



Abbey Notes

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Named GPs for patients 75 and over

AS part of a Government-led initiative, every patient aged 75 and over is required to have a named GP.

This is an administrative exercise and will not affect in any way your care or which GP you see.

So, by the end of July, the practice needs to make sure every patient aged 75 or over knows which GP at the Abbey is their named GP.

The Abbey doctors are currently going through a list of patients in this target aged group identifying ones they usually see. All patients who do not see a regular GP will be allocated one of the four GPs at the practice. This does not make any difference to which GP you choose to see at any time.

Practice manager, Debs Smith, said it would be really helpful if patients who have not been informed yet could telephone reception and ask for the name of their allocated GP.

Prescriptions to go paperless

FROM mid-July, a new way of sending out prescriptions to a pharmacy comes into operation at the Abbey Medical Centre.

When you get a prescription from the doctor or when you ask for a repeat prescription, it will, if you wish, be sent electronically to the pharmacy of your choice.

Patients can now nominate a pharmacy to which their prescriptions can be sent electronically for them to collect later.

For instance, if someone works outside Beeston they could ask for a prescription to be sent online to a pharmacy near to their workplace.



Dr Nicholas Browne

This system will be for all patients, whether they order prescriptions online or not. The patient does not need to have a computer.

At a recent meeting of the patient participation group, member Thelma Hembury asked if this would apply to all drugs, espe-

cially thinking of those only normally prescribed by hospital consultants.

Practice manager Debs Smith said it would cover most but not all drugs.

The new system goes online in July but Dr Nicholas Browne, who said this had been talked about for 15 years, said it was optional for patients. They could still have a paper prescription if they wished.

Member Jean Yarnell asked if it would cause problems when drug regimes are changed but Debs said amended prescriptions would be sent to a patient's chosen pharmacy, as usual.

Comings and goings

THERE are now two new employees to replace staff who have left the Abbey Medical Centre.

They are receptionist Wendy Credginton and medical secretary/receptionist Jan Raven.

We will tell you more about them in a future issue of Abbey Notes.

A farewell do was held for Dr Richard Rogers, who left the practice at the beginning of April after 10 years.

Didn't we do well?

WHEN it comes to getting a GP appointment in the quickest time, our area is doing well.

Nottingham West Clinical Commissioning Group, which covers 12 practices, including the Abbey Medical Centre, came fourth best out of 220 CCGs in a Sunday Times survey.

The news was welcomed at a recent meeting of the patient reference group for Nottingham West, where it was noted that Nottingham West was the best performing suburban CCG in the survey.



Who's who at surgery?

What is your name? Claire Mathews

What is your role at the Abbey medical Centre? Receptionist

How long have you worked there? Since March 2013

What do you like most about your work? The variety of work it offers.

What are the things that most annoy, irritate or just plain bug you? Everything is great at the moment

Welcome to new partner at Abbey

THE Abbey Medical Centre has a new partner.

Dr David Cavanagh, who joined the practice last year, became a partner on June 1, joining Dr Nicholas Browne and Dr Irena Jaram in the business.

He said: "I have loved settling into the practice, particularly the universally lovely staff and patients I have had the pleasure of working with."

Dr Cavanagh described the medical centre as a welcoming place committed to high standards of care with a good team.

He explained that being a partner, as opposed to a salaried GP, is a long-term commitment to invest time and resources in the development and



Dr David Cavanagh

management of the practice.

Generally a partner will be come more involved with the Clinical Commissioning Group and the wider health community.

A partner is also an owner of the business of the partnership and receives a self-employed income, rather than a salary.

Dr Cavanagh said: "Being a GP is always a vocation in any role, but being a partner will require a higher level still of application and involvement."

He will still be working three days a week at the surgery and continuing with his two days a week charity work with the homeless at the Hope Centre in Beeston Fields.