

PE1845/D

Dr Hal Maxwell submission of 12 January 2021

I read this petition with interest.

I have been a rural GP in Ayrshire until retirement & was always aware of a bias towards urban centric decisions and thinking. Solutions were developed that met the needs of the urban centres but often failed to provide an equity of service to the smaller rural practices.

This happened both on a local & national scale.

A good example of local issues was centralisation of community nursing services with the staff no longer having a local base & thus diminishing the contact between GP & community nurse, to the detriment of patient care.

One example of national change was the move to central procurement of influenza vaccine. This adversely impacted on the income of rural dispensing practices that previously may have been able to negotiate a price that allowed a small profit. As rural dispensing practices were no longer prescribing these items, the consequent loss of dispensing fees added further to the financial loss. Although small sums involved, many dispensing rural practices depend upon dispensing income to cross subsidise general running costs.

A rural advocacy service would be able to look at decisions of this nature and seek amendment to ensure equity.

As such I would fully support this petition.