

What's up Doc!?

NEWSLETTER - ISSUE 01 - AUTUMN 2016



Be smart this Flu season

Every year between September and January the Influenza virus becomes much more common, and the number of people catching the illness increases. This period of time is known as the Flu Season.

To counter this, the NHS undertakes a massive campaign during the Winter months to vaccinate as many people who are at higher risk of catching the Flu as possible.

What is the Flu?

Many people might think that the flu is just another one of those things that we have to live with, like the common cold. While the symptoms of the Flu tend to be similar it can become much, much more serious. Every year around 600 people die in the UK because of complications brought on by the Flu.

The most common symptoms include a high fever, runny nose, sore throat, muscle pains, headache, coughing, and feeling tired. These symptoms typically begin two days after exposure to the virus and most last less than a week. In more severe cases there may

also be nausea and vomiting.

That's why the Flu season is such an important time in the NHS. It is vital that as many vulnerable people are vaccinated against the illness as possible – not just to stop them catching it, but also to reduce the risk of them passing it on to others.

Who is eligible for a Flu vaccination from the NHS?

Not everyone is entitled to a Flu vaccination on the NHS. Supplies are limited, so they are reserved for the most vulnerable people. This includes people with long term illnesses like Diabetes, Heart Disease or Lung Disease, as well as the elderly and the frail. Young children are also offered the vaccination. For a more detailed list of who is entitled to a Flu Vaccine on the NHS, visit our practice web-site.

When can you have your Flu vaccination?

The first deliveries of Flu vaccinations will arrive towards the end of September. Both our sites will be offering Flu

WELCOME...

...to our first issue of *What's Up Doc?* as a merged practice!

We've been working hard behind the scenes to bring both sites closer together, and here we'll let you know how the merger is progressing.

And in our newly merged practice our Patient Voice is as important as ever. You can read an update on our meetings on page 4.

Although there have been a lot of changes at the practice, some things have stayed the same. It's soon going to be Flu Season, and like every year we will be hoping a vaccine as many people at higher risk of catching the illness as possible.

We hope that you enjoy reading this issue of *What's Up Doc?*



INVESTORS
IN PEOPLE

clinics shortly after our first deliveries. For full details of the clinics available at Bowling Hall and Highfield please see our practice web-sites.

What can you do if you're not in an 'at risk' group

For people who are not in an 'at risk' group, the Flu generally poses little danger. You can reduce your risk of catching the flu and of spreading it to others by making sure you wash your hands regularly with soap and warm water, cleaning surfaces such as your keyboard, telephone and door handles regularly to get rid of germs and by using tissues to cover your mouth and nose when you cough or sneeze.

While the symptoms can be unpleasant, keeping well hydrated and resting are the best ways to recover.

For those who would like to have a Flu vaccination who aren't in an 'at risk' group, most pharmacies in the area offer Flu vaccinations for a small charge.

Letters and forms: Why GPs sometimes charge fees



centrally by the government. For other fees—such as the fee for providing a supporting letter or completing a form—the GP practice sets their own charge, with advice from the British Medical Association (BMA).

The cost of non-NHS work will be told to the person requesting it up front, before the work is carried out.

workload and paperwork takes up an increasing amount of their time, so many GPs find they have to take some paperwork home at night and weekends in order to find time to complete it.

I only need the doctor's signature - what is the problem?

When a doctor signs a certificate or completes a report, they are legally required to only sign what they know to be true.

In order to complete even the simplest of forms, therefore, the doctor needs to check the patient's entire medical record thoroughly. Carelessness or an inaccurate report can have serious consequences for the doctor

What can I do to help?

- Not all documents need a signature from a doctor. For some documents you can ask another person in a position of trust to sign them.
- Make requests in writing, with a signature, and be as clear as possible about what you need.
- Do not expect your GP to process forms overnight. Urgent requests may mean that a doctor has to take time out of clinics to process them.

What is covered by the NHS and what is not?

The NHS covers medical work for patients, such as health advice, medical tests or a referral to a specialist.

In recent years, however, more and more organisations have been involving doctors in a whole range of non-medical work which is not covered by the NHS.

Sometimes the only reason that GPs need to do this work is because they are in a position of trust in the community, or because an insurance company or employer wants to ensure that information provided to them is accurate.

In some cases the charge is set

Do GPs have to do non-NHS work for their patients?

With a couple of limited exceptions, GPs do not have to carry out this kind of non-NHS work on behalf of patients.

Whilst GPs will always attempt to assist their patients with the completion of forms and letters, for example for insurance purposes, they are not required to do so.

Why does it sometimes take my GP a long time to complete my form?

Time spent completing forms and preparing reports takes the GP away from the medical care of their patients.

Most GPs have a very heavy

OUR SERVICES

The practice offers a number of services which you may not be aware of. These are available to all of our patients—just fill out a short form the next time you're here to sign up for any of them you're interested in.

Text Messaging

Our text messaging service has been live for several years now and has proven very popular.

When you sign up you'll receive free reminders for all of your appointments as well as a confirmation when your appointment is booked or cancelled.

We can also use text messaging to easily get in contact with you in a quick and less intrusive way than telephoning.

We will soon be starting to use our Text Messaging system to send out messages for test results as well. This means that—if you're signed up—you'll find out the result of your tests almost as soon as the doctor has looked at them.



SystemOnline

SystemOnline is the name for our Online Services, and it makes interacting with your practice easier than it has ever been.

You can request your prescriptions, book appointments, update your contact information and much more all from the comfort of your own home.

And because the system is online all day and night you can sign in even when we're closed.

All you need to do to sign up is fill in a short form the next time you're here. As the system links directly to your medical records we do also require sight of some form of ID—a driver's license or passport, for example.

With an ever increasing list of options available online it really is worthwhile signing up.

You can find out more information on our practice web-sites.

E-Mail

E-Mail is one of the most convenient ways to communicate, but is strangely underused in practice. Over the next few months we're aiming to increase the use of e-mail to send useful information and news updates about the practice.

While we won't be using e-mail to send out anything confidential, we will be using it to send out helpful information packs about our health campaigns, clinics we're running or new services we're introducing.

We'll also be able to keep you up to date with progress reports on the merger and notes from our Patient Voice meetings.



systemonline

THE PRACTICE MERGER—AN UPDATE



Why are we merging?

We hope that you've all had the opportunity to read our Practice Merger Information Leaflet, or to read the information on our practice web site.

Merging practices presents us with a number of opportunities which we hope will benefit our patients. It will also give us more freedom to adapt to meet the ever changing needs of the NHS.

Both Bowling Hall and Highfield have grown over the past 10 years. We feel that bringing our two practices together will allow us to build on our successes and continue to grow.

How is it going so far?

While the merger itself happened on 1st April 2016 the intention was for there to be no immediate change in the way that our patients access our services.

Behind the scenes, however, a lot of work has been done to bring the two sites closer together, both in terms of how they look and feel and in terms of how both sites work, and we feel we have made good progress.

Each site currently has slightly different policies and systems – different appointment systems and different prescription policies, for example. Merging presents us with the opportunity to re-examine every aspect of the practice

and combine the best ideas from each site. To aid in this process some of our doctors and other members of staff have been working across both sites in order to get a feel of what the differences are.

We expect this process to take a while, but over the coming months you might start to notice little changes in the way we do things. Of course if there are any changes which do affect our patients we will make sure to let you know beforehand.

The future

Before the merger both sites were of a similar size in terms of the number of patients they catered for. Together we care for around 14,700 patients in the area. This makes us the third largest practice in Bradford.

Currently the patient lists for each site are still separate. That means that each of those 14,700 patients is either registered with Highfield Medical Practice or Bowling Hall Medical Practice, and can only be seen at that site.

One of the things we are determined to do as soon as possible is to bring our patient lists together so that each patient registered with us has the

option to be seen at either site.

This will also mean that the various different services we offer will be available to everyone, regardless of whether they were registered with Highfield or Bowling.

What does this mean for you?

Once our clinical systems have been brought together our patients will no longer be registered with one site or the other, but will be able to book in freely at either site.

This will give you more flexibility in terms of your appointments, and a greater choice of where and when to be seen.

Each site offers a slightly different set of services which will become available to everyone.

Of course we understand that this is a significant change. If you have any questions about the merger, or any concerns that you would like us to address, please let us know and we will be happy to talk about them.

You can let us know at reception or you can send us questions or comments through our practice web sites.

This issue of 'What's Up Doc?' is the first since our practice merged. If you have any ideas of suggestions to improve the newsletter please let us know.



LAUGHTER: THE BEST MEDICINE

Change is inevitable — except from a vending machine.

The Patient Voice

Join us and have your say

Our Patient Voice is a group of patients and members of staff from the practice. We meet every few months to talk about ways to improve the experiences people have at the practice. This part of our Newsletter is dedicated to bringing you feedback from our meetings during the last few months, and answering some of the questions that have been brought up.

The latest meeting:

Our most recent meeting was held on Friday 17th June 2016 at Bowling Hall Medical Practice. This was the first Patient Voice meeting involving patients and staff from both Bowling Hall Medical Practice and Highfield Medical Practice.

Practice Merger

While much has happened behind the scenes at both sites, the general impression is that there hasn't been any disruption from the perspective of patients. On a few occasions since the merger doctors have moved across sites to cover for staff sickness or shortage, which has helped us develop a better understanding of the differences in the way the two sites work.

A name has not yet been decided on for the merged practice. We have the choice of keeping the existing names in place or choosing a new name for both sites.

Electronic prescriptions are used at Bowling Hall but are currently not used at Highfield. This is something which we are aiming to implement at

Highfield in the near future. The electronic prescription service allows prescriptions to be sent to a patient's nominated pharmacy without the need to come in and collect a paper form.

There is very little difference in the areas covered by each practice. This means that both sites are already tailored towards the people living in this area.

Practice Access Action Plan

A CCG wide initiative has been set up this year aimed at encouraging practices to look at ways to improve access to their services.

One common theme in the feedback we receive is that people find it difficult to get through to us on the phone. It was decided that we should try and focus on moving away from using the telephone for every contact.

Ideas such as using text messages to send out test results, using e-mail more often and improving the information available on our websites and in our waiting areas were suggested.

It was also felt that increasing the information we provide about the health

and social care services available in the area would help. There are a number of organisations in the area who are there to help people with different needs, but sometimes it can be hard to decide which is the best service to contact.

The next meeting:

Our next meeting will be held in the early evening to allow for people who work to attend. The date and time of the next meeting are;

Date: Thursday 6th October 2016

Time: 5:00pm

Place: Bowling Hall Medical Practice

How to get involved

Anyone is welcome to join our meetings—just come to the desk at the time of the meeting. If you'd like to let us know beforehand you can do so via our web-site or you can let us know the next time you're in the practice.

Once we know that you're interested we'll send out invitations and agendas for our meetings.

Our meetings are held every 3 months or so. Once you've let us know that you'd like to get involved we'll send you the notes from the last meetings and info about the next.

Be prepared...

To make over your medicine cabinet

Coughs, colds, headaches and other common illnesses can leave you feeling unwell and struggling to carry on as normal. Be prepared by keeping a well-stocked medicine cabinet at home.

Please remember—most common winter ailments such as colds, sore throats, coughs, sinusitis or painful middle ear infections (earache) can't be treated with antibiotics.

What works instead?

Rest, drink plenty of fluids, take pain relievers like paracetamol or ibuprofen, and talk to your pharmacist for advice on getting the relief you need.

What should I have in my medicine cabinet?

All it takes is 5 minutes to make sure your medicine cabinet is ready to help you manage common illnesses. We recommend your medicine cabinet should contain the following:

- ✓ A self care guide
- ✓ Painkillers, such as paracetamol or ibuprofen
- ✓ Antihistamines for allergies
- ✓ Antiseptic cream for bites and stings
- ✓ A laxative to help constipation
- ✓ Sunscreen
- ✓ A first aid kit with plasters and bandages to manage cuts and sprains

How Long Will My Illness Last?

Every illness is a little different, and some people may take longer to recover than others. In general, for these common ailments you should expect to have symptoms for;

- ⇒ Middle ear infection – 4 days
- ⇒ Sore throat – 1 week
- ⇒ Cold – 1.5 weeks
- ⇒ Sinusitis – 2.5 weeks
- ⇒ Cough – 3 weeks

Your local pharmacist can give you helpful advice about keeping a well stocked medicine cabinet and recovering from minor illnesses.