**TALBOT MEDICAL CENTRE**

**63 KINSON ROAD**

**BOURNEMOUTH**

**DORSET**

**BH10 4BX**

**Telephone: 01202 636400**

**Fax: 01202 636401**

[**www.talbotmedicalcentre.co.uk**](http://www.talbotmedicalcentre.co.uk)

May we take this opportunity to welcome you to our Practice, Talbot Medical Centre, which is an unlimited partnership. We have a long-established history in the area and have developed special ties with our locality and its academic establishment, Bournemouth University. We practice quality family and personal medicine, meeting the needs of all our patients as best we can. We constantly monitor the quality of Community and Hospital care provided by local Hospitals to provide patients with the best medical care. We co-operate with NHS England and the Dorset Clinical Commissioning Group to advance Primary Care, and our long-established patients will have observed the many improvements in the services we offer.

The intention of this booklet is to make patients aware of the services we provide, to help them use them as efficiently as possible and to offer advice for common complaints.

In particular, please read the sections on repeat prescriptions and home visits.

**The Partners**

Dr Martin Christopher Hughes BSc, MBBS, DRCOG,

MRCGP,

Reg 1983, St Georges, London

Dr Elizabeth Sara Craig MBBS, DRCOG, FP Cert,

Reg 1985, London

Dr Simon Thomas Flack BSc, MBBS, MRCP, MRCGP,

D Occ Med, FP Cert.

Reg 1987, London

Dr Rupert Jonathan Clay Turner MB,ChB, MRCP, MRCGP,DCH,

DRCOG, DFFP, D Occ Med

Reg 1993, Birmingham

Dr Richard James Lawson Holmes BM, BSc (Hons),

MRCP(UK), MRCGP, FP Cert.

Reg 1995, Southampton

Dr Susan Margaret Nixon MB ChB, MRCGP, DRCOG, DFFP, Cert Av Med

Reg 1991, Sheffield

Dr Rachel Anne Robinson BM, MRCGP, DRCOG, DFFP

Reg 2002, Southampton

Dr Thomas William Caudell BM, MRCGP

Reg 2003, Southampton

Dr Maya Peaty MBBS, DRCOG, DFFP, MRCGP

Reg 2001, London

**GP ASSISTANT:**

Dr Louise Parkin BM, MRCGP, DFFP

Reg 1996, Southampton

Dr Heather Sherwood MBBS,MRCP, MRCGP, DFSRH, Bsc(Hons)Psychology

In addition, temporarily attached to the Practice are up to 2 GP Registrars at any one time, who are fully qualified doctors. GP Registrars have worked for several years in Hospitals and are completing their training prior to becoming full-time General Practitioners. They provide care of the same standard provided by the other doctors at Talbot Medical Centre at all times.

**THE PRACTICE TEAM**

**Administration**

**PRACTICE MANAGER**

**Judith Young**  **MAMS** 37 hours per week

Acts in a strategic role, managing all business and financial matters within the Practice as well as the management and overview of all patient services, IT, clinical governance and the new GMS contract. Liaises with the CCG/LAT and provides a point of contact for outside agencies. Runs the Practice on a daily basis in liaison with Assistant Practice Manager.

**DEPUTY PRACTICE MANAGER**

**Sarah Faulkner** 37 hours per week

Is responsible for running the Surgery in conjunction with Practice Manager and acts as liaison between doctors and staff. As Personnel Officer, is responsible for recruiting new staff and ensuring that all Health & Safety Regulations are adhered to. Also responsible for all aspects of premises, patient complaints and advocacy. Is also the Carers Lead.

**RECEPTION/SECRETARIAL/ADMINISTRATIVE STAFF**

10 Receptionists

3 Secretaries

1 Personal Assistant to the Practice and Assistant Practice Manager

3 Administration

All our staff are here to **HELP YOU** and are pleased to do so. Supervised by the Assistant Practice Manager, the Receptionists are your link with the rest of the Practice. They may need to ask you medical details in order to work effectively and at all times are working under the instructions of the doctors. All information given to them is treated in confidence and they are bound by the same Codes of Conduct as the doctors and Nurses. The more information you are able to give to the staff, the better they will be able to assist you.

However, they have to cope with an extremely busy and demanding schedule. Please bear this in mind when using the service. Receptionists are not medically trained and should not be asked to give medical advice.

**The Nursing Team**

**Practice Nurses**

Janice Horgan RGN, RM, Dip HSW

Jane Campbell RGN

Alexandra Barrett RGN

Michelle Jupp RGN

**The Nurses are responsible for:**

New patient medicals, baby immunisations, travel advice and immunisations, cervical smears, wound dressing, removal of sutures, routine injections, hearing tests, advice on childhood rashes and minor infections, general treatment of minor injuries, ECG tests, ‘flu vaccinations (October/November), ear syringing, weight management, blood pressure checks, asthma and diabetes, smoking, alcohol and lifestyle advice, routine repeat contraception examinations and Well Person checks.

Consultations are by appointment only on 01202 636400.

**District Nurses (rotated on a 2 monthly basis with one other Practice)**

Based at Cunningham Crescent West Howe Bournemouth

Anne-Marie O’Sullivan RGN

Emily Scammell RN

Sonia Gale RN

Carolyn House RN

Beth Hope-Cleverly RN

Jane Bottwood RN

Vanessa Ward HCA

The District Nurses provide home nursing for patients who, because of the nature or severity of their illness, are housebound. They nurse chronically and acutely ill patients, those who require post-operative nursing or those who are terminally ill.

The District Nurses may be contacted by telephone weekdays on (01202) 247777 from 8:30am-9:00am and 12:30pm-1:00pm. At other times an answering machine is available for messages.

**Attached Health Visitors & Nursery Nurses**

Nicola Price-Jones RGN, HV Cert

Michele Ashling RGN, HV Cert

Leila Tanswell RGN, HV Cert

Michelle Dixon Nursery Nurse

Emmaline Godfrey Nursery Nurse

Carol Moyes Health Visitor Assistant

Emma Mesher Health Visitor Assistant

The Health Visitors can offer advice on health care to all ages, but in particular to expectant mothers, small children, the elderly and the handicapped. The Health Visitors can be contacted by telephone on weekdays on (01202) 458065. If unavailable, an answering machine is available for messages. The Health Visitors are now based at, Bournemouth Learning Centre, Ensbury Park Bournemouth.

**Smoking Cessation Adviser**

Lynne Morphy HCA 2 hours per week

She is responsible for the Smoking Cessation Programme within the Practice and holds clinics for patients in the late afternoon.

**Phlebotomist/Health Care Assistant**

**Maria Eaton** Certificate of Competence, NVQ level 3

**Lynne Morphy** NVQ Level 3

**Samantha Locke**

Maria, Lynne and Samantha work as Health Care Assistants in the Practice providing patient care, including phlebotomy.

**The Community Midwife**

The Community Midwife offers women advice on pregnancy and runs antenatal clinics in conjunction with the doctors. She holds parent craft, relaxation classes and will offer advice on breast feeding as well as all other aspects of postnatal care at home. Partners are encouraged and welcomed at all times. Consultation by appointment only.

**Training**

Senior Medical Students, Nursing Students and Health Visitor Students are often attached to the Practice. They are always closely supervised and will be clearly identified to you as students. You have the right to decline to be treated in the presence of a student. Nevertheless your co-operation in enhancing their training would be greatly appreciated.

The Practice is committed to improving medical education at all levels. Dr Turner, Dr Hughes and Dr. Nixon are GP trainers.

All members of the Practice have ongoing training and attend courses and lectures.

**HOW DO I REGISTER WITH THE PRACTICE?**

Please bring your medical card which the receptionist can help you complete. If you do not possess a medical card ask at Reception for an application form (GMS1). If you would like to meet the doctor before registering please make an appointment. We do not discriminate on the grounds of race, gender, social class, age, religion, sexual orientation or appearance, disability or medical condition. We do ask, however, that the applicant lives within the Practice boundary – see back page.

If you have your previous medical card, please use this to register with the Practice. If not, in order to complete the registration process, we need to see some personal ID. To this end, we would be grateful if could provide two forms of evidence from the following list, one of which must include your current or past address.

• Passport

• Full Driver’s licence

• Birth Certificate

• Marriage Certificate

• Current Benefit book/card

• Current local council rent card

• Utility bill, e.g. gas, electric, water, telephone –not mobile, not more than 3 months’ old

• Bank or building society account statement – not more than 3 months’ old

• Bank or building society passbook

If you have any difficulties providing this evidence, please let us know.

Children of the family under 18 need not supply evidence and can be registered by the parent/guardian

**New Patients** will be asked to complete a **personal health** **questionnaire** and to **make an appointment with the Practice Nurse for a New Patient Health Check**. If you have a complicated medical history or take regular medication please make an additional appointment with the doctor after your New Patient Health Check.

Visitors/Holiday makers are registered on a special form – known as a temporary resident form - provided at Reception. Foreign visitors may be treated as private patients - please see overseas visitors guidelines at <http://www.dh.gov.uk/en/Healthcare/Entitlementsandcharges/OverseasVisitors/Browsable/DH_074373>

You will be registering with the Practice and can therefore see any of the doctors in the Practice. However, it is preferable to remain with the same doctor for the duration of treatment of a particular illness and you may select a “preferred doctor” when you register by requesting registration with this particular doctor. When booking an appointment, you should request this particular doctor and we will endeavour to book you in with this doctor, although they may be occasions when this is not possible due to leave.

Should you have any difficulty obtaining primary medical care services you should contact the Registration team on 0300 311 2233

**Change of Personal Details**

If you change your name, address or telephone number please notify the Surgery immediately. If you fail to do so you may be removed from our list. Please note that it is your responsibility to ensure that your records are up to date to ensure that letters/texts are sent to the correct address/mobile number.

**Private Patients/Foreign Visitors**

Foreign visitors may be treated as private patients. Please enquire at the reception desk for the current fee scale. Payment will be due at the time of service. Visitors from certain countries may be entitled to NHS treatment as Temporary Residents. Please ask the Practice Manager for details.

**TELEPHONE SYSTEM Tel: 01202 636400**

The practice uses Daisy Surgery Line as the supplier of their telephone system so that we can offer an improved service to our patients.  Historically this was through use of an 0844 number.  However, through patient requests and at the behest of NHS England, the Practice is now offering the use of an 01202 number.  We will continue to run the 0844 number for another 18 months until the contract runs out to ensure that patients who do not attend the surgery or use the website and are unaware of the geographical number are able to get hold of the Practice.  All patients phoning on the 0844 number will be given details of the new 01202 number.

This has resulted in some of the features of the phone system no longer being available such as queuing – as a consequence, patients will now hear the engaged/busy tone when high volumes of calls are being received.  In this instance, patients will need to re-dial at a less busy time.

Please be aware that for training, quality and safety purposes calls to and from the surgery may be recorded.

All information is stored and used in accordance with Data protection and Caldicott regulation

**Talbot Medical Centre Surgery Timetable**

**Surgery is Open from 8.00am to 6.30pm Monday, Wednesday and Friday**

**and 8.00am to 8.00pm Tuesday and Thursday**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **DOCTOR** | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** |
| **Dr Craig** |  | 9.00am-11.30am  3.00pm-5.30pm |  |  | 3.00pm-5.30pm |
| **\*Dr Hughes** | 9.00am – 11.30am | 3.00pm-5.30pm | 9.00am-11.30am  3.00pm-5.30pm | 9.00am-11.30am |  |
| **Dr Caudell** |  | \*\*9.00am-  11.30am (alt weeks)  3.00pm-5.30pm | 9.00am-11.30am  3.00pm – 5.30pm | 9.00am-11.30am  3.00pm-5.30pm | 9.00am-11.30am |
| **Dr**  **Robinson** | 9.00am – 11.30am  3.00pm-5.30pm | 9.00am – 11.30am |  | 9.00am-11.30am  3.00pm-5.30pm |  |
| **Dr Flack** | 3.00pm-5.30pm | \*\*9.00am-  11.30am (alt weeks)  5.30pm-8.00pm (alt weeks) | 9.00am – 11.30am  3.00pm-5.30pm |  | 9.00am – 11.30am  3.10pm-5.30pm |
| **\*Dr Turner** | 8.30am-11.10am  3.00pm-3.40pm | 9.00am-11.30am |  |  | 9.00am – 11.30am  3.00pm-5.30pm |
| **Dr Holmes** |  | 3.00pm-  5.30pm | 9.00am-11.30am  3.00pm-  5.30pm | 9.00am-11.30am  3.00pm-5.30pm | 9.00am-  11.30am  3.00pm-5.30pm |
| **\*Dr Nixon** | 9.00am-11.30am  3.00pm-5.30pm | 9.00am-11.30am  3.00pm-5.30pm  (diabetic clinic) |  | 3.00pm-5.30pm |  |
| **Dr Parkin** | 9.00am-11.30am  3.00pm-  5.30pm |  | 9.00am-11.30am |  |  |
| **Dr Peaty** |  | 9.00am – 11.30am  3.00pm-5.30pm |  | 3.00pm-5.30pm | 9.00am – 11.30am  3.00pm-5.30pm |
| **Dr Sherwood** | 9.00am – 11.30am  3.00pm-5.30pm |  | 3.00pm-5.30pm | 9.00am – 11.30am |  |

\*N.B. Dr Hughes, Dr Turner and Dr. Nixon are all GP Trainers and therefore their timetables may vary.

All Clinics are subject to change without prior notice.

\*\* Alternate weeks carry out Minor Surgery.

Doctors also work one session per week at our branch site at Bournemouth University, which is not shown on the table above.

All doctors offer late appointments until 8.00pm every other week on Tuesdays and Thursdays, which will be offered to patients by the doctor as required.

The sessions are held at the following times:

Tuesday and Thursday evenings from 18:30 to 20:00 (not Bank Holidays).

Home visits and urgent health problems will continue to be dealt with by the Out of Hours Service, whose telephone number is 111

**HOW DO I SEE MY DOCTOR?**

Monday – Friday

1. Call us on the main Surgery telephone number and ask to make an appointment with the doctor.
2. The receptionist will ask you for your name and details. If you need to speak to a doctor urgently, because it is an emergency, tell the receptionist straight away.
3. The receptionist will ask you to say generally what your health problem is. You **don’t** have to tell the receptionist if you do not wish to do so. If you can, it helps the doctor during his consultation with you
4. If you want to see a specific doctor, tell the receptionist. Wherever possible, they will arrange it.

The Surgery times and doctor availability are varied during the week between 8:30‑11:30 and 15:00-17:30.

**Bournemouth University – for University Students only:**

Talbot House, Fern Barrow, Poole, Dorset, BH12 5BF

Telephone: (01202) 965378

Surgeries are run during term-time from:

**09:00 – 17:00 Monday to Friday**

**HOW DO I SEE THE NURSE?**

Monday – Friday

Please make an appointment either in person at the reception desk or by telephoning 01202 636400 between 8:00am and 6.30pm. The Practice Nurses run treatment room Surgeries based on 10-minute appointments but you may require a double appointment for some procedures. Please let the Receptionist know the reason for your appointment when booking. They also run special clinics, such as diabetes, freezing etc and you may be asked to attend one of these. They also offer appointments until 7.30pm on a Tuesday and a Thursday.

**WHAT IF I NEED THE DOCTOR URGENTLY?**

Telephone 01202 636400 at any time and you will be dealt with by the doctor’s Receptionist or by the on-call doctor himself.

**WHAT IF I JUST NEED HEALTH ADVICE AND REASSURANCE?**

You can contact **NHS 111** for 24-hour confidential telephone advice. Their trained Nurses can provide you with expert health advice and reassurance any time of the day or night. Alternatively contact the website [**www.nhsdirect.nhs.uk**](http://www.nhsdirect.nhs.uk)A booklet containing details of the service can be obtained from the Surgery.

**WHEN THE SURGERY IS CLOSED:**

If you are unwell in the evening, overnight or at the weekend:

Contact the NHS **111.** This service is for urgent medical situations - if you or a member of your family become ill and you are concerned. It is not for routine enquiries, such as booking an appointment with your GP, repeat prescriptions, test results, etc.

When you ring 111, a trained member of staff will answer the telephone and take some details from you. They will pass your details straight over to a doctor or Nurse who will ring you back to ask you more about the problem and, in conjunction with you, will decide the best option for treatment. Depending on the seriousness of your condition this might be:

* Advice over the telephone
* A visit to the local Treatment Centre
* A home visit by a Nurse, doctor or paramedic.

Your local paper will have details of Pharmacies open late on weekdays and on Saturdays, Sundays and Bank Holidays.

**Boscombe & Springbourne Health Centre:**

As from 1 July 2009 a walk-in centre opened running out of Boscombe and Springbourne Health Centre, which provides increased access to GP medical services The Centre is available for urgent walk-in appointments **during the weekend only.** It is based in Palmerston Road and the telephone number is 01202 720174 and is open 8.00am until 8.00pm, Our patients are welcome to attend the urgent walk-in service during “out of hours” when the Surgery itself is not open if they feel that they need to be seen urgently, but not necessarily in the A&E Department at the local hospital.

**Important**

For **EMERGENCIES** you should continue to attend the Accident & Emergency Department of your local Hospital or dial 999. (**An emergency is a critical or life-threatening situation and includes things like** **chest pain or suspected heart attack, head injury, severe loss of blood, severe breathing difficulties, loss of consciousness, deep wounds, suspected broken bones**).

**WHEN SHOULD I CALL AN AMBULANCE OR GO STRAIGHT TO HOSPITAL?**

Chest pain where a heart attack is suspected is a reason to call 999. In addition discovery of any unconscious person with no pulse or a patient who has severe difficulty with breathing. Severe injuries (including suspected fractures or suturing) need to be seen at Hospital.

**HOW DO I REQUEST A HOME VISIT? Telephone: 01202 636400**

Please remember that home visiting is very time-consuming for the doctor. Up to 12 patients can be seen in Surgery during the time the doctor can visit 2 or 3 patients.  **Home visits are therefore only advisable when the medical condition of the ill person is such that attendance at the Surgery is NOT possible.** When the medical condition does not prevent travel please make every effort to attend the Surgery. The doctors organise their work and allocate their visits at 11:30. Please call before then to request a visit and the doctor will call you back to arrange this. Late calls all go to a Duty Doctor who will be starting an Emergency Surgery at 15:00. Late requests for visits can thus compromise the service and lead to delay. Visits are usually performed between 12:30 and 15:00.

**IS IT POSSIBLE TO SPEAK TO THE DOCTOR BY TELEPHONE?**

Yes, you can telephone our enquiries/visits line on 01202 636400 to speak to the doctor during our normal opening hours, 08:30–13:00 and 14:00–18:30. Emergencies will be connected through to the Emergency Doctor of the day where appropriate. However, for routine matters we would ask that you do not telephone to speak to the doctor during Surgery as this interferes with the continuity of a consultation. Your doctor will be able to speak to you after Surgery - for example, 11:30-12:30 and 17:45–18:15, dependent upon the doctor’s timetable. The doctor will return your call at the end of Surgery if he is unable to speak to you in between times.

**IS IT POSSIBLE TO SPEAK TO THE NURSE BY TELEPHONE?**

Yes, you can telephone 01202 636400 from 09:00am–13:00 and 14:00–18:00. You may be able to speak to the Nurse when you call, but if she is in the middle of a consultation you may be asked to ring back or she will return your call when she is available.

**HOW DO I GET MY RESULTS?**

Whilst you may telephone for the results of tests on 01202 636400 at any time, **PLEASE NOTE** the Surgery tends to be at it’s quietest after 14.00 when the receptionist will have more time to deal with your enquiry. Checking results is time–consuming and requests at other times may result in you being asked to call back after 14.00.

1. Results will only be given to the specific patient to whom they apply. In the interest of confidentiality please be prepared to identify yourself. Please do not telephone for results for friends/relatives without prior arrangement (written consent may be required).

2. You will need to know the specific test results that you require. Some tests take longer than others to process. If you have had several tests the receptionist will not necessarily know whether all the results are back unless you can identify them.

3. Please do not expect the receptionists to have any medical knowledge. They are only instructed to tell you if your test is normal. If any test is abnormal or you require further discussion or interpretation then please refer to your doctor.

4. Occasionally the Surgery may contact you by telephone/text or letter (e.g. with a prescription to treat a result like “a water infection”). Therefore, please keep us up to date with your contact details. Thank you.

Please remember that we do hundreds of tests and we cannot contact you all with your results, so we leave this responsibility with you. We do however ensure that all test results are seen by a doctor.

**WHAT ABOUT REPEAT PRESCRIPTIONS?**

All repeat prescriptions will be dealt with within 48 hours of request.

If your doctor agrees, you may obtain repeat prescriptions without seeing your doctor by placing your repeat request form in the box provided in the lobby. Please ensure you have ticked your requirements.

If you are unable to come to the Surgery then please send your request by post, enclosing a stamped addressed envelope. This may take longer so allow more time. If you are housebound you may be able organise with the Chemist to have your drugs delivered.

Unfortunately requests for prescriptions cannot be taken over the telephone due the risk of errors occurring and, in addition, as this may block the telephone for urgent calls. If you receive regular repeat prescriptions your doctor will ask you to make an appointment from time to time to monitor your medication.

We recycle thousands of prescriptions per year. We rely on a system to ensure efficient processing. Requests on hand written paper or for non-agreed medications may cause delay. If you have a regular prescription (e.g. an inhaler from a regular Chemist, in an emergency the Chemist may supply this if the Surgery is closed).

We also now offer the facility for patients to order their prescriptions on line. Simply log into our website at [www.talbotmedicalcentre.co.uk](http://www.talbotmedicalcentre.co.uk) and select Repeat Prescriptions icon on the front page. You will need to request a user name and password from the practice to enable access to the system. This is generated by our Practice computer system and can be amended by you. This is the same username and password for accessing on line appointment booking.

**QUERIES ABOUT THE NHS CARE RECORDS SERVICE**

The NHS is creating Summary Care Record for you, which can be used by NHS clinicians treating you, in emergency and in out-of-hours care situations. The Summary Care Record will hold basic health information about you and only staff involved in your care will be permitted to access that information, controlled by strict security measures. You will also be able to access your Summary Care Record via registration with a secure website called Healthspace.

In practice this means that, for example, if you are away from home in England and need medical attention, or you are taken to the Emergency Department of your local hospital, a healthcare professional will be able to view your Summary Care Record, subject to your permission at the point of care, unless you are unable to communicate your wishes at the point of care.

The type of information that could be included in your Summary Care Record

Details of allergies, recent prescriptions and previous bad reactions to medicines will be in your Summary Care Record, along with important information on any problems or long-term conditions you may have, including:

• significant illnesses and health problems from the past, such as a heart attack;

• illnesses that you take regular medication for, such as asthma or diabetes.

Further types of information that may be added in the future are:

• important test results and immunisations;

• information you might have given your GP about how you want to be treated in an emergency, such as not wanting a blood transfusion.

More details about the Summary Care Record can also be found by visiting [www.nhscarerecords.nhs.uk](http://www.nhscarerecords.nhs.uk).

**SHARING YOUR DATA – PLEASE READ CAREFULLY**

1. Care Data

NHS England would like to link information from all the different places where you receive care, such as your GP, hospital and community service, to help them provide a full picture. This will allow them to compare the care you received in one area against the care you received in another, so they can see what has worked best.

The Health and Social Care Information Centre (HSCIC) will carry out the extractions and information such as your postcode and NHS number, but not your name, will be used to link your records in a secure system, so your identity is protected. Information which does not reveal your identity can then be used by others, such as researchers and those planning health services, to make sure we provide the best care possible for everyone.

Under the powers of the Health and Social Care Act 2012(HCSA) all patients will be ‘opted in’ to this scheme unless they let their surgery know that they wish to opt out. Opting out can be done on one of two levels

Level 1. Opting out of all data extractions from your surgery. In this case none of your data will be allowed to be extracted from your record or leave the Surgery

Level 2. Opting out of allowing information to leave the HSCIC. In this case data may be extracted by the HSCIC but will not be then made available to any third parties.

More information can be found at [www.nhs.uk/caredata](http://www.nhs.uk/caredata).

If your choice is to remain opted in to Care.Data you do not need to do anything as all patients are opted in as a default position

If your choice is to opt out of the Care.Data Programme at Level 1 (XaZ89), please tick here

If your choice is to opt out of the Care.Data Programme at Level 2 (XaaVL), please tick here

2. Summary Care Record

A few years ago NHS England introduced the Summary Care Record. This record contains important information about any medicines you are taking, allergies you suffer from and any bad reactions to medicines that you have had. Giving healthcare staff access to this information can prevent mistakes being made when caring for you in an emergency or when your GP practice is closed. Your Summary Care Record will also include your name, address, date of birth and your unique NHS Number to help identify you correctly. You may want to add other details about your care to your Summary Care Record. This will only happen if you ask for the information to be included. You should discuss your wishes with the healthcare staff treating you. Your Summary Care Record can only be accessed where there is a genuine need and all access needs to be recorded.

If your choice is to remain opted in to having a Summary Care Record you do not need to do anything as all patients were opted in as a default position.

If your choice is to opt out of having a Summary Care Record (XaXj6), please tick here

3. Enhanced Sharing

Within the clinical system we use (SystmOne), there is the option to allow information to be accessible to other users of the same clinical system. For patients with complex care needs this means that, for instance, GP’s can see information that other healthcare consultants have entered (if they have indicated that they would like to ‘Share Out’) and, other healthcare consultants could, if patients have expressly consented to this, see their GP record if they have set their record to ‘Share In’. Unless you have previously requested a change to your settings, our default position have is to automatically ‘Share in’ data, so that we can see information from other healthcare consultants (e.g.walk-in centre consultations and District Nurses) but not to ‘Share out’ unless a pt specifically expresses this. Healthcare providers, including GP’s must get the express consent of the patient before any record is ‘Shared out’

If your choice is to remain opted in to ‘Sharing in’ information to your record but not to have your GP records ‘Shared out’ you do not need to do anything as this is our default position

If your choice is to opt out of ‘Sharing in’ to your record from other health consultants (XaQVo) please tick here

(This would disallow GP’s to see information added by other Healthcare consultants who have consented to ‘Sharing out’)

If your choice is to Opt in to ‘Sharing Out’ from your GP record (XaMds) please tick here

(This will allows other Healthcare consultants who you have consented ‘Share in’ using the same clinical system to be able to see your GP record)

**Are you caring for someone who has a long term health condition?**

If so, please let us know. We may be able to give you important help and advice. It will be helpful for the doctor to know that you are a carer as it may affect your own health and treatment. Please ask at Reception for a Carers Registration Form.

This Practice has a lead worker for carers, Mrs. Sarah Faulkner. Please ask if you would like to talk to our Carers Lead.

When you tell us that you are caring for someone we will place your details on our Carer’s Register so that practice staff are aware you are a carer. We will not share this knowledge with anyone else unless you tell us that we can. We may be able to offer you other services to help you care for your own health.

We will try to help you if your caring responsibilities mean that you have difficulties attending appointments.

If you are giving regular and substantial help to the person that you care for, you will be entitled to a Social Services Carers Assessment. The Assessment gives you advice and information.

You and the person that you care for may be entitled to practical help and support. Contact the Social Services Department where the cared for person lives to ask for an assessment. This is a free service.

If the cared for person lives in Poole contact:

01202 633902 Social Services Help desk

If the cared for person lives in Bournemouth contact:

01202 454979 Care Direct

Free, local confidential advice for carers contact:

Help and Care Carerslink 0845 4500 418

Benefits advice for Carers/ Cared for person:-

Aged 60+ 0800 991234

Under 60 0800 055 6688

**Dental Emergencies:**

The Dental Urgent Care Service is contactable on 0845 7010401 and is contactable from 6.30pm – 9.00am Monday – Friday and all through the weekend and on Bank Holidays.  They triage patients, so you may be told to take pain relief/go to their Dentist during the week but urgent cases will be seen at one of the Community Clinics.

The Dental Helpline is contactable on 01202 854443 and is open 9.00 – 5.30pm Monday – Friday.  The Helpline can advise patients who are looking for an NHS Dentist in Bournemouth/Poole or Dorset.

**WHAT SERVICES DOES THE PRACTICE OFFER?**

**Contraception/Family Planning**

Our doctors - female and male - are family-planning trained, as are our Nurses. We respect confidentiality and tailor the method to meet your individual needs.

Most routine contraceptive care can be provided for in the Nurses’ or the doctors’ appointment system. The guide below will help you choose the suitable professional and the appropriate appointment:

**The Doctor** (routine appointment)

1. A definite desire to use a hormonal contraceptive for the first time.
2. Minor problems with a prescribed pill; query a pill change needed.
3. A consultation to decide on change of method i.e. an injection, a progesterone pill, Coil (IUCD) etc.
4. Emergency contraception (see page 14).

**The Nurse**

1. A general chat about contraception for background information – book an appointment with the Practice Nurse.
2. A routine pill check and prescription i.e. no problems. Book an appointment with the Practice Nurse for 10 minutes.
3. Emergency Contraception (the morning after pill).
4. Advice re barrier methods - cap/condoms.

**The Family Planning Clinic**

Where the doctor and Nurse work together for:

A Coil (IUCD) fit

An Nexaplon insertion (contraceptive implant).

**YOUNG ADULTS/TEENAGERS**

We appreciate your special needs at this challenging time of life. Conversations and decisions are **CONFIDENTIAL.** Please discuss your needs with the doctor or Nurse as you feel able. Remember we have female doctors available.

**Emergency Contraception**

Sometimes couples risk pregnancy without adequate precautions. Remember that we can offer you Emergency Contraception after exposure for up to 72 hours after the event and sometimes even longer if using the Coil (IUCD). Please seek advice from the doctor or Nurse as soon as possible.

**Unwanted Pregnancy**

Unfortunately sometimes pregnancy occurs under less than perfect circumstances. Please discuss your situation with us in strictest confidence as soon as you realise you are pregnant.

Alternative services of information include:

*BPAS and Family Planning Clinic. Telephone numbers are in the Yellow Pages.*

**Pregnancy & Maternity Care**

Our Practice has a long history of providing first class maternity care. We can offer a full range of services to meet your requirements. The doctor and Midwife usually share your care. Please make a 10-minute appointment with the doctor, either when pregnant or in advance, to discuss your care.

Remember that the Department of Health recommends that you supplement your diet with folic acid tablets - please seek the Chemist’s advice - **PRIOR TO CONCEPTION AND “WHILST TRYING”.** We also have a pre-conception protocol.

**Hormone Replacement Therapy**

Once established on Hormone Replacement Therapy you will be asked to make your next routine appointment with the Nurse. She will ensure that you are kept up to date with cervical smears and breast examinations/mammography. You will see the Nurse every 12 months and the doctor every 2 years. Please seek earlier attendance if you have any concerns. After 5 years of use, discuss with the doctor.

**Cervical Smear Programme**

Our Nurses do most of the routine smears for routine follow up. We co-operate with the Dorset Screening Service and offer 3-yearly appointments. We recommend cervical smears for all women (who have ever been sexually active) from the age of 25 years.

**Blood Pressure Monitoring**

The doctors carry out Blood Pressure monitoring in conjunction with the Nursing team. At your appointment, you will have all the tests performed for which you would normally have to make separate appointments and this ensures that everyone on blood pressure treatment will have an annual blood test, which is important.

**Diabetic Clinic**

We offer high quality diabetic care for all our patients. Regular follow-up is important; we recommend at least twice per year for a medical check-up; once in our doctor-led special Diabetic Clinic and once in the nurse-led clinic. This check-up will include an examination of your feet to assess your circulation and nerve responses. Remember, an annual eye check with an optician and an annual check up with a chiropodist is also essential. Please make appointments for the Diabetic Clinic in reception. We usually suggest a blood test a week before attendance so that the results can be available at your appointment. Please remember to bring a urine specimen with you when you attend.

**Childhood Immunisations**

We strongly recommend the Department of Health Immunisation Programme, and our belief in its safety means all our own families have been immunised - trouble free. Your child will be offered an appointment for the regular immunisations issued by the Health Authority. The Practice prides itself on the high uptake of this excellent service, but if you should have any worries or concerns please discuss these with a Health Visitor, doctor or Nurse.

**Immunisations:** We believe it is essential for all children to be fully protected from certain diseases. Our immunisation schedule is:

|  |  |  |
| --- | --- | --- |
| **When to Immunise** | **Diseases Protected Against** | **Vaccine Given** |
| **2 Months Old** | Diphtheria, tetanus, pertusis (whooping cough), polio & Haemophilus influenzae type b (Hib), Pneumococcal infection & childhood gastroenteritis | DTaP/IPV/Hib  + PCV  Rotavirus (orally) |
| **3 Months Old** | Diphtheria, tetanus, pertussis, polio & Haemophyilus influenzae type b (Hib), Meningitis C & childhood gastroenteritis | DTaP/IPV/Hib  + Men C  Rotavirus (orally) |
| **4 Months Old** | Diphtheria, tetanus, pertussis, polio & Haemophilus influenzae type b (Hib), Pneumococcal infection | DTaP/IPV/Hib  + PCV |
| **12 – 13 Months** | Haemophilus influenzae typ b (Hib), Meningits C  Measles, mumps & rubella, Pneumococcal infection | Hib/Men C  MMR + PCV |
| **3 Years 4 Months** | Diphtheria, tetanus, pertussis & polio  Measles, mumps & rubella | DTaP/IPV or dTaP/IPV  + MMR |

**Well Baby Clinic**

Please contact the Health Visitors for dates and timings.

**Parent and Relaxation Clinics**

These are organised through your Midwife.

**Child Health Checks**

The doctor will examine your baby at the 8 week check. The Health Visitor or Community Nursery Nurse will monitor your child’s progress at 10 days, 4 month, 8 months and 2 years of age. This is an opportunity to discuss your child’s development and progress with a professional and to consider any worries you may have regarding your child’s development and/or examination.

You will be contacted at the appropriate time to arrange a suitable appointment.

**New Patient Medicals**

As a new patient joining a Practice it is beneficial to you and helpful to us, if you make an appointment to have a health interview and basic examination with our Nurse.

**Travel Advice/Adult Immunisations**

Our Nurses are up to date and well informed on this subject. Please make an appointment with the nurse 3-4 months prior to travel where possible and complete a travel questionnaire to ensure that your full immunization programme can be completed before you leave the country, otherwise you may not be fully protected.

**Yellow Fever Vaccinations**

Talbot Medical Centre is an authorised Yellow Fever Vaccination Centre and there is a charge for yellow fever vaccinations as these cannot be done on the NHS.

**Diet & Exercise**

Please discuss with the Nurse.

**Minor Surgery**

We have excellent facilities for the provision of Minor Surgery within the Practice. This service covers the removal of minor skin blemishes, lumps/bumps, papillomas, tags etc. We also remove in-growing toenails. Please see your doctor.

**Asthma**

We offer high quality asthma care for all our patients. This is a common condition of variable severity affecting nearly 900 of our patients. We recommend that your condition is reviewed annually by the Nurse to discuss progress and treatment. More severely affected patients will require intensive follow-up - please discuss with the doctor/Nurse.

**COPD Clinic**

This clinic is run by Lynne Morphy, HCA, to ensure that our COPD patients have regular monitoring, spirometry and medication reviews as appropriate.

**Arthritis/Back Pain**

We have extensive expertise in this field and both conditions are extremely common. The doctors will advise appropriate self help, self physiotherapy and medication after an interview and examination. Treatment includes simple drugs, stronger drugs, physiotherapy, chiropractic treatment and in some cases, injections.

**Special Facilities Available at the Surgery**

**For Disabled Patients:** Automatic doors at the rear main entrance

Ground floor consulting rooms

A ground floor WC with special fitments and adequate access

A call bell at the Surgery front entrance

Hearing aid fixed loop on the reception desk and a portable hearing aid loop for use in consultations

Ramp for disabled access from fire exit door.

**Baby Changing**

A baby changing unit is provided in the larger WC designed for disabled patients. Please use the nappy wrapper provided for soiled items.

**Looking After Yourself**

We all know that looking after yourself is probably the most important aspect of health care. Taking regular exercise, eating a healthy diet, avoiding cigarettes, excess alcohol and preventing obesity are all very important.

**Patients Aged 75+**

Patients over 75 can ask for an annual check-up. These may not be needed, particularly if they are being seen routinely by their GP. However, if they require a health check they may be seen by one of the Community Nurses at home, by one of the other Nurses in the Surgery or by one of our Health Visiting Team either at home or in the Surgery.

**Women: 25 – 65**

All women are recommended strongly to have a cervical smear test 3-yearly. This may be carried out by the doctor or the Practice Nurse.

Mammography – for all women between 50 - 65 years. Where appropriate, you will be offered routine screening every 3 years as part of the National Breast Screening Programme.

**All Adults**

Research has demonstrated that “routine general health screening” is of very limited value so we do not recall patients for (or offer) routine checks. We will however make opportunistic checks of your blood pressure etc as part of your normal health examinations. Well Person Screening/Checks are carried out by the Practice Nurse. In addition we offer the following health tips (with proviso that you should not make life miserable through trying to be healthy!).

**Smoking**

We strongly advise our patients to avoid smoking but we do not in any way discriminate against smokers. If you need help to stop smoking then please discuss this with your doctor, Nurse or Health Visitor who will give you more details regarding Smokestop Clinics and available help. Alternatively, contact Judy, our Smokestop Adviser on the main Surgery number.

**Alcohol**

The current recommended maximum “healthy” intake of alcohol is 21 units/week for a man and 14 units/week for a woman. (1 unit = pint beer, 1 glass of wine or 1 single measure of spirits).

**Exercise**

We advise exercise sufficient to cause mild breathlessness for 20 minutes, 3 times a week

**Diet**

Avoid crash diets. Instead try to develop a healthy eating pattern that avoids weight gain, is high in fibre, low in sugars and animal fats.

**REFERRALS FOR TREATMENT OUTSIDE OF THE SURGERY**

When we refer patients to other services outside of the Practice, the referral is administered by the local NHS in a Referral Management Centre. The Referral Management Centre is responsible for allocating the referral to other services and normally sees full information about the referral, including any confidential information.

If your GP is referring you to other services and you feel there is any information you wish to withhold from the Referral Management Centre, please inform your GP as soon as possible during normal working hours.

If you experience any problems with the Referral Management Centre or wish to discuss its role further, please contact the Patient Advice and Liaison Service (PALS) on (01202) 318954.

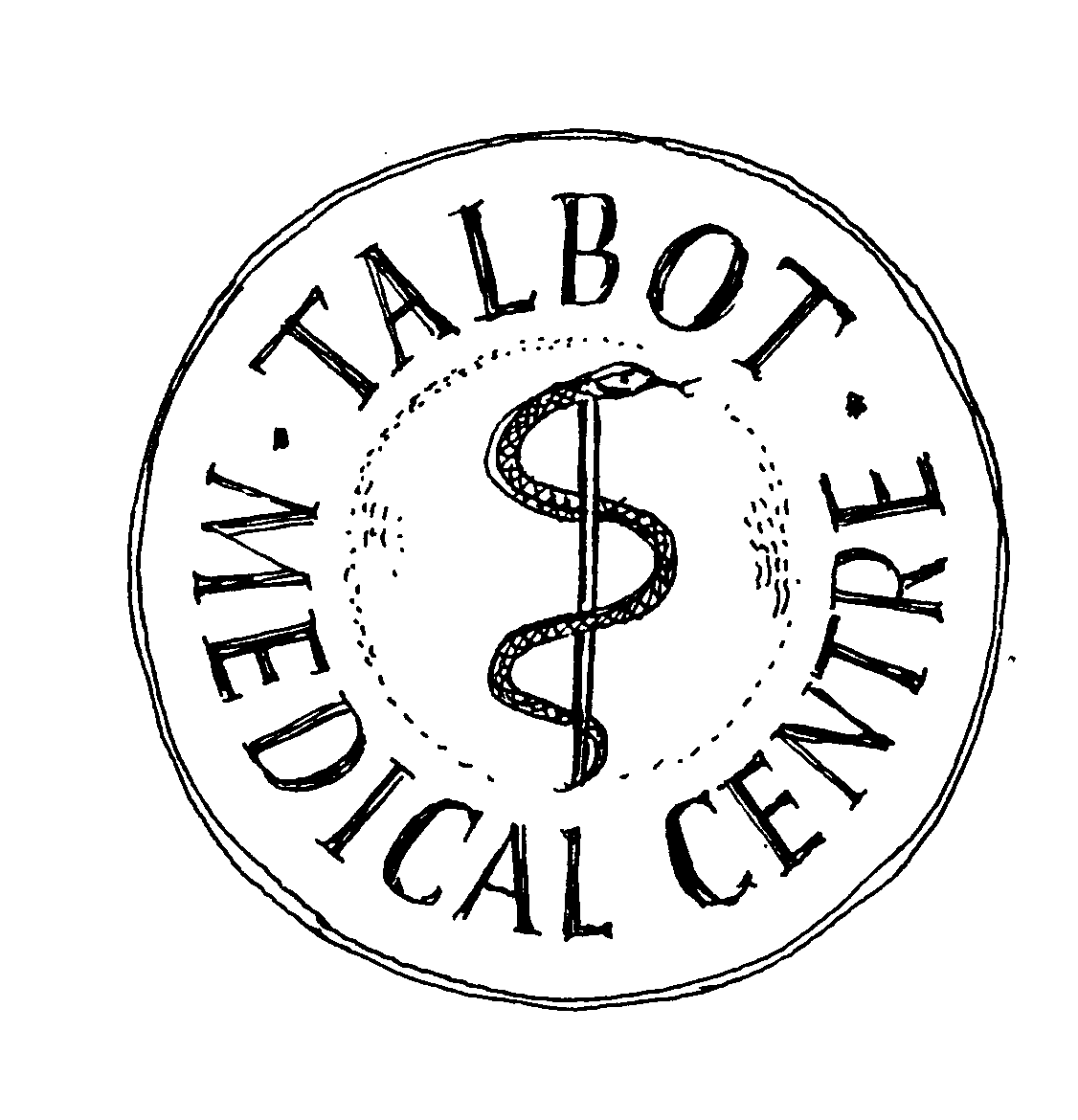
**COMMENTS/SUGGESTIONS/COMPLAINTS**

Our aim is to help you as best we can and we endeavour to do this in a highly professional way. Sometimes there may be a difference in opinion as to the service you received. Being human, sometimes our standard of care may have been less than we desired, or a misunderstanding may have occurred. We would welcome constructive criticism or comments on the services we provide. If you tell us where problems have arisen it gives us the chance to put things right. We try to provide the best possible service.

If you have any complaints about the service that you have received from the doctors or staff working for this Practice you are entitled to ask for an explanation. Please ask for a complaints leaflet or leave your comments in the Suggestion Box in the Waiting Room. Alternatively, please ask to speak to the Practice Manager or Assistant Practice Manager.

We operate an informal “in-house” complaints procedure to deal with your complaints. This procedure does not deal with any matters of legal liability or compensation. In some cases the in-house procedure is not an appropriate form of investigation. In which case you will be referred to the appropriate Authority. The in-house procedure does not affect your right to make a formal complaint to the NHS Commissioning Board, (NHS England), if you wish, nor does it affect your right to seek compensation in law.

Please note that the Practice must ensure strict adherence to the rule of medical confidentiality. We cannot provide medically confidential information without the appropriate authority if you are not the patient in question.

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**CONFIDENTIALITY STATEMENT**

**The Practice is committed to adhering to the principles of the Data Protection Act 1998**

**The Practice is the Data Controller and is responsible for ensuring the safety and security of the information it holds about you**

**However, on occasion information may need to be shared with other staff or organisations in order to help them decide the best care and treatment available.**

**Other organisations may include District Nurses, Health Visitors etc. or other service providers commissioned and appointed by the CCG that are committed to the improvement of health outcomes for patients**

**Where Staff from different organisations are required to be involved they will only be allowed to access information that is relevant to the purpose of their job/role and do not necessarily have full access to you medical history.**

**Our Patient Participation Group**

The overall aim of our group (PPG) is to develop a positive and constructive relationship between patients and the practice, ensuring that we remain accountable and responsive to our patient needs.

**Our Patient Participation Group Membership**

Any registered patient is welcome to join the group, which will involve you helping the practice ask the right questions in our annual survey.   If you would like to join this group and are happy for us to contact you periodically by e-mail or post, please complete the form in our Sign Up for Our Patient Group page on the website at [www.talbotmedicalcentre.co.uk](http://www.talbotmedicalcentre.co.uk) or ask the Receptionist for a [PPG sign up form](http://www.talbotmedicalcentre.co.uk/website/J81033/files/patientsurveysignup_(2).doc)

**CHARTER**

**Talbot Medical Centre Practice Charter**

The Talbot Medical Centre Patients’ Charter is displayed on the TV screen in the waiting room and is based on the National Patients’ Charter. A copy is available on request. Following a discussion with you, you will receive the most appropriate care given by suitably qualified people. No care or treatment will be given without your consent. In the interest of your health it is important for you to understand all the information given to you. Please ask questions if you are unsure about anything.

If you unable to attend an appointment please telephone the Receptionist to advise them as soon as possible as this may be used for another patient, even if at short notice. If you arrive late, you may be asked to re-book or be prepared to wait until the end of Surgery.

Practice staff involved in your care will give their names and how to contact them. All members of our staff will be wearing a badge to indicate their name and area of responsibility**.**

**FREEDOM OF INFORMATION ACT**

**What Is It?** The Freedom of Information (FOI) Act entitles anybody to ask a Public Authority in England, Wales and Northern Ireland, including Government Departments, for any recorded information that they keep. A list of organisations covered by the Act is available at [www.foi.gov.uk/coverage.htm](http://www.foi.gov.uk/coverage.htm).

This Act will give us all greater access to information about how decisions are taken in Government and how Public Services are developed and delivered.

The FOI Act operates alongside the Data Protection Act, which allows people to access information about themselves (eg personnel records or information held by credit reference agencies) and the Environmental Information Regulations, which give people access to information about the environment.

**How Do I Ask For Information?** All requests for information must be made in writing (eg letter, fax, e-mail). You must clearly state what information you are requesting and supply your name and address. You do not need to say why you want the information.

All Public Authorities covered by the Freedom of Information Act have a Publication Scheme. This will usually be available on their website or on request. The Scheme lists the information which the Public Authority routinely makes available and states whether you will have to pay for that information. Check the Scheme to see if the information you want has already been published. This could save you – and the Public Authority – time and money.

**What Type of Information Can I Ask To Have?** You can ask to have any recorded information. This could be in the form of e-mails, notebooks, videos or tapes.

**When Will I Receive The Information?** In most cases, a Public Authority must respond to your request within 20 working days of receiving it and if it cannot, it will explain why and let you know when you will receive a reply.

**Can My Request Be Declined?** Public Authorities will provide you with the information unless there is a good reason for not doing so (eg your request relates to someone else’s personal details). They must provide you with a reason for declining your request. If you do not find the reason persuasive, you can ask the Public Authority to reconsider its decision and if the request is still declined, you can ask the Information Commissioner’s Office to review that decision.

The Information Commissioner’s Office is an independent body that enforces the FOI Act, the Data Protection Act and the Environmental Information Regulations. For more information, visit [www.informationcommissioner.gov.uk](http://www.informationcommissioner.gov.uk) or see the Commissioner’s FOI leaflet.

**What Format Can I Request Information To Be In?** You can say in what format you would prefer to receive the information (eg on paper or electronically). You should discuss these formats with the individual Public Authority. In some cases (eg for people with disabilities) there may be entitlement to a particular format; again you should discuss this with the Authority.

**How Much Will It Cost To Make A Request?** A lot of information may be supplied free of charge. However, sometimes you may have to pay a fee, either to cover administration costs or to pay photocopying or postage costs. Alternatively, there may be expense involved in finding and supplying information. You will be told in advance if a fee will apply. For further information on this topic relating to Talbot Medical Centre, please refer to [www.foi.nhs.uk/Practice?id-215](http://www.foi.nhs.uk/practice?id-215).

**How the Practice Uses Personal Health Information**

Please ask the Receptionist for a copy of “Your Health Information, Confidentiality and the NHS Care Records Service” for further information on why information about you is collected and the ways in which this information is used.

**NON NHS EXAMINATION AND CERTIFICATES**

Medical examinations and certificates for special purposes e.g. driving medicals, per-employment, insurance medicals etc can be arranged by appointment. These are not part of your doctor’s NHS duties and therefore a fee recommended by the BMA may be payable.

**MEDICAL CERTIFICATES**

For absence from work through sickness, self-certification is currently valid for the first week. The sick certificate (form SC1) is available from your employer or the Post Office. We do not issue a Doctor’s Certificate for the first 7 days of sickness. If a private certificate to cover work is required a fee is charged.

After the first week, “fitness to work” certificates are obtained as part of a consultation with your doctor. If you are under the care of a Hospital doctor you may ask them to complete a medical certificate for you for the length of your anticipated incapacity. When you have been referred back to your GP future certificates can be obtained from them.

**CHARGES FOR LETTERS**

Letters and forms for non General Medical Services are charged at a minimal fee to cover doctors’ and secretarial time.

**DOCTORS’ HOLIDAY COVER**

The partners usually arrange to cover each other for short periods of leave. On occasions we employ an additional doctor, called a locum, to provide extra clinical sessions.

**SMOKING**

Talbot Medical Centre operates a “No Smoking” policy on the premises.

**PETS**

Animals, excluding guide dogs for the blind, are not permitted on the Surgery premises.

**CAR PARK**

There are 2 car parking spaces designated for disabled drivers/patients; please leave these free. Cars are parked at owner’s risk. There are 2 bicycle stands. Talbot Medical Centre is unable to accept any responsibility for damage or theft to items left on the property.

**MOBILE TELEPHONES**

Patients are asked respectfully to turn these off whilst in the Surgery.

**INFORMATION FOR SELF-TREATMENT OF COMMON ILLNESSES AND ACCIDENTS**

Many common aches and pains can easily be treated without the need to see the doctor.

**Back Pain**

Low back pain is sometimes caused by lifting heavy weights but can come on spontaneously. Rest, either lying flat or in a comfortable position and take 2 Aspirin, 2 Paracetamol or 2 Ibuprofen (e.g. Neurofen) tablets with food every 6 hours or as per packet instructions. Heat and gentle massage can help. If the pain persists more than a few days, or if it shoots down the leg to the foot (sciatica), consult your doctor.

Recent evidence suggests that exercise and activity facilitates recovery, so as soon as the acute spasm has subsided be as gently active as you can.

**BURNS**

**Sunburn**

Best avoided. We recommend factor 10-15 on a routine basis to avoid immediate and long-term damage to the skin. Remember that sunbathing is not fashionable in Australia and California where people are better acquainted with the risks of skin cancer and premature ageing.

Sunburn guidance is given on local weather forecasts.

Treat as for other burns, with cold water to remove the heat. Calamine lotion will relieve the irritation. Children are particularly susceptible to sunburn and great care should be taken to avoid over-exposure to the harmful effects of the sun. Excess sun exposure is associated with some forms of skin cancer and premature ageing of the skin. Excess sunbathing and use of sun lamps is discouraged.

Anyone with sensitive skin should use a sun blocking cream and cover up.

**Coughs & Colds**

A cough is the most common symptom presented to the doctor. If food enters the air passages in the throat coughing acts as a protector. In the same way during a cold it can also prevent mucus from entering the air passages and causing infection.

Suppressing this reflex action with cough mixtures can cause more harm than good. The best treatment is steam inhalation. Add a teaspoon of vapour rub or menthol crystals to a pint of steaming water in a bowl. Trap the steam with a towel over the head and bowl. Inhale for 10 minutes 3 times a day. Be careful not to scald yourself!

For a “cold”, swallow 2 soluble Aspirin with food or 2 Paracetamol every 6 hours, gargling them in warm water first if the throat is sore. Aspirin should not be given to children. The Paracetamol dose for children should be reduced to that advised on the package. If there is a temperature drink plenty of (non-alcoholic) fluids to avoid dehydration.

See your doctor if coughing continues more than a week or so after the cold has cleared up, if coughing produces green or yellow spit or blood or if coughing is accompanied by chest pain. Also see your doctor if a sore throat develops into ear-ache or if the body’s temperature rises above 39.5oC or 103oF despite taking Aspirin/Paracetamol.

During an infection the body’s temperature regulation system is disturbed. Wearing too many clothes/bed clothes can aggravate a high temperature.

**Sore Throats**

These are extremely common, particularly in children and young adults. Drinking adequate fluids and taking regular relief i.e. soluble Paracetamol, Aspirin with food (not for children), or Nurofen is very important for relief. All sore throats are acute self-limiting illnesses. Scientific studies have shown that antibiotics have a limited and small role. We tend to reserve these for severe cases.

**Earache**

A distressing and common occurrence with a catarrhal cold. Often the symptoms are mild or brief. If sustained and painful for more than 12 hours please seek advice. Initial treatment: pain relief e.g. Paracetamol, Neurofen or Aspirin (not children).

**Looking After Your Child with a High Temperature**

A child usually develops a fever in response to an infection. Usually the child will get over the infection without antibiotics. A few children, usually under 3 years old, may have a convulsion with a temperature. It is therefore important to bring the temperature down to make your child comfortable and to avoid convulsions.

If your child has a temperature or feels hot:

* Give Paracetamol or Ibuprofen at the higher recommended dose.
* Undress your child and avoid thick bed covers.
* Give plenty of cool drinks, as fluid is lost with a fever.
* Sponging with a tepid flannel will make him/her feel better and reduce the temperature.
* Repeat the dose of Paracetamol every 6 hours if necessary.
* If your child does not improve ask your doctor for advice.
* You will not make matters worse if you bring your child to the Surgery to see the doctor. Sometimes the fresh air makes feverish children feel better.
* If your child does have a convulsion, cool them down and it should subside within 5 minutes. Lie the child on his/her side, stay with him/her whilst it lasts and contact your doctor as soon as possible.

**Headlice**

These creatures, contrary to popular belief, prefer clean hair and are not a sign of poor personal hygiene. Medicated head lotion can be obtained from the Chemist without a prescription. The Practice has produced a leaflet giving information on the treatment of head lice. These are available from reception.

**Threadworms**

Small white worms may be seen in the stool or around the back passage (anus), especially at night. They cause intense itching and are spread by scratching with eggs getting under nails or on fingers and then into mouth.

Treat all family members with medicine, available from the Chemist. Ensure good hand-washing practices after using the toilet and before eating (including sweets/fruit etc.).

**Nose Bleeds**

Sit in a chair leaning forward with your mouth open and pinch the soft part of your nose just below the bone for at least 10 minutes continuously (without stopping to check if it is still bleeding). By this time the bleeding should have stopped.

If symptoms persist, consult your doctor. Avoid blowing your nose/cleaning the nostrils for 12 hours after the bleeding has settled.

**Minor Cuts & Grazes**

Wash the wound thoroughly with warm water and a little soap. To stop bleeding, press a clean handkerchief or dressing to the wound continuously for at least 5 minutes. Cover with a clean, dry dressing.

**Diarrhoea**

Unpleasant but rarely dangerous. Most usually caused by a virus, but also a sudden change of diet, over-drinking or foreign travel. It is often accompanied by a colicky (cramp-like) pain in the stomach.

An attack may be accompanied by vomiting and usually begins to get better within 48 hours. To treat: eat little, drink plenty of clear fluids and avoid alcohol. See a doctor if diarrhoea is bloodstained, if a normal bowel habit does not return after several days, if there is continuous pain rather than bouts of cramps, if repeated attacks occur or if an attack occurs shortly after foreign travel. Babies are generally reviewed at an earlier stage of the illness. To rehydrate, drink either a glass of boiled water (cooled) with a pinch of salt and 4 teaspoons of sugar, Coca-Cola (just as good and tastes better) or other suitable fluids such as Dioralyte, orange juice, soup, etc.

The use of anti-diarrhoea medication is seldom recommended.

**Vomiting**

May be caused by a virus, food poisoning, or eating/drinking too much. Some children vomit when they have a temperature. To treat: eat nothing and drink small quantities of water every hour. Small children and adults respond well to special rehydration mixtures like Dioralyte or Rehydrat. The greatest danger is from dehydration. Continue to give fluids even if vomiting persists.

If babies are breast fed, continue to give milk. If bottle fed, replace with rehydrating fluids for a day and then, if vomiting stops, give half strength feeds for another 24 hours. See a doctor if vomiting is accompanied by constant stomach pain, if vomiting lasts more than 24 hours, if a vomiting child has a temperature over 38oC or 100oF or becomes abnormally drowsy and lethargic.

**Sprains**

Apply a cold compress, for example a bag of frozen peas wrapped in a tea towel, for one or 2 hours to reduce the swelling.

Firmly apply a crepe bandage or Tubigrip and elevate the limb, resting it until the discomfort has subsided. As the pain resolves move the limb in all directions to prevent stiffness.

**Thrush**

Many women have experienced this irritating complaint which is characterised by a white, itchy discharge. It can be treated with Canesten Cream and vaginal tablets (available from the Chemist without prescription). Avoidance of nylon underwear, bubble bath and soap can also reduce the chance of recurrence. If symptoms persist consult your doctor. Remember that there are many other causes of a discharge and you should consult your doctor if you have any doubts or any other symptoms (e.g. ulcers).

**Cystitis**

Frequently passing urine which stings or burns suggests cystitis, which is sometimes caused by infection. If drinking plenty of fluids and taking Cymalon, which can be bought from the Chemist, does not relieve symptoms see your doctor. It is sometimes helpful to bring a fresh sample of urine (not necessarily the first of the day) in a clean container as the doctor may wish to test it.

**Headaches**

These are a common symptom in adults and children, often in accompaniment to a fever. Common sense allows self-treatment with regular Paracetamol, Neurofen or Aspirin (not children). Symptoms which cause concern and require discussion or consultation with the doctor include an alteration in conscious level, drowsiness, photophobia (dislike of light) or neck stiffness.

**Chickenpox**

Chickenpox is often more severe in adults than children. Adults with chickenpox should contact a doctor as soon as possible. Children can be treated as below.

On the first day a rash appears as small red patches about 3-4mm across.

Within a few hours of these developing, small blisters appear in the centre of these patches. During the next 3 or 4 days further patches will appear and the earlier ones will then turn “crusty” and fall off.

Oily Calamine lotion may be applied to soothe the often severe itching. Cool baths may also help. Infection may take up to 3 weeks to develop after the initial contact.

The most infectious period is from 2 or 3 days before the rash appears and up to 5 days after this date. Children may return to school as soon as the last “crusts” have dropped off.

**German Measles (Rubella)**

All children should be immunised against this as part of the MMR vaccine.

The rash appears during the first day and usually covers the body, arms and legs in small pink patches about 2-4mm and does not itch. No other symptoms are usually present apart from occasional aching joints or glands (lumps) at the back of the neck.

It is infectious from 2 days before the rash appears until the rash disappears, in about 4‑5 days from that date.

The only danger is to unborn babies. It is therefore important that all contacts are informed in order that anyone who may be pregnant can contact their doctor.

**Measles**

All children should be immunised against this as part of the MMR vaccine. This is a serious illness that we hardly ever see due to immunisation.

The rash is blotchy and red and appears on the face and body around the 4th day of illness. It is at its most infectious from 2 or 3 days before the rash appears until 8 or 10 days after that date.

**Mumps**

All children should be immunised against this as part of the MMR vaccine.

Symptoms are swelling of the glands below one ear, often followed after a couple of days by swelling in front of the other ear. It is infectious from 2 or 3 days before the swelling appears until 8 or 10 days after that date. If the pain is severe you should consult your doctor.

Infection may develop up to 3 weeks after the initial contact.

**Malaria**

If you develop a fever and/or headache during or after travel to a malaria-affected area you should consult your doctor at the earliest opportunity. Anti-malaria tablets do not guarantee protection, so even if you have taken your tablets you should still seek medical advice.

**Blandford Fly**

Blandford Fly bites can only be treated in the same way as other insect bites. Keeping covered up and using insect repellent creams and sprays may be helpful, but does not guarantee not being bitten.

The vast majority of bites are treated by simple measures such as frequent application of Calamine lotion and anti-histamines (see below). Blistered or weeping areas should be covered with a dry dressing. The Practice Nurse is always available to give advice.

Unfortunately no other treatment has been proven to be effective and there is little more that your doctor can offer other than antibiotics if there is good evidence of infection eg red lines appearing up the affected limb and enlarged lymph nodes in the armpit or groin.

**Hayfever**

Hay fever causes itchy eyes, runny noses, sneezing and tends to aggravate asthma. It may occur at any age.

**Treatment:** General measures include reducing exposure to pollen (eg keeping bedroom window closed), taking a note of pollen count, avoiding early evening walks etc. However, many people require medication eg anti-histamines (see below).

**Anti-Histamine Tablets**

Anti-histamine tablets are available over-the-counter from the Chemist, who will always advise on usage. Older anti-histamines (e.g. Piriton) tend to cause drowsiness, so many people find modern preparations (e.g. Triludan, Hismanal etc) more acceptable. Please follow the instructions in the packet.

* Read the information leaflet in the packet
* Do not exceed the recommended dose under any circumstances
* Discontinue if you feel faint or develop palpitations and consult your doctor
* Do not take at the same time as certain other drugs eg anti-fungal tablets.

**Abusive & Violent Behaviour**

***Anyone who abuses a member of staff physically or verbally will be warned and told to stop. If they do not stop and do not leave the premises when asked, the Police will be called to remove them. This may result in the patient being removed from a GP’s list because of violent behaviour.***

**Equipment Fund**

We run an equipment fund - the purpose of which is solely for buying items for the Surgery to help with our care of the patients. These are usually medical items e.g. TNS machines, Sonic Aid and ECG machines.

Should anyone wish to donate or help raise money please see our Practice Manager.

