



St. George's Patient Forum Newsletter

Connecting Patients, Empowering Lives

November 2025

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Rushcliffe Social Prescribing Hub

This is a repeat of last month's information as it is so important.

The Rushcliffe Social Prescribing Community Hub reopened on **Monday 15th September** at West Bridgford Young People's Centre, ready to build on an incredible first year of success.

Each Monday begins with a **Drop-in (10am–12pm)**, where Rushcliffe residents can pop in for information, signposting and a friendly chat over tea or coffee. Later in the day, the Hub offers a wide mix of creative, physical and wellbeing sessions — from art and cooking to Qi Gong, yoga, mindfulness and lifestyle workshops.

A core feature of the Hub is its partnership with local wellbeing practitioners. This approach not only strengthens the local economy but also introduces residents to activities and providers they can access outside the Hub, helping build long-term healthy habits.

One attendee, a working mum in her 40s, shared her story:

"I referred myself to Social Prescribing last year when life became overwhelming. I was signed off work with stress and realised I'd lost sight of looking after myself. Coming to the Hub felt daunting at first, but the support has been invaluable. I joined counselling, mindfulness, Qi Gong and Pilates. These gave me the space to practise simple techniques that now form part of my daily routine. I finally feel like I have time for me again."

In its first year, the Hub gathered **766 feedback forms**, achieved a **9.4/10 experience rating**, and saw **43% of participants report fewer GP visits** — saving the NHS an estimated **£12,500–£37,700**.

🔗 Find out more: www.rushcliffehealth.org/sp-hub

Facebook: facebook.com/RushcliffeSP

✉ Email: nnicb-nn.rushcliffesocialprescribing@nhs.net

Keep an eye out for updates and book your place at future events here:

📄 www.eventbrite.co.uk/o/rushcliffe-social-prescribing-service-108969547441

Or explore the full Friendship Calendar at:

📄 www.rushcliffehealth.org/friendship-calendars

Here's to more laughter, friendship, and wellbeing in the months ahead!

To be added to our mailing list for future updates or to express your interest in getting involved, email us at:

✉️ nnicb-nn.rushcliffesocialprescribing@nhs.net

Thank you Meg Kozian (Social Prescribing Link Worker)

Medical Insights: Movember and Prostate Cancer

The Movember Institute of Men's Health unites global experts to crack the toughest health challenges men and boys face today.

Together with sector partners, they put evidence into action – improving health outcomes, challenging outdated norms, strengthening connection, and helping men engage with care that actually works.

Healthy men, healthy world. That's the goal.

Prostate cancer is the most common cancer in men over 45. But there's a lot that you can do. Just by knowing some important facts about risk – and knowing when to take action. Remember: **early detection is key**. That means understanding your risk of prostate cancer. It means knowing when to start conversations with your doctor. And it means, when the time is right, taking action and not hesitating.

So where to start?

Seeing the doctor

Often, early prostate cancer causes no issues or symptoms – so it's important to check in with your doctor even if you're feeling fine. In many cases, prostate cancer grows slowly and many men don't notice any signs at all. It's why early detection is key – especially for those at risk.

Sometimes there are issues that could point to signs of prostate cancer – like trouble with leaking urine – but it's not always the case. There are lots of reasons why issues might be happening, so avoid making assumptions. It's best to let your doctor get to the bottom of it.

Your doctor is an expert (seriously, they do this kind of thing all day). They'll talk you through everything you need to know. And if it turns out that nothing's wrong? Then that's the best possible result. Your doctor will be delighted to put a plan in place to check in with you again.

And if something shows up that needs more attention, the fact that you've taken action early can make a huge difference.

When should I talk to my doctor about prostate cancer?

If you have a prostate, then there are two situations when you need to start talking to your doctor about prostate cancer. They are:

- **If you're at risk of prostate cancer. A great time to do this is during your annual check-up.**
- **If you've noticed any signs or symptoms. These could be a sign of prostate cancer.**

Ask about prostate cancer during your annual check-up

During your annual check-up, ask your doctor about prostate cancer.

Your risk increases with age, so as a general rule, you should start those conversations if any of the following apply to you:

- **When you're 50.** Your risk of prostate cancer increases as you get older.
- **When you're 40 if you're Black or have African ancestry.** For a bunch of reasons, many of which are [still being studied](#), Black men are at greater risk of a prostate cancer diagnosis.
- **When you're 40 if there's a family history of prostate cancer and other cancers.** Your risk increases if you've got a father, brother or uncle who had prostate cancer. You may also be at a higher risk of getting prostate cancer if you have a mother or sister that had breast cancer and/or ovarian cancer.

During your check-up, your doctor may recommend some tests. Your doctor will then advise on what to do next. Remember: prostate cancer often grows slowly. Many men with prostate cancer do not notice anything during its early stages. It's why you need to take active steps once you reach a certain age – so talk to your doctor and don't put it off.

See your doctor if you've noticed symptoms

This is the other time you need to talk to your doctor. If you notice any symptoms that could indicate prostate cancer, it's important to get yourself checked – as soon as you can.

Common signs and symptoms to look out for include:

- **You've got trouble urinating.** You might have a weak urine flow. You might need to go more often than usual (frequency); have trouble starting (hesitancy); need to go to the toilet very quickly (urgency); or you're straining or have to get up many times at night (called *nocturia*).
- **You have trouble fully emptying your bladder.** You feel like your bladder isn't fully empty after you've peed. Or, there's excessive 'dribbling' when you've finished.
- **You notice pain or burning when urinating.** This could be noticeable pain, a burning sensation, or discomfort before, during or after urination.
- **Aches and pains in your lower back or hips.**
- **Difficulty getting or maintaining an erection.**
- **There's blood in your pee or semen.** Either could be related to other medical conditions, so it's best to check in with your doctor right way if this happens.

These symptoms **do not** automatically mean you've got prostate cancer. In fact, there are several conditions that affect the prostate and are not cancer (but which are definitely not pleasant).

So, if you've got symptoms, it's high time to get yourself checked.

What happens when you talk to your doctor about prostate cancer symptoms?

Here's what to do next.

Do your homework. Make sure your doctor knows about relevant family medical history. This is super important if you have a brother, father or uncle with prostate cancer. It's also important if you've had a mother or sister with breast or ovarian cancer. While you're at it, take some time to read up about the prostate and what it does. Be mindful that, while there are masses of helpful information available online, there's also a lot of [misinformation](#). So, get your facts from reliable sources – like [True North](#), Movember's dedicated online resource for prostate cancer.

Be 100% upfront about any signs and symptoms. Your doctor is a trusted expert who deals with this kind of thing all day. So don't hold back. Got concerns when you're peeing? Noticed something isn't right during sex? Let your doctor know. They'll figure out what needs more attention.

Be prepared to take tests then and now. If your doctor recommends you take a test during your appointment, then roll with it. If you've got the means, there is zero reason to put it off. The sooner you take a test that's recommended by your doctor, the better.

What kind of tests will I do?

Your doctor will ask about all sorts of things: how you've been feeling, your family history, signs or symptoms, and any concerns you may have. Your doctor will also talk to you about a blood test – specifically a PSA blood test. PSA stands for "prostate specific antigen". It's the most common screening method for prostate cancer. It's a simple blood test that looks at the level of PSA (PSA is a protein in your bloodstream) in your blood sample.

What happens when I get my results?

With a PSA test, your doctor will contact you with your results. You might have to come in for another visit to go over the results, and discuss what further action (if any) is needed.

If you do have it then it is best to identify it early.

Living with prostate cancer? Get support.

Men shouldn't face prostate cancer alone. True North, a Movember-funded initiative, provides reliable, relatable and relevant information to men and their loved ones as they navigate the prostate cancer journey.

There's a lot that comes with prostate cancer, and knowing what to expect and where to find support is key to feeling in control and getting through it all. True North's website is a one-stop shop – an information-rich resource that provides education across many topics, including [treatments](#), [sex and intimacy](#), [leaking urine](#), [exercise and diet](#), [stress and anxiety](#) and more.

Thanks to the Movember Institute of Men's Health for this information.

Medical Insights (2): National Diabetes Month

Diabetes

Diabetes is a condition that causes your blood glucose (sugar) level to become too high.

Causes of diabetes

Diabetes is caused by your body not making enough or any of a hormone called insulin, or the insulin not working properly (insulin resistance).

Insulin helps your body use glucose (sugar) for energy. Without it, the level of glucose in your blood becomes too high.

It's not possible to prevent type 1 diabetes because it's usually caused by a problem with your immune system (autoimmune condition).

You may be more likely to get type 2 or gestational diabetes because of your weight, age, ethnicity, or if other people in your family have it.

You can sometimes reduce your risk of getting type 2 and gestational diabetes by making lifestyle changes such as:

- eating a balanced diet
- exercising regularly
- maintaining a healthy weight

Common types of diabetes and who they affect

Type of diabetes	Who it affects
Type 1 diabetes	Often diagnosed in childhood, but you can get it at any age. It cannot be prevented.
Type 2 diabetes	Some people are at higher risk due to ethnicity, age, living with obesity or overweight. It can sometimes be prevented or stopped with lifestyle changes and treatment.
Gestational diabetes	Can happen during pregnancy. You can reduce your risk with lifestyle changes. Gestational diabetes usually goes away after you've given birth.

Symptoms of diabetes

The most common symptoms of diabetes are:

- feeling thirsty all the time
- peeing more than usual
- feeling very tired
- losing weight without trying

Long-term complications of diabetes

Having diabetes can increase your chance of getting other health problems, including:

- heart attack and stroke
- kidney problems
- nerve damage and foot problems – diabetes can cause damage to nerves ([peripheral neuropathy](#))

- sight problems – adults and children aged 12 or over will be offered [diabetic eye screening](#) every 1 to 2 years
- gum disease

Complications can develop over time and are linked to high blood glucose (sugar) levels. Managing your blood glucose well and keeping to your agreed target level can lower your chances of getting complications.

Pre-diabetes (non-diabetic hyperglycaemia)

Some people have blood glucose (sugar) levels above the normal range but not high enough to be diagnosed as having diabetes. This is known as pre-diabetes or non-diabetic hyperglycaemia.

People with pre-diabetes are at greater risk of developing type 2 diabetes, but the risk can be reduced through lifestyle changes.

If you have pre-diabetes, you may be eligible for the [NHS Diabetes Prevention Programme](#). This helps people make lifestyle changes and has been shown to help prevent type 2 diabetes.

Treatment for diabetes

The treatment you'll have depends on the type of diabetes you have. You'll be treated by a specialist diabetes team in hospital or at your GP surgery.

[Type 1 diabetes treatment](#) includes taking a medicine called [insulin](#) for the rest of your life, and regularly checking your blood glucose (sugar) levels.

[Type 2 diabetes treatment](#) and [gestational diabetes treatment](#) includes lifestyle changes such as eating healthily, exercising and trying to lose weight, and sometimes medicines, such as [metformin](#) or insulin.

Thanks to National Diabetes Month information

Meet the Forum Member – Margaret Johnson

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I have been a patient at the practice since 1976 and joined the Patients' Forum in August 2022, along with my husband Roger, after the 'Healthcare in Rushcliffe' event. I wanted to learn more about the practice and help in practical ways where possible and, this autumn, I am enjoying assisting with the smooth running of the Flu / Covid queues and getting to know the practice staff better.

I am retired now but the majority of my working life was spent at Holme Lodge Cheshire Home in Lady Bay helping the physically disabled residents with craft work and later as Activities Coordinator arranging trips and in-house activities and entertainment.

We have two children and two grandchildren. Our son and his two boys live near Geneva while our daughter lives in Gotham with her husband and a little black dog named Pippin. I am an active member of St. Luke's Church which is a lively and welcoming place. I also enjoy a weekly session of badminton and a fitness class as I believe that physical exercise is very important as we get older.

Another of my favourite pastimes is enjoying time with Roger in a coffee shop at coffee o'clock! The attached photo was taken at Windsor castle in September just after President Trump had left!

In the coming months I am looking forward to being a part of the dementia sub-group looking into ways to make the practice dementia friendly.

Thanks to Margaret Johnson for this Forum Member article

Flu and COVID queue management

As usual, Forum members were involved in the successful management of the Autumn Flu and COVID vaccinations on three consecutive Saturday mornings in October.

Approximately 1,575 attended over the three sessions which took place between 8.30 am and 12.30 pm. This year only those over 75 and immuno compromised were eligible for the COVID – 19 vaccination, so careful management was needed to ensure that all patients were clear about which vaccinations they were eligible for, and keeping the queues separate. Having said that there were times when patients were able to move through the one-way system very smoothly without having to queue. Some patients were suitably complimentary about the experience.

Volunteers were also asking patients for their opinions about the new online appointments and queries service. Thanks to all those who have responded.

There could have been severe parking problems on Saturday 18th October when Nottingham Forest were playing at home, and it was anticipated that some fans would expect to use the St. George's spaces to which they were accustomed. They were thwarted in this by Claire who very politely pointed to the large sign discouraging football fans from parking thus! In her high viz jacket and clipboard she carried this out as though made for the job!

There will be one more session on 22nd November with the same hours for anyone who has not already been vaccinated and is eligible. St. George's staff should have contacted all those eligible; however, these are the criteria for **Influenza vaccinations**: -

From 1 September 2025

- pregnant women
- all children aged 2 or 3 years on 31 August 2025
- children with certain long-term health conditions (aged 6 months to less than 18 years)
- primary school aged children (from reception to Year 6)
- secondary school aged children (from Year 7 to Year 11)
- all children in clinical risk groups aged from 6 months to under 18 years

From 1 October 2025

- everyone aged 65 years and over
- individuals aged 18 to under 65 with certain long-term health conditions
- care home residents
- carers in receipt of carer's allowance, or main carers of an elderly or disabled person
- those living with people who are immunocompromised
- frontline health and social care workers

The criteria for COVID – 19 vaccinations are: -

- adults aged 75 years and over
- residents in care homes for older adults
- individuals who are immunosuppressed aged 6 months and over



Week three volunteers relax after a busy morning.

Of course some pharmacists, for example, Green Cross Musters Road, and ASDA pharmacy Loughborough Road are offering appointments. Use their websites to book. Otherwise use the NHS website or App to book or contact St. George's via their phone or website.

Thanks to Chrissie Wells for this article and to Claire Bicknell for the photograph of some of the volunteers – both Chrissie and Claire and many other Forum members were involved.

Walk Everywhere: Exploring the Grantham Canal from Tollerton to Bassingfield

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At St George's Patients' Forum, we often remind patients of Dr Jelpke's favourite mantra — **“Walk everywhere.”** Walking is one of the simplest and most effective ways to stay active, boost mental wellbeing and enjoy our beautiful local countryside. This month, I'm featuring one of my favourite local walks in **Rushcliffe**: a peaceful stretch of the **Grantham Canal**, running from **Tollerton to Bassingfield**.

Getting Started



Begin your walk in **Tollerton**, where there's convenient **car parking in the layby by the allotments** on Tollerton Lane. From there, it's cross over the road, to join the towpath of the Grantham Canal — a scenic, flat route that's ideal for walking, running, or even cycling.

Along the Canal



This section of the canal is wonderfully tranquil. The towpath takes you through open countryside, with wide views across fields and hedgerows. Keep an eye out for ducks, swans, moorhens, and the occasional heron and I've even seen a Kingfisher! The path is mostly level and well maintained, making it a great choice for all ages and abilities.

A Perfect Pit Stop

As you reach **Bassingfield**, look out for a turning that leaves the canal path on your **left**, leading slightly uphill towards the village. Along this short incline, you'll find a **bench (complete with a handy litter bin)** — the perfect spot for a **pit stop** if you've brought a drink or a snack. It's also a lovely place simply to rest your legs and take in the peaceful view across the fields.

Heading Back



When you're ready to return, you can retrace your steps along the canal for another dose of waterside calm, or make a **circular route** by continuing through **Bassingfield village** and following the road back towards Tollerton. The road is quiet and adds a touch of variety — ideal if you're cycling or just fancy a change of scenery.

Why We Love It

This short and accessible route captures the best of what local walking can offer: open space, fresh air, and time to pause. Whether you stroll, stride, or cycle, the Grantham Canal is a reminder that you don't have to go far to find calm and connection.

So lace up your shoes, head outdoors, and remember the mantra: **walk everywhere** — your body and mind will thank you!

At a Glance

- **Start point:** Layby by the allotments, Tollerton Lane, Tollerton
- **Finish:** Bassingfield (with option to return via road through the village)
- **Distance:** Approx. 3 miles (round trip)
- **Terrain:** Flat, well-maintained towpath; short incline towards Bassingfield
- **Accessibility:** Suitable for most abilities; ideal for walking, running, or cycling
- **Facilities:** Bench with litter bin near Bassingfield (perfect rest stop)
- **Scenery:** Open countryside, canal views, and local wildlife

Thank you to Claire Bicknell for this 'Walk Everywhere: Exploring the Grantham Canal from Tollerton to Bassingfield' article and photographs

Ask the Doctor – your questions answered.

Q - When can I send in a on line medical request?

A - From 08:00 to 18:30 on working days as per the new GP contract.

We ask that you send online requests as early in the day as possible to give us time to help. We operate a full doctor assessment system until 5pm for all requests (urgent and non-urgent), but only non-urgent medical enquiries can be submitted after 5pm. These may not be seen until the next working day. For anything urgent between 5pm and 6.30pm ring reception.

Remember nurse and blood appointments are made still by ringing reception on 01159143200

Thank you to Dr Matthew Jelpke for this Q & A

And of course Claire's very own Doctor, Doctor joke:

**Doctor, Doctor, I feel like a trap door!
Don't worry. It's just a stage you're going through**

Coming up in December:

- 1st World Aids Day
- 2 – 8th National Grief Awareness Week;
- 3rd International Day of Persons with Disabilities;
- 12th Festival of Winter Walks

All views expressed in the Newsletter are personal and correct to the best of our knowledge. If you are worried or concerned about any of the issues raised, please see a medical professional. Hyperlinks and QR codes provided are linked to professional websites and societies who offer advice and help. It is of course up to you to decide whether to use them.

Editor: Phil Unsworth