HEALTH AND SPORT COMMITTEE

WHAT SHOULD PRIMARY CARE LOOK LIKE FOR THE NEXT GENERATION?

SUBMISSION FROM Dr Richard Weekes, Ullapool Medical Practice

My view is that most medical care should be provided in a community setting, close to the patient’s home unless the patient has a clearly defined need to be in hospital for investigation or treatment.

The artificial divide between primary and secondary care should be removed and replaced with a seamless service with generalists and specialists working collaboratively. Specialists should work in primary care as well as hospitals and outpatient clinics should be held in health centres as well as in hospital.

Care should be provided by the right person, in the right place at the right time and this will require small closely knit and well-led teams serving a defined patient population within a defined geographical area.

The teams should be clinically led and professionally managed and include a range of health professionals each working to the top of their training and mutually supportive of each other. Training and facilitation should be offered to allow development of good communication and respectful working relationships.

NHS staff will feel valued and supported and have a clear understanding of their role and the aims of the organisation they work with. This aim will be to work with patients to promote mental and physical well-being, and to ensure realistic investigation and treatments to maximise quality of life.

Primary care should be delivered from fit-for-purpose premises.

It is important that the public work in partnership with the professionals and take responsibility for aspects of their care and treatment. This means a shift from treatment being done to patients by medical professionals to treatment being shared between the expert patient and the expert professional.