

Patient Participation Group

Newsletter



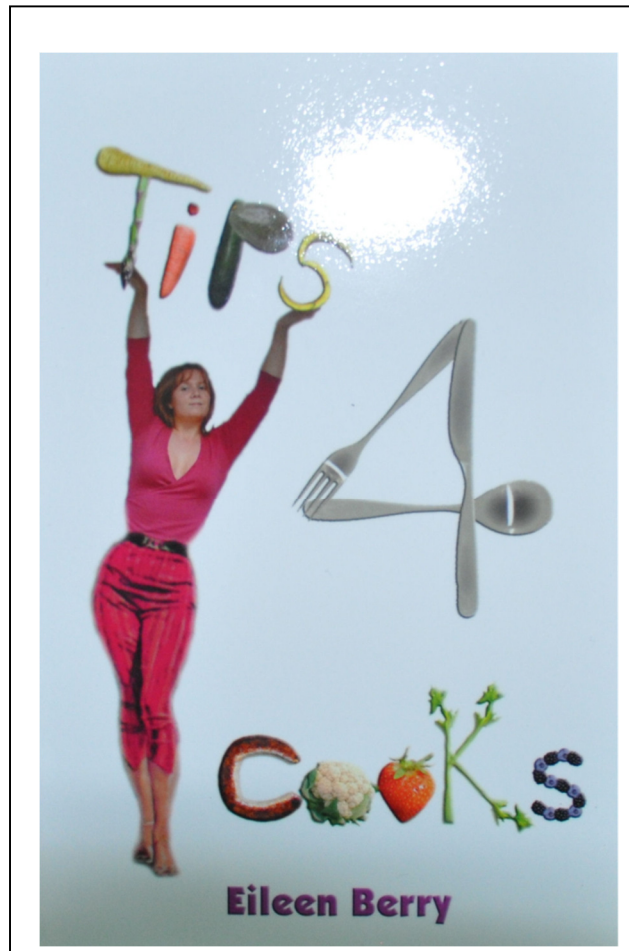
Incorporating the

[Friends of the Badgerswood and Forest Surgeries](#)

July 2016

Issue 22

Fundraising – Tips 4 Cooks



Brian Donnachie is a patient of Badgerswood. He has very kindly given the PPG copies of this book "Tips 4 Cooks" to sell to raise money for our latest projects. It was written by his wife Eileen who sadly passed away recently

We would recommend a minimum donation of £2. Copies are available in the receptions of Badgerswood and Forest surgeries. Please support us and give a thank you to Brian by buying a copy of "Tips 4 Cooks".

Chairman and Vice-chairman Report

The Care Quality Commission has finally visited our Practice. Both the Practice and the PPG have been preparing for this visit for some time. Later in this newsletter we give an account of their visit and our impression of what we achieved. We at the PPG, were very aware of the fact that the CQC were assessing the Practice and not the PPG, so our presentation to them was prepared with this in mind.

Dr Kirmani, who is our visiting Ophthalmologist from the Royal Surrey, has kindly written our Educational Article on the problem of Dry Eyes jointly with his therapeutic optometrist, Andrew Matheson. The article is well written and illustrated. If this common problem is one from which you suffer, then this article is well worth reading.

In April we held our AGM, and if you were unable to attend, we publish the minutes in our newsletter. Sarah Coombes gave a marvellous talk on the 'Doctors of Vanity Fair'.

Sharron Gordon, Consultant Pharmacologist from Basingstoke, has written previously about her study on the problems of lack of patient awareness of the dangers of the side-effects of anticoagulants used for atrial fibrillation. She has now written the results of her study for us. With this comes a video, the web-site address of this being included in her article. It is now hoped to expand her project throughout SE Hampshire.

This year our submission for a Corkill Award was unsuccessful. We submitted our work related to the survey which is ongoing regarding patient desirability of clinic opening times. We can't expect to be successful every year!

Having received funds from EHDC, we have now purchased a defibrillator. This is now in use in the Practice and has been used already for 2 patients who have collapsed. However this machine has also been purchased for training purposes. Defibrillators now give verbal instructions to the user and can therefore be used in First Aid training courses. The PPG has been donated a set of 1st Aid training mannequins and we now propose to set up a formal training course for the Practice, for the village and for the surrounding area. Once we have developed this, we shall announce what we are doing and when.

In addition, the Bordon lodges of Freemasons have kindly fund-raised towards another 24 hour Blood Pressure monitor. This has been donated to Forest Surgery so we now have 2 machines in each surgery. I am informed that this

new machine is already in almost continual use. We record this donation later in the newsletter

The 'Healthy' part of Bordon 'Healthy' New Town is beginning to take shape. I hope in the next newsletters to get regular articles from Dr Leung, from Rob Guile and other key players in Southern Health, and from Sara Tiller in SE Hampshire CCG, hoping to keep us up to date with progress here.

Our association with Healthspring in India is now developing apace. The design of the teaching programme is described later in the newsletter and the initial part of this is now in production. We hope to start working this later this year. Healthspring itself in India is now expanding rapidly as the concept itself is being accepted I think we are very lucky in Badgerswood and Forest to be associated with such a development abroad.

Please note that we have forms available in both surgeries for you to fill out for the 'Friends and Family Test'. Numbers filling these out for us have dropped significantly in the past few months. We are required by NHS England to submit our figures from these forms. We would be grateful for your help by filling out a form each time you visit.

Finally, there have been a few changes in the Practice to note. As usual these are included in the newsletter.

Badgerswood & Forest Friends and Family
December 2014 to April 2016

How likely to recommend services to friends and family

	Total	%	
Extremely likely	336	79.1%	425
Likely	73	17.2%	
Neither likely nor unlikely	6	1.4%	
Unlikely	8	1.9%	
Extremely unlikely	2	0.5%	
Don't know	0	0.0%	
	425	100%	

Extremely likely + likely 96.2%

As at 27/6/16

Data collection start date December 2014

Issues raised through the PPG

I note that the surgery does not participate in the Patient Access website; I have just learned about it and logged on, only to find that all of the features are blocked by the surgery or advise contacting the surgery. Are there any plans to open access to this service or to facilitate booking appointments on line?

Having had cause to visit my GP recently for the first time in about 3 years, I was struck by how cold and impersonal the waiting area has become since its refurbishment, with "Big Brother" watching from behind the obscured glass.

The waiting time was ridiculous and, I am told, a regular occurrence. For an appointment booked ten days previously, I waited 50 minutes, with no explanation or apology from the "receptionists", who only make a guest appearance if an unfortunate patient hangs around persistently at the desk. My husband went for a blood pressure check recently and, not surprisingly, it was significantly raised following an extended wait. I wonder how many other patients are similarly affected?

Please don't assume I subscribe to the opinion that all receptionists are the stereotypical dragons - I am a medical secretary myself and have worked in GP practice. I understand the nature of the job but being hidden away engenders, I believe, an atmosphere of indifference and unapproachability when patients may already be anxious.

This email refers to Badgerswood Surgery. The Practice and PPG have discussed this.

1. Patient access for appointments is available on-line. Please speak to one of the receptionists and they will give instructions, passwords etc. The system is different from that used to order repeat prescriptions. Dedicated spaces are available for on-line booking.
2. The area behind the glass has to be separated from the patient waiting area for several reasons. Unfortunately the glass is not lucent from the opposite side making it difficult to see through to the waiting area. The waiting area however does not exude an air of comfort and relaxation. We have been having discussion about how this may be improved.
3. We have had several complaints about having to wait for 5 or more minutes at the reception desk. The problem is partly due to the glass being opaque. A bell is about to be placed on the desk to make the reception staff aware that there is someone at the desk.

MINUTES OF ANNUAL GENERAL MEETING OF PATIENT PARTICIPATION GROUP BADGERSWOOD AND FOREST SURGERIES HELD ON 26 APRIL 2016 AT LINDFORD VILLAGE HALL

1. The chairman gave a warm welcome to all present.
2. Apologies for absence: There were eight apologies. An Attendance sheet was signed by those present.
3. The committee were introduced.
4. Minutes of previous AGM 30 April 2015 – these were agreed, proposed by Nigel Walker, and seconded by Wendy Bennett.
5. There were no matters arising.
6. The Chairman gave his report

“The PPG has continued to be very active through 2015 - 2016 with the committee meeting approximately every 6 weeks. We try to alternate meetings between the 2 surgeries. This is not always possible depending on room availability and which evening in the week we plan to meet. GPs attend for specific items on the Agendas.

Our newsletter continues to be published quarterly. All our members receive the newsletters directly, 2/3 by email, and mostly they seem happy to receive the newsletter electronically. To try to reduce printing costs, we have made a push to send out more newsletters electronically and now over 250 copies go out by email. However we still provide printed copies at the reception desks for non-members and for members who prefer printed copies. For everyone here this evening who does not receive a newsletter electronically and would wish to be on our mailing list, please make sure you leave your email address clearly on our attendance sheet at the door.

There are over 8000 GP practices in England and Wales and in July last year we were notified that we had won 2nd place in the Corkill Award competition by the National Association of PPGs for our work done in improving the communications from the Royal Surrey and Basingstoke Hospitals to our Practice at the time of discharge of patients. For those members who were at our September meeting, you will recall that Dr Wilkie, President of our parent organisation NAPP came to present our certificate and award to us. We are trying again this year and have submitted the results of a survey we are doing

on patient availability and preferences for clinic times. Interestingly and rather unsurprisingly, only 2% of patients want to come on a Sunday to a clinic, and these are the patients who are unable to come at other times because of work and travel commitments.

We are pro-active in trying to detect high blood pressure in patients in the Practice and in the past year we raised enough cash to install self-measuring blood pressure monitors in the reception areas of both surgeries. Please use these whenever you attend. We now think we may have enough money to purchase another 24 hour BP monitor for the Practice and in May last year we ran a Stroke Awareness month handing out leaflets through the surgeries.

All surgeries in the country have to run Friends and Family tests asking patients who attend if they would recommend the Practice to their friends and family. We have taken over the analysis of this for the Practice run by Ian, our Treasurer, and we publish the results in every newsletter. At present there is a 96% satisfaction rate with the surgeries.

As many of you are aware, there are plans for a Bordon New Town development with the departure of the military last year. Coincidental with this is the discussion of what may happen with the Chase Hospital. The PPG have been pushing very hard to be involved in both these matters, and made it very clear that they feel that the public and the patients must be represented here. At last it seems that this is happening. Reports of this have been regularly documented in the newsletters.

The PPG has for some time now, been hoping to set up its own First Aid training programme and has recently been kindly offered equipment to be able to do this. We hope soon to be announcing the start of this programme for anyone who is interested. We are planning to advertise this first to our members and will be closely liaising with the Headley Parish Council who are in process of purchasing a defibrillator to install in the High Street.

We now have reached over 21 issues of our newsletter. We have a lot of Educational Articles and most are excellent. It would seem a great pity to lose what we have produced. Following a discussion with Michelle Dawson, physiotherapist, we have decided on various ways to produce the highlights of these for you to be able to continue to access these such as handouts, screen shots on our reception television screen etc. as well as production of a 2nd edition booklet.

As an exciting tangent, the PPG have been involved in helping an overseas development called Healthspring. India has no Primary Care or GP set up at

all and Healthspring is a non-for-profit group founded in India designed to develop primary care there. The concept has caught on and already has spread from Mumbai or Bombay, to the adjacent city of Pune and is now into Delhi. The doctors need a seriously good system of training and our Practice through our PPG has been approached and agreed to work with this group in setting up a system of teaching and training. It is expected to be a 2 year programme, taught by a combination of on-line and direct hands on training.

I would like to say that our committee is a very devoted group but we have many things we would like to do and we really would ask if anyone can help us.

Is there anyone present who would be willing to join our fund-raising committee or to assist with the production of our newsletter? Please let us know. Our Practice is very dynamic. For instance together with Professor Chauhan, a respiratory clinic for all our asthmatic and bronchitic patients was run in our surgeries, avoiding the need for redirecting the patients to visit any hospital clinics and reducing their complication rates and emergency admissions. The PPG in fact fund-raised for some of the equipment needed for this.

We don't plan to have a slot for "AOB – Any Other Business" at the end of this meeting. Any comments, queries or thoughts, please Email us or put a note into either surgery reception and we will acknowledge immediately and discuss your comment at our next committee meeting and reply accordingly.

Finally I would like to mention again about our raffle this evening. Please don't miss the opportunity. Barbara and Heather still have tickets for sale. And there are books for sale kindly donated by members of the committee.

I hand over to Ian Harper, our Treasurer, for his financial report. His main statement is on the reverse of your Agenda sheet."

7. Financial Report – The Treasurer gave his report. The receipts and expenses for the present year and prior year were circulated at the meeting.

"As at the end of 31st March 2016, the total funds in the accounts were £2192. However, much of this was already committed. £900 was earmarked for a new defibrillator for Badgerswood Surgery (£750 of this having been donated by the EHDC), £500 being earmarked towards a 24 hour Blood pressure monitor and £60 for the hire of the Lindford Village Hall for this evening's meeting.

This will leave £732 as funds in the accounts. The committee always plans to keep a float of around £500 ± for contingencies. At present the Bordon Lodges of Freemasons have been in contact with us and are hoping to fund the difference for the BP monitor which will cost approximately £1200.”

The financial report was proposed by Nigel Walker and seconded by Michael Prior and agreed by those present.

The treasurer also records the Friends and Family Test reports. It is noted that in the last 2 months only 12 people have filled out forms each month from both surgeries.

8. Election of committee – the committee was voted in en bloc. The committee is comprised of David Lee, Chairman) Gerald Harper, Sue Hazeldine (vice chairman), Yvonne Parker Smith (secretary), Heather Barrett, Ian Harper (Treasurer), Barbara Symonds, Nigel Walker, Sarah Coombes. These appointments were proposed by Deborah Chamberlain and seconded by Jenny Lee.

9. Date of next AGM –25 April 2017.

Members were urged by the chairman to complete the form “Friends and Family Test” on their next visit to the surgery. The point was made by a member that patients had not realised that a Friends and Family form needs completing **each** time a patient visits the surgery.

After the AGM, a talk, illustrated with slides, was given by Sarah Coombes with regards to four doctors who were caricatured in archive editions of Vanity Fair magazines. This was interesting and most informative.

The Chairman, David Lee, was thanked for his commitment and devotion to the position.

A raffle was held with prizes donated by members of the committee.

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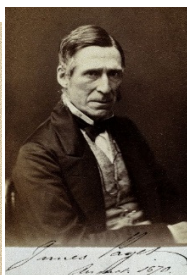
For further information, please contact
Keith Henderson 01428 713044

The Doctors of Vanity Fair

The talk presented by Sarah Coombes at the 5th PPG AGM



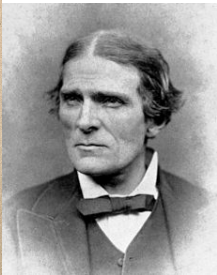
The Vanity Fair magazine is now in its 6th incarnation, but only 1 edition was ever produced by a British publisher. Thomas Gibson Bowles, the editor and owner of the 2nd edition, hit on a clever idea and on 16th January 1869 promised his readers “Some Pictorial wares of an entirely novel character”. His idea continued till 1913 until the outbreak of the 1st World War. Eminent figures including Royalty, Prime Ministers, and many others were produced weekly in caricature form. Approximately 35 doctors appeared during this time. Sarah selected 4 and illustrated her talk with their caricatures and their photos for comparison.



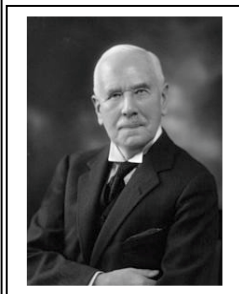
James Paget, born 1814. He introduced the concept of rational thinking and clinical trials to medicine. No longer did doctors prescribe blindly by thinking one way was better than another. After Paget, everything had to be proven to be better by comparative prospective and retrospective studies.



Sir Jonathan Hutchinson, a pupil of Paget's, is called the founding father of oral medicine. In the 1880s he bought a house in Haslemere and in 1888 and opened this as the Haslemere Museum. At the time of his death, the museum was enormous. He bequeathed the museum and the contents to the town, which still exists today.



John Burdon-Sanderson born in Newcastle 1828 and went to Edinburgh Medical School. His name is not well known but in 1871 he discovered a mould which inhibited the growth of bacteria. This mould was called *Penicillium*. In the 20th century, Alexander Fleming, Florey and Chain were awarded the Nobel Prize for their work on the active agent of this mould *Penicillin*.



Sir William Arbuthnot-Lane, Baronett, Legion of Honour, was born 1856 in Fort George near Inverness and became Consultant Surgeon at Guy's Hospital, London. He developed a no-touch technique in orthopaedic surgery and is named as the founding father of aseptic surgery. In his later years he became a very dominant character and is thought to be the model for Sir Lancelott Spratt played by James Robertson-Justice in *The Doctor's Dilemma*. A clip of this was shown by Sarah during her talk.

Our Educational Article this month is about

DRY EYES

written by

Mr Andrew Matheson and Dr Aman Kirmani

Andrew Matheson

is a
Therapeutic Optometrist

specialising in Dry Eye Treatment

Dr Aman Kirmani

Is a
Consultant Ophthalmologist

at

The Royal Surrey County Hosiptal
Guildford
and
Badgerswood Surgery
Headley

Dry Eye and its Treatment by Andrew Matheson & Dr Aman Kirmani

Dry eye is a common condition that manifests itself as we age. It occurs when there is not enough water in the tears and they become too concentrated or salty. This can either be because not enough water is being secreted into the tears (aqueous deficient dry eye) or if the tears are evaporating too quickly (evaporative dry eyes).

Aqueous deficient dry eye is common in postmenopausal women, patients who don't drink enough water and with certain medications such as blood pressure medication and antihistamines. It is also prevalent in patients who drink too many diuretic drinks such as caffeine and alcohol.



Preservative free hypotonic Eye Drops

Evaporative dry eye usually occurs when the lipid layer of the tears is poor hence the watery layer of the tears evaporates excessively. This also results in over concentrated or excessively salty tears. Tasks such as computer use aggravate this type of dry eye especially.



Blocked oily glands on the lid margin

Excessively salty tears causes the cells on the front of the eye to become damaged and die off. These cells are responsible for the mucous or glue layer that holds the watery layer of the tears in place. As a result dry patches are formed which damage the exposed cells on the eye surface.

In both types of dry eye, using 'under-salty' or hypotonic ocular lubricants results in the concentration of the tears returning to normal and eye health and normal mucous layer can return.

Rectifying the underlying cause of the dry eyes is important. This may be as simple as drinking more water or using radiator humidifiers to reduce tear evaporation when the central heating is on.

The oily layer of the tears can be improved by increasing the amount of omega 3 fatty acids (fish and flax oils) in the diet and cleaning the lids after a 2-3 minute hot compress with a lid hygiene product or dilute baby shampoo. Where there is an infective element, such as blepharitis, an antibacterial lid foam such as SteriLid helps both to unblock oily glands and also eliminates the bacteria that cause a lot of the irritation



Lid Hygiene is important

In cases where the eyes still have a low tear volume despite these measures punctal plugs can be fitted to reduce the speed at which the tears flow out of the eye and down the throat.



Punctal plugs being fitted

Videos of these products and their use can be found on the Matheson-Optometrist.com Youtube channel.

Reducing Strokes Resulting from Atrial Fibrillation In Badgerswood and Forest Surgeries

Sharron Gordon, Tamara Everington, Anthony Leung, Sue Hazeldine, Sarah Thomas and Kevin Wood

You may remember in September 2015 I wrote describing a new way of joint working between Hampshire Hospitals Foundation Trust (HHFT) and Badgerswood and Forest Surgery. This was an exciting and new project which really allowed us to test how working together could make care better for the patients of Badgerswood and Forest practice.

This project allowed us to find and review patients if they had atrial fibrillation (a condition where your heart beats irregularly) and review their medicines. We then made sure that these patients were followed up by the local pharmacist.

Anticoagulation (a medicine that slows down the speed that your blood clots) can be an essential part of preventing someone with atrial fibrillation getting a stroke. However it is essential that if you have this type of medicine that you understand how it works and how to keep yourself safe by staying fit and healthy and by looking for side effects so that you know what to do if you have any problems. You must have a really good conversation with the prescriber or your community pharmacist to understand why anticoagulation matters to you. Please do ask the pharmacist in either of the Bordon practices if you want more information about your anticoagulation.


So, THANK YOU to each and every one of you that came in for clinical reviews particularly Betty, Aldo and Paul who supported us with making a film on describing this project to help us explain to other practices why it worked. Here is the link if you want to see more.

<http://wessexahsn.org.uk/videos/show/187>

In total we saw 49 patients in over 4 busy days and we had some great results. The project we ran worked well. We were able to test the process of finding patients, booking the appointments and explaining and agreeing care. We learnt a lot and understand how we might change this a little if we do this again. We influenced care in 2/3rds of the patients we saw. This will reduce the risk of these patients suffering from a stroke in the future.

Crucially the feedback from patients has been positive with them clearly feeling that the appointments helped them improve their understanding and ask questions. There were many grateful comments about the discussions about medicines that were held and clearly many individuals who were not always aware why they were on anticoagulation.

We are now hoping to run this project across another 10 practices in SEHCCG based on our learning with the team here at Badgerswood and Forest practice. Thank you very much for all your help.



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CQC visit: On Wednesday 18th May, the Care Quality Commission visited our practice to carry out its inspection. Since April 2013, the CQC have been inspecting GP Practices and have now reported on 7262 doctors / GPs. As is standard protocol, our Practice and PPG were given 2 weeks' notice of the impending visit. Following an inspection, it takes approximately 50 working days for the report from the CQC to be issued. After that time, the report is available on the CQC web-site and is free for everyone including all patients to look at and to see where there are problems, if any, with the Practice. At the latest therefore we expect our report to be available by 27th July for you to see.

To give an idea of the standard of Practices already inspected, in the latest batch of inspections, the CQC has reported 12 (4.2%) Practices as outstanding, 217 (76.2%) as good, 43 (15%) require improvement and 13 (4.6%) as inadequate. At the moment we can see on the CQC web-site, the reports of their inspections of one of the Practices in Petersfield, both the Practices in Liphook and the Practice in Grayshott.

On the day of the visit we had been informed that 4 inspectors would be arriving but only 2 came. We also had prepared for an inspection of our whole Practice i.e. Badgerswood and Forest Surgeries, but because there were only 2 inspectors, only Badgerswood was inspected, which we found disappointing as much effort had been made into preparing for the visit to both sites. Also we felt the inspection was very selective not covering many areas we had anticipated. For instance we expected that the CQC would wish to talk to the reception staff but this did not happen.

The PPG were keen to meet the CQC and we felt it important that we be available to express our opinions and to convey how the Practice interacted with the patients. We were allowed 1 hour and the CQC indicated that they were able to meet only 4 of us. We would have preferred that they meet our whole committee. An email discussion with the committee was conducted and 4 members agreed to meet the CQC – David Lee (Chairman), Yvonne Parker-Smith (secretary), Ian Harper (Treasurer) and Nigel Walker (Meetings organiser). We therefore had representation of patients from both surgeries. Rather than wonder what we may be asked and have to respond to questions, we decided to prepare a combined presentation of all that we felt the inspectors may wish to know from us.

We started by explaining how our PPG works with our committee of 8 meeting 6 weekly, and a membership of just under 100. We also gave copies of our quarterly newsletter and explained its content including the comments, Issues, Changes in the Practice and Educational article pages.

Following this we then discussed the main aims of the PPG and how we interact with the Practice. We broke this into a list:

1. The role of the PPG as a liaison group between the patients and the Practice
2. How the PPG communicates issues which the patients have and how the Practice responds to each of these.
3. How we at the PPG monitor the Practice eg via our surveys and how the Practice have responded to our ideas from these
4. Involvement of the Practice through the PPG in educating the patients in medical matters eg by assisting us with our newsletter
5. How we assist the Practice to improve patient care eg when they came with problems with hospital discharge summaries
6. How we have fund-raised to acquire items which have helped the Practice improve patient health eg purchase of spirometer for respiratory clinic and purchase of BP monitors.

The CQC were here to assess the Practice, not the PPG and our presentation was very much orientated this way. We talked about how the Practice had responded to each of the above items and how we had worked together to try to improve patient care over the 6 - 7 years the PPG has been in existence. We very much centred on how the Practice had responded to our comments, critical and constructive, over these years.

At the end of our presentation, the CQC had no questions to ask. Our presentation had covered all they wished to know.

We feel disappointed in the CQC assessment of our Practice. The PPG were given the opportunity to express all the comments we wished to make. We feel the CQC inspection fell very short of what we expected of them. Only 2 of 4 inspectors we expected. Only 1 surgery inspected.

Perhaps our Practice has such good vibes that the CQC felt very confident with the key areas they inspected not to need to inspect further. Their report, when it comes, will show us whether this is the case.

24 Hour Blood Pressure Monitor

The Chairman of the PPG accepts a 24 hour Blood Pressure monitor on behalf of Forest Surgery. The Bordon Lodges of Freemasons raised funds to purchase this vital piece of equipment which will be used to help the doctors decide whether patients who attend the surgery and are recorded



with high blood pressure, require treatment. Many patients who attend have high blood pressure because of anxiety and stress simply by seeing the doctor or nurse, but this settles as soon as they leave the surgery. The 24 hour monitor will record the patient's Blood Pressure throughout the day indicating whether they truly have a persistent high pressure which needs life-long treatment. This equipment will be well used.

The PPG and the doctors of Forest Surgery are very grateful to the Bordon Lodges for their kind contribution to the Surgery on behalf of the patients of Bordon.

Cardiac Defibrillator and First Aid

The Practice has now purchased a new cardiac defibrillator using generous funds from EHDC given to the PPG. This machine serves 2 purposes. Firstly it can be used to resuscitate a patient who has collapsed. Modern machines now record the patient's cardiac rhythm and can talk to the person who is using the machine telling them what to do. If the heart has stopped beating due to an irregular beat known as ventricular fibrillation, the defibrillator can be used to correct this. The second use for this machine is that it can be used as a teaching aid in a first aid training session showing people how it works, so they become familiar with it.

Following a very kind donation, the PPG have just received a gift of first aid teaching equipment and are now in process of forming a first aid training team. We plan to run our first session 'in-house' i.e. in the Practice, and once we are working well, we will then move out to our PPG members and gradually from there to the community. We will keep you informed of progress here.

Progress with Healthspring

We are pleased to say that Healthspring, the Primary Care system developing in India, seems to be progressing well. In India there are now over 20 surgeries open and working full time in Mumbai (Bombay) each with 5 doctors working together. Two surgeries have now opened in Delhi and there are now plans to develop more surgeries quickly there. Sites have been earmarked in Hyderabad and Bangalore and there are discussions now on-going with the Vice-Chancellor of the University of West Bengal in Calcutta.

There seems to be no lack of eager doctors applying for posts and certainly no lack of patients wishing to register with Healthspring.

We have been in regular contact with Healthspring as we have taken control of developing responsibility for setting standards of medical care and training for the doctors. We are in the throes of developing a Distance learning programme which we hope to start in the late autumn. Despite an exhaustive search, we have not been able to find a system anywhere world-wide which suits our purpose, so we are having to produce our own. Integrated with this knowledge based e-learning programme will come a simple Multiple Choice examination test for each topic, aimed at ensuring that each doctor is in fact studying and learning every topic sent out.

A knowledge base however is not sufficient and a hands-on training of clinical communication skills, examining techniques, and first aid training will also be required. This will be delivered by occasional teams visiting centres in India to instruct the doctors directly. Although many of the Indian doctors are very knowledgeable in many areas of medicine, many do have distinct gaps which will need to be filled for a doctor working in Primary Care. They will after all be seeing patients with illnesses affecting potentially all the systems of the body.

Healthspring is a non-for-profit group which seems to be achieving its aim of developing Primary Health Care throughout India. We shall keep you informed of this exciting programme which our PPG and Practice have become involved with. If this succeeds, what an achievement this would be for Badgerswood and Forest too, don't you think?

Recent changes in the Practice

Prescribing Nurse Practitioner

We are delighted to welcome Diane Lockyear, a prescribing nurse practitioner with vast experience as a Cardiac & Emergency Practitioner in A&E and Advanced Nurse Practitioner in Primary Care. She will complement the existing clinical team providing management of acute illness. She will be based at both Badgerswood and Forest Surgeries three days per week, increasing availability of appointments for our practice population.

GP Trainees

The present trainee has left and we are expecting a new trainee in August.

Physician Associate

We are excited at the prospect of a full-time Physician Associate commencing with us in October. This is a relatively new clinical role within General Practice and one which will enhance our clinical availability to patients.

(Definition of a Physician Associate: ...a new healthcare professional who, while not a doctor, works to the medical model, with the attitudes, skills and knowledge base to deliver holistic care and treatment within the general medical and/or general practice team under defined levels of supervision.)

New Telephone System Badgerswood

We at the PPG have had numerous communications from patients about problems as they try to make contact with Badgerswood Surgery by telephone particularly early in the mornings, especially when trying to make appointments. As you are aware we had a lengthy discussion with Tina, Dr Mallick and Dr Walters recently and we published our minutes of this in a recent newsletter.

Following our discussions and after discussions within the Practice, a new telephone system will be introduced at Badgerswood Surgery, provisionally planned to be installed during July. It is planned also that this will be integrated into the telephone system at Forest Surgery in order that the 2 surgeries can communicate more easily together and assist each other with calls whenever possible.

Please be patient with the Practice during the initial phase of introduction of this system till we all get used to how this works and how to get the maximum benefit of the new telephone system. The PPG will be liaising closely with the Practice to see how the system improves the service.

Practice Details

	<u>Badgerswood Surgery</u>	<u>Forest Surgery</u>
Address	Mill Lane Headley Bordon GU35 8LH	60 Forest Road Bordon Hampshire GU35 0BP
Telephone Number	01428 713511	01420 477111
Fax	01428 713812	01420 477749
Web site	www.bordondoctors.com	
G.P.s	Dr Anthony Leung Dr I Gregson Dr H Sherrell	Dr Charles Walters Dr F Mallick Dr L Clark Dr Laura Hems

Practice Team

Practice Manager Sue Hazeldine
Deputy Practice Manager Tina Hack
1 nurse practitioner
3 practice nurses
2 health care assistants (HCAs)

Opening hours	Mon	8.30 – 7.30
	Tues/Wed/Thurs	8.30 – 6.30
	Fri	7.30 – 6.30

Out-of-hours cover **Call 111**

Committee of the of the PPG

Chairman	David Lee
Vice-chairman	Sue Hazeldine
Secretary	Yvonne Parker-Smith
Treasurer	Ian Harper
Committee	Nigel Walker Heather Barrett Barbara Symonds Gerald Hudson Sarah Coombes

Contact Details of the PPG ppg@headleydoctors.com
ppg@bordondoctors.com

Also via forms available at the surgery reception desk

Looking for a venue for your function or group activity?

Lindford Village Hall

offers:

- large, light Main Hall with semi-sprung wood-block floor;
- a Committee Room ideal for small meetings: and
- a fully equipped kitchen.

Contact Derek Barr 01420 479486 to discuss bookin

Headley Voluntary Care
looking after people

Transport Helpline:
01428 717389

Headley Voluntary Care exists to encourage friendly good neighbourliness, putting those in need of help in touch with those able to give it.

Needing Help?
*Do you need help?
To get to the doctor,
dentist, opticians,
bank, church, shops, etc*

Volunteer Drivers
*Can you drive?
Have you time to spare?*

It costs nothing to belong to our group so if you **need help** or you can **give help** please contact our co-ordinator on 01428 717389

Headley Voluntary Care
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Last Update: 06 September 2015
Registered Charity No. 1060569



Bordon and Whitehill Voluntary Car Service

We take people in the Bordon and Whitehill community who do not have their own transport to Hospitals, local Surgeries, Dentists, etc. If you need help please call us.

Also, we are desperately in need of **co-ordinators** to help us take telephone calls from patients and arrange drivers. They do this at their own home. Can you help us?

Our telephone number is

01420 473636

Headley Pharmacy

Opening hours

Mon – Fri 0900 - 1800
Sat 0900 - noon

Tel: 01428 717593

Visit the new expanded pharmacy in Badgerswood Surgery

Chase Pharmacy

Opening hours

Mon – Fri 0900 – 1800

Tel: 01420 477714

The pharmacy at Forest Surgery, adjacent to Chase Hospital

Both pharmacies are open to all customers

for

**Prescription Dispensary
Over-the-counter medicines
Chemist shop
Resident pharmacist
Lipotrim weight-management Service**

**You don't need to be a patient of
Badgerswood or Forest Surgery to use either pharmacy**