

SPINNEY SURGERY NEWSLETTER

Spring 2019

Volume 1!

For patients registered with the Spinney

Newsletter News...

Welcome to our 2019 newsletter! We hope to re-start production of a quarterly newsletter to keep patients up to date with the latest news at the Surgery as well as running health campaigns and delivering educational information regarding local services and initiatives. We have so much to tell you, it's going to be two volumes. Here's the first one in the series

Team Information

It is true to say that the last few years have been difficult for patients in terms of GP staff sickness and changes. We are aware of the knock on effect this has had on continuity of care and appointment availability. It has also been a challenging year for our loyal staff as they try to meet patient requests and needs.

We thought it would be useful to give you a staff update on how we are working hard to ensure we continue to provide the right care by the right person at the right time:

Dr. Trewavas unfortunately had to leave the practice due to ill health, after a year of being unwell and trying to return to work. We hope that Dr. Trewavas will be able to return to the Surgery again in the future. Dr. Hodges, who was employed as a temporary replacement while we awaited the return of Dr. Trewavas, is emigrating to Canada in May and will be leaving us then.

Dr Nalisha Ramroop, who joined us last October for a year fixed term contract, is expecting a baby in May and will leave near her due date.

The ongoing curse of the A14 road and traffic jams has hit the Spinney, and Dr.Meena and Dr. Harrison have both decided that they wish to work nearer to home in Cambridge and sadly will be leaving us at the end of April.

We appreciate the concern this will cause patients and staff and would like to reassure you that we are advertising to recruit and reviewing the possibilities of attracting other types of health care professionals to help us provide the care our patients need.

We are advertising in a variety of forums and whilst we appreciate there is a national shortage of GPs, we are hopeful that our efforts, and the great practice that is the Spinney, will attract some good candidates. We do have some regular GP Locums who will be helping us out while we recruit. The locums are Dr. Richard Lee, Dr. Panagiotis Mountis, Dr. Manch Patel, Dr. Mark Fernando and Dr. Michel Raggoo.

We appreciate that this is a lot of information to take in, but we thought it would be helpful to explain a little bit about how the surgery is set up and runs so that you can be aware when you contact us.

Here is some information about our team and the important roles they play at the Spinney Surgery. For the patient list of 10,400 patients at the Surgery we have a team consisting of :

GP Team

Dr Sean Culloty, Dr. Janie Anderson, Dr Abu Belal, Dr. Mark Amphlett, Dr. Jenny Claydon. GP Registrar until August 2019 Dr. Rebecca Chapman. Dr. Michel Raggoo works with us supervising and

leading the Student GP teaching programme.

We thought it might be helpful to explain what an average day for a GP looks like:

The first patient is usually booked for 8.30 am. However before this time a GP will be reviewing pathology test results, reviewing letters sent from hospitals, undertaking tasks requiring action, and out of hours reports. During a standard morning 15 patients are seen by the GP with visit requests being made in addition to these. There are telephone calls to patients, hospitals and others at the end of the surgery and more documents to review. There will also be electronic prescriptions to check and sign as well as paper prescriptions to sign and medication reviews to arrange.

Sometimes there are meetings at lunchtime – for education, discussion or review of recent guidelines, safeguarding and policies. Sometimes morning surgery won't finish till 2pm which makes it difficult to get visits done before afternoon surgery.

In the afternoon a standard surgery will be 10 patients with phone calls and more administration, urgent visits and queries.

Referral letters will be dictated or prepared usually at the end of surgery which can sometimes run on till well after 6pm. This means that by the time the day is done it can be 8pm before a doctor leaves the practice. Every day there is a session for the Duty Doctor - this is for patients who have a clinical need to be seen on the same day. Usually these patients are booked by the Triage nurses, but in the afternoons, at present, they are booked by reception staff - hence the need to ask you a little more about the reason for your call.

Making the most of your GP

If you get a message, text, letter or call asking you to book a routine

appointment with one of our team following a result, please do not worry. A doctor will have looked at the result and deemed that your condition can be reviewed at the next available appointment which may entail a wait to be seen. Please be assured that we will always contact you urgently should you need to be aware of any results, which could be caused by a serious health problem.

Practice Nursing Team

Jackie Fryer carries out Nurse Triage and is our diabetic specialist lead nurse. Gill Avery also undertakes Nurse Triage and is our Respiratory Lead nurse for asthma and chronic obstructive airways disease. Ann Hannan is our cardiac specialist lead nurse and also works with our diabetic and hypertensive patients. Deborah Stephenson is our women's health lead nurse - she undertakes the majority of smear tests, contraceptive checks and counselling for coils and implants. Sue Carrington is our Treatment Room nurse lead seeing patients with minor injury, dressings, leg ulcer management and children's immunisations. The nurses all work closely as a team and provide a wide range of services in addition to those listed here.

We have recruited a new nurse to join our team. Sharon is an Advanced Nurse Practitioner and will join the team to work alongside the GPs and Nurses assessing and seeing patients with urgent medical needs. More information about this service later.

Nurse Triage

We have operated our very successful nurse triage system over the years with our patients benefiting from having highly trained nurses dealing with on the day requests for appointments.

If you need to be seen the same day by a clinician, it may not be your usual doctor – it may be allocated to the Duty Doctor

who will deal with the issue that needs attending to on the same day. As this doctor will be dealing with all urgent requests, it is possible that he or she may have more urgent cases to be seen and there may be a delay in your appointment. We would ask patients to bear with us in these circumstances as sometimes the patient needing urgent help cannot be left alone while waiting for an ambulance etc, or the GP may be required to undertake urgent tests or investigations.

Health Care Assistants support the clinicians with technical skills such as taking blood, performing ECGs, flu, pneumonia and B12 injections where appropriate. They undertake routine blood pressure monitoring, carry out the anticoagulant clinic, NHS checks, smoking cessation advice and counselling. The individual team members have a wide range of skills and we will make sure you see the right one for the right procedure. The team members are Halyna Papworth, Grainne Skinner, Lada Hale and Sam Lederman.

We would like to remind patients to follow NHS guidance, which is to seek the right help from the right professional in the first instance. Please pause a moment before picking up the phone and think about whether you can consult with a Pharmacist, self-care or utilise other services available.

As I am sure you are aware, the NHS is struggling to cope with an ever increasing demand these days and we are not immune from these effects, so there will often be times when we cannot provide the service you want exactly when it's convenient to you. We do try our best, but with limited resources and growing demand, we do sometimes struggle and patients have to be flexible.

Reception team members have an important role at the practice in supporting patients to have the most appropriate access to the most appropriate team member. Sometimes this requires them to ask you about the reason for your call or request – this is not because they are being nosy or being a jobsworth – it's because they are given guidelines to follow to make the best use of the resources we have. These team members also carry out other tasks supporting this role. For example here is a brief summary of some of the team member roles. Mandy Clarke administers the cervical smear recall system and staff rotas. Jane Workman makes sure that patients on some of the long term medications are up to date with their monitoring blood tests. Deborah Jakes ensures that the appointments rota is all up to date and published on our computer system. Other team members include Katy Canham, Linda Macrae, Laura Webb, Su Lamb.

The Managing Partner. My role is to oversee and develop the work and services of the surgery. It is a varied and interesting role and includes running the surgery within a budget, ensuring quality of services, recruiting, training and all staff matters, information and clinical governance, building management, patient satisfaction and complaints, ensuring statutory regulations are met, managing all the teams, computer systems and data management. As a partner I also take responsibility for the business.

We will introduce our Administration team in the next volume of newsletter – coming soon.

Extended Access – i.e. Appointments in the evenings and weekends.

All surgeries in the area have access to some evening and weekend appointments with GPs, nurses and

health care assistants. There are four centres where this service is offered - The Acorn Surgery in Huntingdon, Cromwell Place Surgery, Buckden Surgery and in March. These appointments are for non urgent health problems. GPs who work in the service can be from any practice and a report is sent to the surgery the next day. The nurses and healthcare assistants again see routine issues and carry out procedures such as dressing changes, blood tests, smear tests, blood pressure checks. It is hoped that the skills will be extended over time. The appointments run from 6.30pm to 8.00 pm, in the evening, and 8.30am to 12.30pm on Saturdays and Sundays. If you would like to try one of these appointments, please ask the receptionist when you are calling to make your appointment.

Self care is now widely acknowledged as an important solution to managing demand, keeping the NHS sustainable and promoting self-care is officially part of the NHS plan. Supporting people to self-manage common conditions, such as coughs and colds, could bring down the 57 million GP consultations each year for minor ailments - a situation which costs the NHS approximately £2 billion and takes up to an hour a day on average for every GP, if not significantly more.

Hayfever medication is an area of medication that we have been specifically asked to ask patients to buy themselves over the counter. Over coming months, we will be reviewing the records of those patients on this medication and asking these patients to buy this over the counter at a Pharmacy.

Promoting the concept of self-care and increasing awareness that there are alternatives to making GP appointments, or attendance at Out of Hours or A&E Departments with minor conditions, will

encourage patients to explore self-care in the future, so changing the culture of dependency on the NHS.

Medication Reviews

Please do make sure that if you are asked to make an appointment for a blood test, blood pressure or medication review that you do this in a timely way. It is important that you make a note of when your repeat medication authorisation expires and book your appointment in good time to ensure continuity of supply of your medication.

When ordering your repeat prescription please do make sure you allow sufficient time for us to process this. Whilst many of the prescriptions are electronic these days (EPS), not all can be sent this way. For those of you who aren't aware, we receive at least 300 requests per day which need to be checked, issued, digitally or manually signed, transmitted, collected and/or dispensed from our dispensary. For those of you who are non-dispensing, your prescription can go electronically to a pharmacy of your choice, but generally speaking it should go to the same one each time - controlled drugs (CDs) will be able to be sent electronically from mid March 2019.

Test Results.

We are often asked about results or actions on results of tests that have been arranged by the hospital. Patients should be aware that we do not automatically receive copies of results from the hospital and that such results will always go to the doctor who arranged the test in the first place. This is in line with current guidance, which states the doctor requesting the test has the responsibility of ensuring that the result of such a test is acted upon. Therefore, should you need hospital test results or have a query on what action is required, then please contact the hospital directly. They are obliged to answer your queries.

Doctorlink

In May we will start to trial a new product called DoctorLink that enables patients to manage their care needs remotely where appropriate.

What is DoctorLink?

*DoctorLink provides the ability to seek clinically approved medical advice around the clock. This helps to reduce unnecessary surgery appointments, getting patients to the right place for their clinical need. DoctorLink will provide advice on how to best manage your symptoms

*DoctorLink facilitates booking an appointment with the surgery should a clinical consultation be recommended

*DoctorLink can be accessed from any laptop, mobile phone or tablet device, 7 days a week from any location

How does it work?

*DoctorLink uses a Symptom Assessment tool to complete triage on patients who access the practice online looking for an urgent/same day appointment. Patients are asked a series of clinical questions based on their concern/illness.

*The outcomes of the symptom assessment are processed according to the clinical need. If a clinical consultation is recommended the patient can request an appointment slot appropriate to the symptom assessment outcome (e.g. consultation with a nurse within next 48 hours, same day consultation with a GP).

*The practice will receive a copy of the symptom assessment highlighting the required action needed (e.g. day consultation with a GP).

*As DoctorLink is accessible 24/7 it is able to cater for both in and out of hours scenarios directing patients to the most

appropriate place (pharmacy/dental/GP Service/A&E)

We will be working closely with the providers to manage DoctorLink's integration into the practice and help patients get signed up. All feedback from the trial will help shape and develop the product ensuring that it is of use for clinicians, practice reception staff and patients.

Please watch out for information on our website in early May to start the process of implementation. You will then be able to follow the link below to register and start using:

<https://app.doctorlink.com/register>

The application is easy to use and once you have signed up you will be able to check your symptoms and request appointments at your GP Service with ease.

Please rest assured that:

*DoctorLink is not connected to your patient record so information about you is not being shared with DoctorLink

*You can continue to ring the surgery for same-day urgent care and speak to or see a GP or another member of the clinical team as you always been able to.

Save the date SPINNEY SURGERY ANNUAL CARERS TEA

The Annual Carers Tea will be held on Friday 14th June in the afternoon at Needingworth Village Hall. Invitations will be sent to Carers nearer the time, but for now put this date in your diary for our lovely afternoon get together for Carers.