

# The Shaftesbury Circular

The Newsletter of The Shaftesbury Medical Centre

Issue No. 8

Autumn/Winter 2017



#### **Staff news**

Dana Leschian-Service Manager joined Shaftesbury Medical Centre in April 2016. Her responsibilities include day to day running of the services to ensure the best possible care for our patients.

Dana is supporting the Practice Manager Alpna Chavda to ensure we continue to provide an excellent service to our patients along with support to our reception team.

We have now a full team of four receptionists: Mrs Iffy Wagu, Mrs Tarlika Savani, Mrs Sheela Gondalia and Miss Mahvish Razzaq.

Mrs Margaret O'Grady joined the surgery in January 2017 and she is part of the Admin Team. Her main responsibilities are: summarising medical notes, sending referrals out and doing triage for the medical correspondence received and sending it to the GP for action, alongside general support and telephone enquiries.

Enhanced Nurse Practitioner help enhance patient's care

Tembe Mpofu is the Enhanced Nurse working at the Shaftesbury Medical Centre helping support some of the practice's most vulnerable patients.

Her work is focused on over 65s with one or more long-term conditions who frequently use health services and may have been admitted to hospital several times in a single year.

#### Dr Vibhu Kaushal (f) - Full Time in General Practice

She is currently working as a GP Registrar ST4 under the supervision of Dr Almona Musa

Dr Naazneen Kalla (f) - Part Time in General Practice and Part Time in Women's Health.

She is a ST2 Doctor working under the supervision of Dr Almona Musa.

## **Extension update**

We are pleased to announce that our ground floor extension has been successfully completed. More space has been crated including a second waiting room as part of the new extension. There are 2 more large clinical rooms downstairs, and 2 toilets: one is the patient's toilet, and the other one, the disables toilet, also allowing mother and baby changing facilities.

This means we now have a total of fours treatments rooms that are on the ground flour, working easier for those patients who are unable to manage the stairs. The nurse room was relocated downstairs as a result

of the extension.

The entire surgery's flooring has been replaced, which includes the consulting rooms and the common walk areas such as stairs and the waiting rooms.



# **Shaftesbury Medical Centre rated 'Good' by Care Quality Commission (COC)**

In December 2016, the practice was inspected by the Care Quality Commission who are responsible for regulating all health and social care

establishments in England. This was a very CareQuality intensive one day inspection. We were pleased to learn that the overall ratting we received COMMISSION was 'GOOD'. We received many positive comments about the practice and the work we do. The strong values and vision shared by all

staff to deliver effective care and treatment to our patients, the way we manage complaints, share effective learning and offer candour, how we work with multidisciplinary teams to understand and meet the range and complexity of patient's needs, how we involve our patients in the care they receive. We would like to thank the patients that provided their feedback on the day, and the members of the Patient Participation Group who were interviewed by the Inspectors.

# Harrow Referral Optimisation Pilot Service (ROPS)



We want everyone to get the best standard of service that we can offer.

This pilot service helps GPs and patients get to the right place every time once they've been referred by a GP.

The service will support – not override – decisions and choices made by GPs and patients.

The Harrow Electronic Referral Optimisation Service (HEROS) Pilot is a behind-thescenes process for receiving and processing non-urgent referrals from GPs to secondary care services such as hospitals and community services.

They are setting up a pilot service for 18 months to support patients and their GP get the right care in the right place every time patients are referred by GP.

As a patient, the service works mainly behind the scenes making sure that patients get the right care.

The patients should notice the following about the service:

- They will still be able to be treated at a venue of their choice.
- They will not have to explain their condition or symptoms over and over again because the information will be correctly recorded.
- They will be offered treatment at the venue which is the most convenient for them. This means that patients will save time, money and energy in travelling for treatment.

### **FLU SEASON IS HERE!**



That time of year is here and it is important that you get your flu vaccine early. Influenza is an acute viral infection which spreads easily from person to person. Vaccination is the most effective way to prevent infection.

### Getting an annual flu vaccine is the first and best way to protect yourself and your family from the flu.

The people most at risk are the over 65s, those with chronic respiratory disease such as asthma and chronic bronchitis, people with diabetes mellitus, those with an under active immune system and pregnant women.

Flu vaccination can reduce flu illnesses, doctors' visits, and missed work and school due to flu, as well as prevent flu-related hospitalizations.

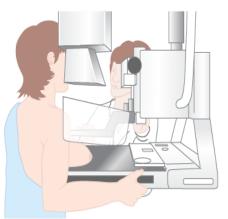
# **Patient Group Meeting**

The last Patient Group Meeting was held on the 19<sup>th</sup> of July 2017. We count on our patients group for improving patients care and patients services.

### **Breast Screening**

#### What is breast screening

Breast screening uses a test called mammography which involves taking x-rays of the breasts. Screening can help to find breast cancers early, when



they are too small to see or feel. These tiny breast cancers are usually easier to treat than larger ones.

Overall, the breast screening programme finds cancer in about 8 out of every 1,000 women having screening.

#### Who has breast screening

Each year more than 2 million women have breast cancer screening in the UK. The NHS Breast Screening Programme invites all women aged between 50 and 70 for screening every 3

years. You need to be registered with a GP to receive the invitation.

If you are younger than 50, your risk of breast cancer is generally very low. Mammograms are more difficult to read in younger women because their breast tissue is denser. So the patterns on the mammogram don't show up as well. There is little evidence to show that regular mammograms for women below the screening age would reduce deaths from breast cancer.

However regardless of age, if a breast lump is felt by a woman then please seek early and prompt advice from the GP and make an appointment to be assessed.