

# Information for Carers

## Getting help from your GP

### The general practitioner is the first port of call

Everyone in the UK has the right to be registered with a general practitioner (GP), except people who have been in hospital for more than a year. People who move around from place to place may register with an NHS GP wherever they are at any particular time, for three months at a time as a 'temporary resident'.

It is best to take mental health problems to your GP rather than going straight to a hospital casualty department or psychiatric ward.

Your GP will usually provide some treatment straight away, or refer the patient on to a specialist, or both. He or she will know the right person to refer the patient on to. In contrast, if the mental health problem is not thought to be immediately urgent, a casualty doctor may simply send the patient away.

### Getting the best out of your GP - summary of key points

- Ask for a practice leaflet or booklet
- Cooperate with the arrangements for requesting appointments and visits as much as possible
- If you can, stick to one or two problems only at each consultation
- Make a list of your problems or questions to help you remember them
- Take along a friend or relative if you are nervous
- Ask for an interpreter if you need one
- Have a word with the doctor or practice manager if you have any problems, before making an official complaint.

### Home visits

The GP will visit the patient at home if necessary, if, for example, they won't come to the surgery because they don't agree that they need help. It is more time-consuming for the GP to make a home visit (four people can be seen in the surgery in the same time it takes to visit one patient), however, and the equipment and facilities are not available in the patient's home.

For these reasons it is better, if possible, that the patient makes a surgery appointment to see the doctor. However, the doctor can be asked to make a home visit and cannot refuse to visit a registered patient in need of such help as long as the patient is staying at an address within the doctor's practice area (usually the same town as the doctor's surgery).

## The importance of registering with a GP

If a person who is not already registered with a local doctor needs treatment in an emergency, then any GP must see that person as soon as possible, as long as the person is staying at an address within the GP's practice area. However, this only applies to real emergencies, in which someone is seriously ill or at immediate risk of harming themselves or others.

The carer may have to insist that the GP sees the person, and state that the situation is a true emergency. This is even more important for those about to leave hospital, who should see a GP within a few days of their discharge. At this stage, the GP will usually provide repeat prescriptions of the medication recommended by the specialist, and sickness certificates (sick notes) if necessary, as well as dealing with the patient's physical health problems.

## What if an ill relative won't see the GP?

As already mentioned, some people suffering from schizophrenia may not want to help. This might be because bizarre beliefs (delusions) associated with their illness convince them, for example, that their problems are due to aliens from space, or admit that they are ill but say that previous experience of medical treatment (e.g. the side effects of some of the older drugs) has put them off. Whichever, the resulting lack of treatment may lead to their condition deteriorating to the point where carers and relatives become very concerned, and where their thoughts and behaviour may put them and/or others at risk.

This is precisely the sort of situation in which a GP home visit should be requested. If the patient still refuses to see the GP, in their own home, and the GP forms the impression that this is because the patient is mentally ill, the GP may ask for a psychiatrist and social worker to try to see the patient, with a view to bringing them into hospital for a period of assessment. If the patient is still resistant at this stage, but is considered to be suffering from mental disorder, they may be brought into hospital against their wishes under the Mental Health Act (1983).

## Getting the best out of your GP

These days, all GPs should provide written details for patients of surgery times, how to go about making an appointment, how to ask for a repeat prescription, when the GP is and is not available to speak on the telephone, and how to request a home visit both during the day and 'out-of-hours' (in the evenings and weekends).

The GP practice is also obliged to give details of how they should handle complaints and suggestions. You should ask your GPs receptionist for the relevant practice leaflet or booklet and you will get the best out of your doctor by cooperating as much as possible with the information in it - i.e., the surgery's arrangements for appointments, telephone calls and visits.

It will be appreciated if you arrive on time for your appointment. Also, if possible, try to make any requests for a home visit before 10 o'clock in the morning, which will enable the GP to plan his or her day around it more easily. Remember that you are only one of about 400 patients the GP has to see every day, and that sometimes there is quite a lot of pressure to fit everybody in. The GP may be even more helpful if he or she feels that you have been helpful too.

It is also best, if you can, to keep the number of problems you want to talk about down to two or three at most for each appointment, since appointments are generally only allocated about 10 minutes each. The GP will, of course, see you for longer if you have a particularly difficult problem that needs more time, but each appointment that lasts for more than 10 minutes will make them later for all other patients who are waiting to be seen. You can always make another appointment to deal with any problems not covered in the first consultation, but if you feel that these problems cannot wait, you might want to request a 'double appointment' in one sitting, giving you enough time to discuss your current problems, worries, or complaints more fully.

Don't be afraid to write down a list of things you want to ask, when you go for your appointment. Although some doctors don't seem to like lists, they will usually go through each point and answer each question carefully, if asked. Nor should you be afraid to take along a friend, if you think that will make you feel less nervous or if you are worried that you won't be able to remember everything you need to say. People whose first language is not English may also like or need to take an interpreter along with them. However, practices in areas where there are many such non-English speakers often provide interpreters on request. Any such service, along with other services for ethnic minorities should, again, be written in the practice's patient information.

If you are unhappy with something the GP does or does not do for you, or your relative or friend with schizophrenia, it is best if you try to have a quiet word with the doctor in question first. Many disagreements can be sorted out quickly by speaking either to the doctor or to the practice manager. Only if you feel that this has not worked, should you resort to an official complaint.

## Changing your GP

If you and your doctor simply cannot agree, or you cannot get on with your doctor, then you can change GPs by taking your NHS medical card along to another doctor's practice and asking to sign on there. If all other local practices are full and say that they can't add you to their patient list, you must telephone the Primary Care Authority (formerly the Family Health Service Authority, or FHSA), the number of which is on your NHS medical card (and in the telephone book). The Primary Care Authority will find you a new GP within a few days at most.

Similarly, GPs have a right to refuse to treat someone whom they feel they cannot get on with. If a patient is abusive, aggressive or violent with the doctor or with the doctor's staff, then the patient can be removed from the doctor's list straight away. However, if that patient is suffering from mental health problems then the GP must address those mental health problems before the patient can be removed from the list. Effectively this either means giving treatment or referring the patient to the mental health services for help.

With thanks to Rethink