title like "Community Navigator..."? |
| No -because info given to receptionist will be limited and they could delay attention to a serious condition. Although if problem appeared to be -say minor injury -NO, this still could result in a problem # They are not medically qualified and should not take this responsibility however minor the ailment appears to be. More advertising about- that a simple cold can not be cured by antibiotics and suggesting a visit to Chemist for symptoms relief |
| Yes they should because a nurse can refer you To many other issues reception staff shod have some training on other areas to refer patients to |
| Yes provided that confidentiality iis maintained. |
| I don't think this would be a good idea because of confidentiality. I think receptionists should be educated in how to deal professionally with patients. Sensitive issues should not be addressed at reception. |

What are some of the concerns that you may have about reception staff signposting patients to other options?

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| They don't have indemnity should something go wrong, very risky, they are already busy doing their duties |
| They have not been trained - they are not clinicians. |
| They need to be trained Communication may result in inappropriate services being suggested ...each GP practice would have to assess the competency of its staff. |
| Patients unhappy. Staff anxious. Potential risk to patients of staff overstepping role |
| 1. they may not understand the issue or the urgency of the issue 2. the discussion itself should be confidential (i.e. with a Dr) |
| People's confidence in and awareness of alternative services needs work. E.g. 111 - people not sure what it offers. Same with pharmacies - people still think their GP is the only one with all the answers; and they may have lots of answers, but limited capacity! |
| see above |
| They could sign post them wrongly but if proper training given this should not happen |
| Gossip and lack of confidentiality. Also lack of relevant training about other options available. |
| Confidentiality. |

How could GP practices make the public more aware of the alternative options available?

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| They can't, too much to do already, ccg investment and approach is the answer |
| Matrix signs, telephone messages, repeat prescription messages. |
| Posters and website information |
| Advertising in waiting room. GPs advising patients when they see/speak to them GP text messages Practice websites Write it on the other side of prescription slips |
| more actual SIGNS on noticeboards in GP surgeries, more written material to hand out to patients, more discussion with patients when seen by a GP about a service which could be provided by another professional, more info on GP website |
| Going out there to where those that use health services most are, and communicating with them directly. Posters/newsletters get old, covered, or people don't look! |
| see above -with large colourful posters in three or four most commonly used languages to list other services available. Big bold TV advert -something on FaceBook? |
| Having a regular news letter letting people know about nurse practitioner and services offered |
| leafleting and e-mailing patients |
| Run seminars - like what Healthwatch Wandsworth did at their recent assembly (September 2017), by having a GP do a presentation. Healthwatch Wandsworth could run the seminars. Bring people together because people will talk. |

Who else should be involved in this work? (e.g. pharmacists, community leaders etc.)

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| All players should contribute |
| pharmacists, although sometimes I worry about this- I have seen dressings advised by pharmacists that are VERY worrying. |
| Schools Pharmacists Government Councils Media esp the BBC |
| Pharmacists Schools Nurseries Health visitors Midwives Community Leaders Something in a story line on Eastenders?! |
| Yes, pharmacists, district nurses, |
| All of the above - but especially community groups and leaders. |
| Anywhere that has gathering of individuals for health or fitness should display the listing of alternative health services available. Chemist /Fitness centres / community exercise groups and churches that |

have meetings to assist their parishioners.

Community team

pharmacists, anywhere where people meet - libraries, age uk, churches etc

I don't see why there shouldn't be a triage nurse at the GP. Some people go to the GP for something that is not urgent, so a triage nurse could help.

Do you have any other suggestions or comments?

Ask relevant stakeholders before deciding and wasting money

Education in schools about how to manage minor illness. People seem to think they need to rush to the GP for every little snuffle/ vomit. And unfortunately staff at nurseries etc. encourage this by making parents take their child to the GP/ A&E "just to get checked out". We have turned into a pathetic society unable to deal with basic things- everyone is scared of litigation.

This is a much needed piece of work.

I think it is a good idea to be thinking about this - just make sure the the 'other professionals' are allowed the time to do the work previously done by the GP

when a GP clinic/surgery introduces a new service at that site -eg blood testing -it should be advertised on every floor of the building but mainly near reception or in waiting area. this notice should be in languages other than English.

That everyone who is able pays a small fee when making an appointment to see a GP ie. £5.00 this would cut out unnecessary consultations and make people more willing to rely on pharmacists and other health professionals.