

THE HAWTHORNS SURGERY
PATIENT PARTICIPATION GROUP NEWSLETTER
NOVEMBER 2016

The latest meeting of the Patient Participation Group was on Friday 14 October 2016 and in order to get a better understanding of the work of the surgery it was decided to include in the next few newsletters "Days in the Life" of staff who work at the surgery. The first is below and explains the typical aspects of our doctors' working day.

Information about the surgery, issues raised by the attendees and feedback from other patients are also included in this newsletter.

UPDATES AND FEEDBACK

NEW TELEPHONE SYSTEM

This is working well but with mixed reviews from patients. The main point was that there is not a countdown of progress in the queue to identify how long the wait is. This would help patients know whether to hold on or phone back later.

Rob, Practice Manager, will look into the possibility of improving this.

ELECTRONIC PRESCRIPTION SERVICE

This system became operational on 5th October and all patients can sign up to this.

It means that instead of a paper prescription being produced medication requests will be sent electronically to the chemist of your choice who will print them off and dispense the medicines.

However, this does not change the 48 hours needed before repeat prescriptions are ready for collection.

FLU INJECTIONS

The Saturday clinics were very successful but have now finished. However, there are still clinics available in the week. So.....

**DON'T FORGET TO GET
YOUR FLU JAB.**

LIFE IN THE DAY OF A GP

As we know, a GP is there to give advice and treatment when we need it but this takes up more time than just the appointment we may attend at the surgery, or the time the doctor may spend if visiting us at home. So this is a little insight into what is also involved and the other roles GPs do.

A GP's working time can be divided into time spent with patients, administration, teaching, training and appraisals, and meetings, all which have to be fitted in to the working week.

A typical day will begin with arrival at the surgery at 8.00am to deal with some administrative roles such as emails and messages received from patients or their families and repeat prescription requests.

8.30am - 12.00pm 10 minute surgery appointments and additional emergency/urgent appointments.

1.00pm home visits to housebound patients.

3.00pm-6.00pm 10 minute surgery appointments and additional emergency/urgent appointments.

When the doctor is Duty Doctor they also have to deal with additional prescription and medical patient enquiries for any patient.

However, when you see your doctor they have to ensure health promotion takes place too depending on not only the condition you are seeing them about but other aspects of a healthy life style and the management of any ongoing conditions.

Two of the GPs are specialists in Ear, Nose and Throat issues and a further two specialise in Minor Surgery. This means that some procedures can be done at the surgery to avoid visits to hospitals.

The practice also has responsibility for the care of residents in Perry Trees Care Home, Perry Common and Ward 27 at Good Hope Hospital which involves a daily ward round to each site. These units are for patients who no longer need hospital care but are not well enough to manage at home.

All this information on patients has to be entered into the computer to demonstrate (by the dreaded statistics) that our GPs are checking what is required by the various health departments such as blood pressure monitoring, diabetes levels, cholesterol.

Once a week each GP partner has a session from 8.30am -11.00am set aside to deal with the many other administrative tasks. This includes writing referral letters, reading reports from consultants etc. making telephone calls, completing insurance forms for patients, for example for life cover or holiday insurance claims.

The practice holds a staff meeting once a week to ensure smooth running of the practice and to discuss any issues with staff members. GPs also liaise with other professionals such as health visitors, district nurses, other doctors and professionals to discuss patient care.

Our GPs also have a teaching role and have up to 4 medical students from Birmingham Medical School, who will be in the first four years of their training, and these students are allocated to the surgery for 30 weeks to be trained in all aspects of health care. This is in addition to 3 qualified doctors who are at the surgery training to be GPs.

GPs themselves also have to be appraised every year and this has to be done by a GP from another practice and likewise our doctors appraise GPs at other practices. The doctors also have to be revalidated every 5 years by the General Medical Council who will review their last 5 years of appraisals and decide whether they are still fit to practice.

In between all this they have to meet targets set by the Government and Birmingham Clinical Commissioning Group and of course the Care Quality Commission.

OTHER TOPICS DISCUSSED

1. MEDICINE WASTE CAMPAIGN

The surgery is taking part in an initiative to look at reducing the wastage in medicines through over prescribing. In Birmingham repeat prescriptions are being dispensed without pharmacists checking if all items are needed which is resulting in some cases with too many medicines being dispensed.

The survey will involve conducting a patient's survey within the surgery to determine our views and if we have been subjected to stockpiling of unneeded medicines. Those of us who attended the October Patient Participation Group completed the survey and it is simple and easy to do.

You may be asked to complete the short survey while waiting to see the doctor or nurse and we hope you will help with this as it takes only a few minutes to complete.

2. DEMENTIA FRIENDS

One of the patient attendees advised the group of an investment by Birmingham City Council, Sutton Coldfield Parish Council and Heart of England NHS Trust to offer assistance to community patients with dementia and it has been proposed that Sutton Coldfield becomes one of the first areas in Birmingham to support this initiative.

Funds are to be made available for selected community areas such as shopping centres to make small alterations to the environment which will help dementia patients. These will include, for example, different floor and mat coverings changing from black to brighter colours as dementia patients see black as a hole and may not want to walk on this.

Funding is also available from the Birmingham Cross City Commissioning Group to help GPs identify patients who show signs of early dementia. GP's can then refer the patients to specialist clinics for testing and regular follow up. It is expected this will prevent some hospital admissions which can be very confusing for these patients who will instead receive care in the community.

These clinics are held at Perry Trees Centre with specialised nurses and care packages.

The next edition of the newsletter will be in the spring and will include a "Day in the Life" of another member of staff at the surgery.

Please pass any comments to Rob Shuter, Practice Manager, and why not join the surgery as a Patient Participator and come to our meetings.