

Letters to the Editor

Seven-day opening no remedy

SURGERIES opening seven days a week will not ensure more access to GPs, nor will it increase the number of weekday appointments available (“Don’t tell GPs how to treat patients”, Letters, last week). I am a recently retired GP and I cannot get seen for a potentially malignant skin lesion for five weeks.

The doctors at my local practice work very hard; I know, I have appraised them in the past. So much for a two-week wait for cancer. We need more GPs, not open-all-hours surgeries.
Dr Steve Norman, by email

OUT OF CONTRACT

I do not have any time for the threats of Theresa May and the health secretary, Jeremy Hunt, directed at GPs over practice hours, but I have no doubt that the unsustainable pressures on A&Es are in large part a consequence of the last, misguided GP contract, which enabled doctors to opt out of out-of-hours care for a minimal loss of earnings.

I qualified in 1973, and, having spent many years on call every third night and weekend, in addition to day work, my colleagues and I were very skilled in acute medicine in patients’ homes. Complex needs and care — usually blamed on the elderly such as me — did not begin with today’s cohort of doctors.

*Derek R Pettit (retired GP),
Henstridge, Somerset*

DOUBLE BOOKED

At our GP surgery we book a double (20-minute) appointment if we need to discuss two medical issues. Problem solved.

Vic Brown, Morpeth, Northumberland

LOSING PATIENTS

I’m a doctor in my forties and work a minimum of 50 hours a week over four

days. What keeps me going is providing for my family and helping my patients and the incalculable satisfaction this can give. GPs currently run their own businesses within the NHS, which means a degree of autonomy. Make us employees and we will be contractually gagged, as are hospital consultants.

We all need to take responsibility for saving the NHS, which provides the best healthcare in the world despite

continuing cuts. The need for a genuine increase in funding is universally accepted outside Downing Street. If you cut the finances and increase the work, the warhorses will go. Up to a third of general practitioners are likely to retire within the next five years.

I’ve never considered striking or emigrating before, but if I lose my ability to manage and care for my personal list of patients, I’m off.

Ian Cockburn, Seaford, East Sussex

STUDENTS MUST DARE TO DREAM

“Aspiration is the educational fashion,” according to Lindsay Patterson (“No helping your child’s ability, so focus on attitude,” News Review, last week). However, it might be used to effectively reconceptualise education at this time of turmoil, bad news and ongoing reform.

Ministers and civil servants, as well as education leaders, are scrambling about as international league tables show sinking standards in Scotland. Pressure is mounting to act, not least around closing the attainment-related poverty gap.

An #aspirationaladvice campaign in Scotland gathered

views as to what it was good for, from creativity to motivation to being true to oneself. Moreover, it showed that having a dream, goals, role models and purpose meant something.

A campaign run by the Royal Society of Edinburgh Young Academy of Scotland over the past two years revealed that a range of aspirational advice is being shared with young people.

Education is for many more things than government hard statistics. Not everyone is going to become a rocket scientist, but even so we should not just write off the concept of aspiration as merely trendy.

Neil McLennan, Edinburgh

TIME TO HONOUR REFUGEE PLEDGE

David Cameron committed the UK to receiving 20,000 Syrian refugees. By September 2016, 4,400 had been resettled, just 0.1% of the total number of refugees from the region. Almost 12m people have fled the conflict, 4.7m of whom are now refugees. Lebanon has welcomed 1.5m, about 25% of its population. I visited Lebanon just before Christmas and saw the appalling conditions refugees are living in. Working as part of the global Caritas family of Catholic international aid agencies, the Scottish Catholic International Aid Fund (Sciaf) is helping to provide material care to people who need it most. We're also helping traumatised refugee children get the specialist therapy they need, and an education. The UK must do more.
Alistair Dutton, Director, Sciaf, Glasgow



Distressing images of patients being held in hospital corridors are not exclusive to Britain's

health service