

# **NEWSLETTER**

Darwen Health Centre James Street West, Darwen BB3 1PY

Tel: 01254 226691 Fax

No: 01254 226689

Email: darwen.healthcare@nhs.net

# **AUTUMN / WINTER 2017**

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# Tiz the Seazon

Once again autumn is transforming in to winter which will be seen in many different ways by each individual. To the old it can be a both a good time and a bad time, to a child seeing a snow covered landscape for the first time it is like magic. But most of all it is a time to think of others, not just in presents or cards, but in the little ways you can help a neighbour or a friend who is struggling or may be lonely, Just an offer to fetch shopping or even just a friendly face can make a big difference to the elderly living on their own.

We also need to remember that it is a season that can affect our health and we should try to keep warm, ensure we order repeat prescriptions on time and keep a good supply of simple remedies that can be bought over the counter like pain relief & cough syrup.

The Partners & Staff

hope you enjoy the season and

that you will have a healthy + and prosperous 2018



# The Patients Participation Group

The group meets bi-monthly on a Monday evening and consists of patients of the practice who work with the doctors and practice staff to improve the way services are delivered For more info contact:

susan.hill13@nhs.net or ask at reception

Chair: Tracy Jones Vice-chair: Barry Ashcroft

#### Meet the PPG Group Members Ian Grimshaw

My name is Ian Grimshaw, and I have lived in Belgrave area of Darwen for a total of 16 years. I have been a patient at the Darwen Health Centre for many years & a member of the practice's PPG for the last 3 years.

Work wise, I spent 19 of my 25 years working in the pharmaceutical industry in various locations until I became a full-time carer to my partner who was diagnosed with MS in 2011. I myself have been diabetic since 2009.

### So why did I join the PPG?

I joined the practice's PPG just around 3 years ago after a friend recommended that becoming a PPG member is a way of putting something back into the practice & after the excellent care the practice nurses had

given me for my diabetes, I decided to enquire & after a short meeting with the practice manager I decided to become a PPG member.

#### Are PPG's effective?

You hear that plenty of patient's who join their practices PPG's do so just to complain about their own problems / issues they have, fortunately I can honestly say that this does not happen in this practice's PPG. We have a very good mix of members who come to the meetings, some young, some more mature & an even split between male & female.

We are very active in trying to make the practice as good as it can be, for example, helping at busy periods, such as the recent flu clinics & also handing out surveys to get the views of the patients, the answers you give back are vitally important as this gives us an indication for room for improvement in areas you have indicated require some focus

Finally, a PPG is only as good as the practice partners & managers allow it to be & to that end, the support from all of them has never been questioned

So, if you can find a couple of hours spare every two months or so & fancy being a PPG member give the practice a call & I'm sure you'll be given a warm welcome.

# **Electronic Patient Access - Register to benefit**

On Line Patient Access to your own Summary Medical Record gives you:-

- Access services and information 24 hours a day
- Order your repeat prescriptions 24 hours a day
- Book appointments without the need to telephone

What do you need to do? Contact Reception on 01254 226691 option 3

Or call at reception and you will be given the registration pack and when your completed application is received and set up we will give you details of your user name and password

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# The Ahead Project

In March 2017, following a successful bid for funding from the Queens Nursing Institute, we launched the AHEAD Project managed by Advanced Nurse Practitioner Debbie Yates.

The AHEAD project, which stands for Airways, Health, Education And Diabetes, was launched to encourage men to attend their diabetes, asthma and COPD checks. These checks are vital as 17% of the men who did attend were found to have a risk to their health

The improvement in uptake has been extremely successful with the 2016/2017 figure of 32.1% of the number invited nearly doubling in 2017/2018 to 62.7% with some young men whose asthma was un- controlled attending for the first time in three years and have now improved their symptoms. Previously they could have been at risk of admission to hospital. So the project has benefited the health service in the area by reducing hospital admissions with COPD.

The 12 month scheme ends at end February 2018, however we will continue the process of contacting those who have not attended their appointment for a while, due to the positive results received.

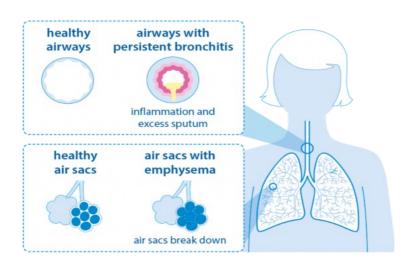
# The importance of attending your Annual Review

COPD reviews are ideally performed in spring or summer months rather than winter birthday months, but depending on the severity of your condition the nurse may ask to review you either three monthly or six monthly. Of course you can book to see her sooner if you are having difficulty or feel your chest has become worse, please ask for a twenty minute review for either asthma or COPD

Asthma is a condition which causes inflammation in the small airways of your lungs. It can run in families or be associated with eczema or hay fever or allergies. Symptoms can include dry persistent cough, tightness in your

chest with or without activity, wheeze and shortness or breathe especially with exertion. All asthma should be treated with anti-inflammatory inhalers (brown/pink/orange/white) and reliever inhalers (blue) help with instant relief of tightness or wheeze. Blue inhalers do not treat asthma so if you are having to use your blue inhaler more than twice a week then please book to see our nurses. Asthma symptoms can vary from season to season or year to year. It can even disappear for a few years only to return at a later time. Good asthma control can be achieved with treatment so that you are symptom free. For more detailed explanation visit www.asthma.org.uk

# COPD bronchitis emphysema graphic



#### COPD

Chronic obstructive pulmonary disease, or COPD, describes a group of lung conditions that make it difficult to empty air out of the lungs because your airways have been narrowed.

Two common forms are persistent (chronic) bronchitis and emphysema, which can also occur together.

- Bronchitis means the airways are inflamed and narrowed. People with bronchitis often produce sputum, or phlegm.
- Emphysema affects the air sacs at the end of the airways in your lungs.
   They break down and the lungs become baggy and full of holes which trap air.

These processes narrow the airways. This makes it harder to move air in and out as you breathe, and your lungs are less able to take in oxygen and get rid of carbon dioxide.

Other conditions include bronchiectasis, pulmonary fibrosis, asbestosis.

There are inhalers to help you breathe more easily and prevent flare ups and worsening progression, so it's important to get an early diagnosis and stop smoking. Ask reception if you need help to be referred to a specialised smoking clinic.

Treatments can improve symptoms and the nurse will refer you to pulmonary rehabilitation which has proven to help breathlessness. Those prone to recurrent chest infections should seek prompt advice with our advanced nurse practitioners who specialise in COPD, their GP or the community COPD team who are available 8 am to 8 pm seven days a week via Tel: 01772 777042

Treating a chest infection sooner rather than later is vital. Flare ups of COPD (chest infections) usually take at least six weeks before you feel a return to your normal level of breathing. Therefore it is important that we monitor your flare up. A minority of patients with severe require disease rescue packs (antibiotics/steroids) to keep at home but it is essential that you inform your ANP when you have used the pack as self-treatment could risk being admitted to hospital if your chest is not assessed by a clinician and your oxygen levels checked.

Attending your yearly or six monthly checks are important so we can ensure you are being treated with the most suitable medications as new treatments are becoming available all the time. The nurse will also discuss any worries you have about your condition and ways to help you manage and a personal management plan will be given.

Debbie Yates - Advanced Nurse Practitioner

More info at www.asthma.org.uk

# A day in the life of a Physician Associate

Physician associates have recently been introduced to the NHS. A physician associate will have previous degree in a healthcare or biomedical science, and will build on their prior knowledge by undertaking 2 year postgraduate covering the essentials of medicine. The physician associate will then work alongside doctors and nurses. diagnosing and treating patients under the overall guidance of a supervising clinician. The biggest difference between a physician associate and a doctor is the generalisation of the role. Most doctors receive further training in a specialist area to become experts in their field, whilst a physician associate is able to work within any field of medicine as a generalist, switching specialities throughout their career, providing both specialist and general cover for patient's needs.

The physician associate degree is extremely intense, with an incredible amount of knowledge to be acquired within the 2 years. It requires great dedication and a steep learning curve, which does favour mature graduates who have undertaken a prior degree. The course is divided into 50% placement and 50% university studies. Whilst at university, lectures are normally 9-5 each day with a significant number of hours of reading

outside the classroom required. Placements are similar to those of a medical student, but are shorter in length. Upon qualification a physician associate is expected to work at a similar level of practice to a recently qualified doctor, with recent studies highlighting similar levels of patient satisfaction for both professions.

I have my final exams in January, and if I am fortunate to pass then I will begin my role in February 2018 at Darwen Healthcare. I have spent 14 weeks of my course within the practice, and 20 weeks overall within general practice. My day-to-day duties are similar to that of the GPs. I analyse lab results, make referrals, take patient histories and offer diagnoses and treatment, under the supervision of a named a clinician, although Ι am aiven longer appointments with patients, which also allows me to get know patients from the area. The practice has achieved some incredible awards recently, and there is a friendly, hardworking atmosphere throughout. I am looking forward to starting the role come February. If anybody has any questions about the role please feel free to ask and I am always happy to help.

Neil Sinclair Student Physician Associate



# **CANCER SCREENING UPDATE**



# MAMMOGRAM UPTAKE: JUNE TO OCTOBER 2017

Following on from Dr Morris's message the practice was pleased that 77.3% of eligible patients took up the offer of attending for a Mammogram whilst the mobile unit was based at Darwen Health Centre.

1778 patients were eligible with 1375 actually attending an appointment and with over 96% of these having a normal result. If you did not take up the opportunity of the invite and now wish to do so please contact Breast Screening on 01282 805301 to arrange an appointment.

IT COULD SAVE YOUR LIFE.

# **BOWEL CANCER SCREENING KITS**

If you are aged 60 and over you will receive a KIT through the post every two years for completion. Darwen Healthcare GPS strongly recommends that this test is completed. If you have any questions in relation to this Maria, Terri or Gulnaz will be happy to answer your queries

PLEASE TAKE UP THE OFFER - IT COULD SAVE YOUR LIFE.

#### CERVICAL CANCER SCREENING – SMEAR TEST

Darwen Locality of GP Practices have recently developed a Patient Information Leaflet which will be promoted to try and improve the uptake of patients attending an appointment for a Cervical Smear.

Ann Neville, Darwen Healthcare Practice Manager explains why she feels the test is so important:

"My mum was diagnosed with Cervical cancer in January 1981 at the age of 49 having never had a Smear Test in over 15 years. I was aged just 16 and due to take my GCSE's in June. Due to the late diagnosis my mum had limited options of treatment and did struggle with pain towards the end of June that year and sadly died short-ly after me completing my final GCSE exam. My mum did not have the opportunity of seeing my two adorable children or their children and I really wish that my mum had attended regular Smear Appointments as I do -IT MAY SAVE YOUR LIFE

Please contact Gillian on 01254 226711 or Reception on 01254 226691 to book an appointment.

# **Prescription Update**

MEET THE PRESCRIPTION TEAM Sarah, Brenda, Alex, Julie and Jade aim to process repeat prescriptions within 48 hours. If you have been stable on repeat prescriptions for 6 months the prescription team can send a request to your GP asking for the prescriptions to be issued 6 months at a time and send to your preferred pharmacist. This is available to many patients however if your medication requires you to be regularly monitored medication the has special prescribing actions then this service may not be available to you. If you are interested in this please do not hesitate to contact the Prescription Team.

# URGENT PRESCRIPTION REQUESTS

if you require a prescription to be issued the same day the team will do all they can to process however this may not be possible. Please ensure that you order your prescriptions 48 hours in advance of when they are needed. There is a cut off time for URGENT Prescriptions of 2:30 pm each day as the afternoon clinics start at 3:00 pm.

# FLU IMMUNISATION UPDATE ADULTS AND CHILDREN

The practice has held several flu immunisation clinics since Mid September and there has been a good uptake. If you have not yet attended and are eligible please attend as soon as possible this is particularly important for those who have respiratory conditions, ladies who are pregnant and children aged 2 and 3 and children who have

respiratory conditions. Children who are aged over 3 and no respiratory conditions will be vaccinated in school. PLEASE con- tact either Gillian on 01254 226711 or Reception on 01254 226691 to book an appointment or email <a href="mailto:darwen.healthcare@nhs.net">darwen.healthcare@nhs.net</a> and a member of the team will make contact to book you an appointment.

# FRIENDS AND FAMILY FEEDBACK

Patients regularly provide feedback on our service and this allows us to see how we are doing and also allows an opportunity to improve an area if needed. Please provide feedback via our website at <a href="https://www.darwenhealthcare.co.uk">www.darwenhealthcare.co.uk</a> or via our generic email account <a href="mailto:darwen.healthcare@nhs.net">darwen.healthcare@nhs.net</a>

# **Patients Failing to Attend Appointments**

Type of Appointment	AUG	SEPT	OCT	
GP Pre-Bookable Appointments	76	54	48	
Urgent On the Day Priority Appointments	54	44	42	
Practice Nurse Review Appointments	18	22	20	
Health Care Assistant Review Appointments	31	17	17	
Total Appointments Lost	179	137	127	

# THAT'S 443 APPOINTMENTS WHERE ANOTHER PATIENT COULD HAVE BEEN SEEN

Due to the number of missed appointments the practice now has a failed to attend policy in place.

# You can help us by cancelling your appointment if it is not needed:

Please advise the practice if you are unable to attend either by texting CANCEL if you are set up for appointment reminders and have received a text., email our generic email account <a href="mailto:darwen.healthcare@nhs.net">darwen.healthcare@nhs.net</a> or contact 01254 226691 Option 2

# **KEEP THE PRACTICE UP TO DATE**

Please keep the Practice up to date with your Home Address, Email Address, Land line Telephone Number and Mobile Number which will enable the Practice to contact you and send you updates and invites for the services we provide.

# Information for if you are referred to a Specialist

# **Hospital Tests & Investigations**

All tests and investigations required by the specialists must be ordered by them and the appointments sent to you.

If the specialist requires blood tests he/she should give you a request form which you can take to whoever normally provides blood tests in your area. This varies and may be your surgery, hospital or community clinic. The specialist is responsible for acting upon the results of any test he/she requests and for informing you of the results.

If you haven't heard from the specialist about a test result please ring his or her secretary at the hospital. Unfortunately your surgery may not know the result and will not know what the specialist intended to do with the information.

# **Hospital Prescriptions**

If the specialist prescribes a new medication or changes one that you are on please ask them to provide you with the first prescription. This may be on a white prescription that can be used in the hospital pharmacy or on a green one that you can take to your normal pharmacy.

Upon notification from the specialist your surgery may automatically add the medication change to your repeat list on the computer. You will then be able to order re-supply without an appointment. You may need to telephone your surgery to confirm this or use on-line services if you have registered for them.

If you are uncertain what changes the specialist is making please ask them to

explain it to you at the appointment. It saves you having to see your GP to discuss something he or she may only know of from a short letter of explanation.

# Sick or Fit Note (Med3) After Hospital Attendance

If you need to be certified as unfit for work as a result of the treatment provided by your specialist (or therapist) he or she should issue a sick note when you are discharged from hospital or seen in the clinic. Please ask for one if you need it.

## **Follow Up Appointments**

If you need to be seen again the hospital will provide you with another appointment. Please ask the specialists' secretary if it does not arrive in a timely way.

# In summary, the specialists are responsible for:

- Looking after all your tests
- Providing prescriptions when needed
- Issuing a sick note if required
- Providing you with a follow up appointment if necessary.

Info from the Lancashire & Cumbria Consortium of Local Medical Committees With thanks to Kent LMC

# **Winter Health**

#### Keep warm and keep well

During the winter months cold homes can have a huge impact on your health. One of the best ways to stay well in winter is to stay warm. Conditions such as flu, strokes, heart attacks, pneumonia and depression can be prevented by staying warm. If you start to feel unwell, even if it's a cough or a cold, don't wait until it gets more serious. Seek advice from your pharmacist.

How the cold can affect your health

The cold and damp weather – ice, snow and cold winds – can be bad for your health, especially if you're aged 65 or older. It can make you more vulnerable to winter illnesses, such as coughs and colds, which could become very serious. It also increases the risk of high blood pressure, heart attacks and stroke. However, there are things you can do.

## What you can do

Get expert advice - Always seek advice from your pharmacist at the first sign of a cough or a cold, before it gets more serious.

### Buy over-the-counter medicines

Many over-the-counter medicines (including paracetamol and ibuprofen) are available to relieve symptoms of common winter ailments such as colds, sore throat, cough,

sinusitis or painful middle ear infection (earache).

### Keep yourself warm

Keeping warm, both inside and outdoors, over the winter months can help to prevent colds, flu and more serious health problems such as heart attacks, strokes, pneumonia and depression.

- Wear several layers of light clothes, as these trap warm air better than one bulky layer
- Heat your home to at least 18C (65F)
- Stay active try not to sit still for more than an hour or so

# Keep out the cold at night

Keep your bedroom window closed on winter nights. Breathing cold air can be bad for your health as it increases the risk of chest infections.

### Get the right help

Make sure you're receiving all the help you are entitled to. Learn how to make your home more energy efficient and take advantage of financial schemes to keep up with energy bills. See Keep Warm, Keep Well for details.

You can also check your heating and cooking appliances are safe and operating properly by contacting a Gas Safe registered engineer.

### **Meet The Darwen Healthcare Team**

We are pleased to Welcome the following to our team at Darwen Healthcare:-Raesa joins the team as a Practice Nurse. Jodie, Catherine and Jade join the team as Receptionist/Admin Support. Congratulations to Gulnaz who is up skilling and becomes a full time Healthcare Assistant as from December 2017

# **Darwen Healthcare Team**

GP'S: TRAINEES:

Dr C Dalton Dr P Morris Dr A Mudugal Dr R Sudell Dr M Ninan Dr M Pillai Dr M Umer Dr Q Hussain

Dr K Hogarth Dr J Killalea

#### **NURSING TEAM**

Advanced Nurse Practitioners: Debbie & Julia

Practice Nurses: Katrina, Louise & Raesa

Assistant Practitioner: Maria

Healthcare Assistants: Terri & Gulnaz Nursing Team Administrator: Gillian Turner

### **NON-CLINICAL TEAM**

Practice Manager: Ann Neville

Finance Craig Robertson

Corporate Governance Kim Cunningham

Contract Administrator: Nichola Wright Administrative Coordinator: Susan Hill

Conjugate Coordinator. Viv. 9 Debbie

Senior Receptionists: Viv & Debbie

Quality & Data: Catherine, Eileen & Philip Secretarial: June & Katie

Prescriptions: Sarah, Brenda, Alex &Julie

Receptionists: Keri, Tracey, Lorraine, Louise,

Joanne, Jill, Alex, Julie & Jade

All the Team wish you the best for the coming season and hope you will heave a healthy 2018