



# The Desborough & Hazlemere Surgery NEWSLETTER

April 2017

[www.desborough.gpsurgery.net](http://www.desborough.gpsurgery.net)



@desandhazgp

### Your Doctors

Dr.N.Reidy  
Dr.P.Luque  
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Dr.A.Ivanova  
Dr.N. Thevarkad  
Dr.T.Ngo

### Practice Manager

Philip Traynier  
01494-526006

### Deputy Practice Manager

Anthony Hari

### Reception Opening Times

8.30 to 6pm  
Monday to Friday

### Out Of Hours

Call 999 in an emergency.  
Chest pains and / or  
shortness of breath  
constitute an emergency.

**NHS 111** service if you  
urgently need medical  
help or advice but it's not a  
life-threatening situation.

### **'One Problem Per Consultation' policy**

Each appointment is only  
10 minutes long. Ten  
minutes really is not a lot of  
time, even for just one  
problem, e.g., 1 minute to  
get to doctor's room and sit  
down, 3 minutes to tell a  
history, 3-4 minutes to  
perform targeted  
examination, 2 minutes to  
explain, advise and  
treat. There is no time left  
of the ten minutes to write  
up notes, fill out forms,  
dictate referrals or speak to  
other team members for  
advice.

A family agreement is a great way to start a conversation with your whole family about how you all use the internet and discuss together how to behave in a positive way when online at home, at school or at a friend's house. Our **family agreement advice** provides a list of things to consider when creating a framework that will help families set clear expectations for positive and safe internet use. The agreement template is available on the Childnet website.

## Things to consider...

### Keeping safe

- How safe is our personal information?
  - Do we have strong passwords? Eg capital letters, symbols etc
  - Do we all have usernames that don't reveal our full names?
- Have we considered parental controls which would be right for our family?
- Have we discussed online friendships and whether we can trust them?
- Do we need a family email address?
- Who will we talk to if we feel uncomfortable about anything we have seen or heard online or on a mobile phone or gaming device?
- When is it okay to download files, games or apps?
- Have we checked the reviews and ratings for apps and games?
- Which websites are okay for us to use?
- Should we open links from people we don't know?

### Social networking

- Do we know the age requirements to be on social networks?
- Who can I post photos of online?
- Do I know why it is important for my accounts to be private?

### Gaming

- Which age rated games can I play?
- Am I aware of why PEGI is important?
- Can I play online with people I don't know?

### Positive online behaviour

- How can I be a good friend on the internet?
- What will I do if I receive frightening or bullying messages?

### Healthy lifestyle

- How long can we spend online?
- Do we spend the same amount of time enjoying our offline activities?
- Where can we use our devices around the house?



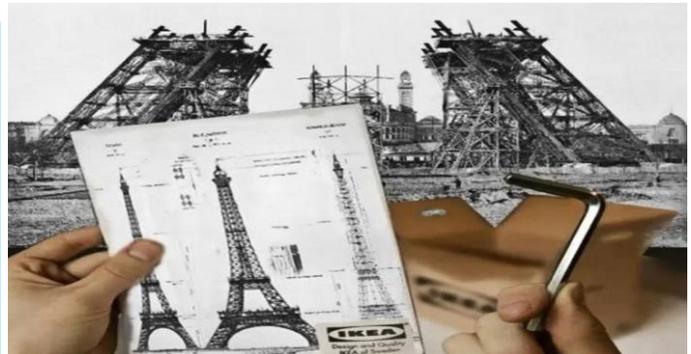
[www.childnet.com/have-a-conversation](http://www.childnet.com/have-a-conversation)

Free Dementia Information & Support Sessions which are taking place at the Downley Community Centre, School Close, Downley, High Wycombe, HP13 starting Wednesday 26th April and running for 6 consecutive weeks from 10.30 – 12.30pm.

The sessions are for people who are in the early stages of dementia and will last for approximately 2 hours each week. The workshops will include practical tips and coping strategies, group discussions, provision of information about dementia and how to live well and practical support to create and maintain a support network.

There is no charge for this service and places are limited.

Memory Support Service T: 01296 331749 or e: [memorysupport@alzheimers.org.uk](mailto:memorysupport@alzheimers.org.uk)



Dream destination when you're a kid

Dream destination when you're an adult



## Don't be a DNA

A **DNA** is somebody who **Did Not Attend** a pre booked appointment and did not advise us that they could not attend beforehand. The clinic was ready, the staff were ready, but the patient **Did Not Attend!** We do understand that from time to time patients are unable to notify us due to a hospital admission.

## Get the right treatment

Every year, millions of us visit our GP with minor health problems that can be easily resolved without a doctor's appointment. It is estimated that every year, 50 million visits to the GP are made for minor ailments such as coughs and colds, mild eczema, and athlete's foot. By visiting your pharmacy instead, you could save yourself time and trouble. Keeping a well-stocked medicine cabinet at home can help you treat many minor ailments. Colds, coughs, indigestion and many other minor complaints can all be treated with medicines that are available over the counter. Your pharmacist can advise on what you might find useful to keep in your medicine cabinet. Always follow the instructions on the medicine label and consult your doctor if the illness continues or becomes more severe.

## Why wait? Book your appointment online

***Book and cancel appointments with your doctor or nurse online, when it suits you. No more phoning the surgery.***

***Self-register online today @  
[www.patient-services.co.uk](http://www.patient-services.co.uk)***

Additionally, if you want to order repeat prescriptions and have access to GP records;

We will need to check who you are to make sure you only see your record and not someone else's. Just like your bank or the post office when you pick up a parcel, your surgery wants to protect your records from people who are not allowed to see them.

The steps below explain how this works.

1. Tell us you would like to start using online services.
2. We will give you a short form to fill in and sign to confirm you agree with the information on the form.
3. We will then check you are who you say you are. They will do this in one of three ways: • Photo ID and proof of address, for example, a passport or driving licence and a bank statement or council tax statement. • If you do not have any ID and are well known to us, a member of staff may be able to confirm your identity. • If you do not have any ID and are not well known to us, we may ask you questions about the information in your GP record to confirm the record is really yours.

We will then give you a letter with your unique username and password. It will also tell you about the website where you can login and start using online services.

## Know the signs of a stroke – Act **FAST**



According to research from Public Health England, a quarter of people would wait for more than one symptom of a stroke before calling an ambulance. But it's important to future recovery to dial 999 immediately if you notice any of the main symptoms of stroke.

The Act **F.A.S.T.** campaign reminds us that these are:

- **Face** – has their face fallen on one side? Can they smile?
- **Arms** – can they raise both their arms and keep them there?
- **Speech** – is their speech slurred?
- **Time** to call 999 if you see any single one of these signs of a stroke

## Medicine waste

Unused prescription medicines cost the NHS in the UK an estimated £300million every year. This could pay for:

- **11,778 MORE community nurses or**
- **80,906 MORE hip replacements or**
- **19,799 MORE drug treatment courses for breast cancer or**
- **300,000 MORE drug treatment courses for Alzheimer's**
- **312,175 MORE cataract operations**

But there are ways you can help reduce the cost of wasted medicines! Wasted medicine is everyone's responsibility and there are small changes you can make to help reduce the amount of medicine being wasted. Remember, to only order what you need and help us make more of your local NHS. These savings could be reinvested into more front line care and services for the benefit of all. For further information on the medicine waste UK campaign you can visit their website

[www.medicinewaste.com](http://www.medicinewaste.com)

## Mental well being

# HOW TO STAY MENTALLY HEALTHY AT WORK



- GO HOME ON TIME
- TAKE A LUNCH BREAK
- SET REALISTIC DEADLINES
- TAKE YOUR HOLIDAY LEAVE
- ALLOCATE TIME TO DO THE THINGS YOU ENJOY



beyondblue

## Tips for reducing salt intake

### A recipe for a tastier and healthier life

- To taste food as it really should taste, use less salt (and less salty ingredients such as soy sauce, stock cubes, and powdered seasoning) and more tasty ingredients such as ginger, lemon, chilli, garlic and fresh herbs
- This will lower your blood pressure and the risk of stroke, heart disease, heart attacks as well as osteoporosis, kidney disease and stomach cancer
- We are meant to eat less than 6g salt per day - less than a teaspoon, but we are eating much more
- Cook vegetables and carbohydrates, such as potatoes and pasta, without adding salt



#### Try to use more

Herbs  
Spice  
Lemon  
Pepper  
Chilli  
Garlic  
Ginger  
Low salt stock

#### Try to use less

Bacon  
Cheese  
Ready made stock  
Tomato ketchup  
Mustard  
Soy sauce  
Ham  
Ready made sauces

- If the recipe says to 'season to taste' or 'add salt' – just leave out the salt!
- Leave the salt shaker in the kitchen cupboard, not on the dining table
- Ask for **Less Salt Please**

Download our free FoodSwitch App and start making healthy choices today!



## GP Receptionists are invaluable

### A Guardian newspaper article;

There has been talk for some time of there being far too many non-clinical staff working for the NHS and that cutbacks need to be made. A recent report commissioned by the Department of Health has suggested that one way of addressing this would be for patients to book appointments with their GPs via remote call centres rather than through receptionists at their local surgeries. For those of you who have GP surgeries with fierce, fire-breathing receptionists and phone lines that are constantly engaged, this may seem like an appealing prospect, but to me this appears to be yet another ill-thought-through attack on the fundamentals of primary care. It also clearly demonstrates a massive under appreciation of the true value of the much maligned GP receptionist.

At my surgery our head receptionist, Sue, is worth her weight in gold and I for one would fight hard not to lose her. She has had minimal formal training and gets paid less than £x per hour, but her value to the doctors, nurses, patients and general smooth running of the practice is immeasurable.

Sue has been working at our surgery for ever and she seems to have a personal relationship with almost every one of our patients. She knows that Mrs Walsh never makes a fuss so if she requests a home visit she really needs one. She also knows not to book in Mr Jacobs, who is a heroin addict, with the locum doctor on a Friday afternoon as he will try to pull a fast one and get extra diazepam for the weekend. She knows that Mrs Michaels needs to be booked in to a downstairs room as she can't manage the stairs and that when Mr Chambers books in for a blood test he needs a double appointment and a cup of sweet tea ready as he is prone to fainting dramatically at the mere sight of a needle.

She has an amazing way of placating a full waiting room of fuming patients when I'm running an hour late and she always gives me an urgent call if someone looks really poorly and needs to be squeezed into an already full surgery. Admittedly she can also occasionally fulfil the stereotype of the fierce dragon receptionist barring the path to seeing the doctor, but from our point of view she is our only line of defence against a constant barrage of demands that without her careful triaging would mean we never got to go home.

Another factor from this report appears to be a misunderstanding of how primary care is managed. GP surgeries are privately run businesses working within the NHS. We make our own decisions about how we organise appointment systems and reception areas. Paying idle receptionists to sit around reading magazines and drinking tea really isn't in our interests.

*Continued on the next page*

On the rare occasions that the front desk and phones are quiet, our receptionists are sorting the post, processing repeat prescription requests or calling patients in for blood tests and blood-pressure checks.

There are some really quite entrepreneurial, penny-pinching GP's out there and if there was a way of outsourcing booking appointments without compromising patient care, it would have been done by now. At our surgery we have introduced an online booking system to try to take some pressure off the phone lines and make life easier for our patients. This is great for the 30-year-old who wants to book an appointment next Thursday to discuss their possible lactose intolerance, but when 93-year-old Ethel phones from the floor of her living room, unable to get up after yet another fall, she needs to speak to Sue.

So if we are going to reduce the amount we spend on non-clinical staff in the NHS how are we going to do it? Well, in my surgery we have two managers and two doctors. This is clearly a ridiculous ratio. One of our managers is the practice manager. She organises the staff, deals with complaints, pays the bills and makes sure we don't run out of toilet roll. She manages the day-to-day running of the business so we doctors can get on with seeing patients, and it would be really hard to function without her.

The other manager is basically our "targets manager". She works nearly full time simply making sure we reach all our targets set from above so we make enough points and therefore money to keep the practice running. This income has been labelled by some as "GP bonuses" but it is simply the way in which we get paid and if we didn't reach these targets we wouldn't be able to take home a salary each month.

These targets are based on things like making sure we record which of our patients smoke and filling in a "depression questionnaire" on all our patients started on an antidepressant. The targets seem to change and grow in number every year and an increasing number of hoops need to be jumped through in order for them to be met. Many of them seem to have very little direct impact on patient care, but we are paying a near full-time member of staff to make sure all this data is correctly recorded and audited.

So if the government decides that general practice is too expensive and they are going to give practices like mine a little less money each year, please take away some of the hoops we have to jump through and reduce the numbers of targets we have to reach. We can afford to lose backroom staff like "targets managers" but we can't afford to lose receptionists like Sue. She's a frontline member of staff and a vital member of our team.

- *Identifying features of people mentioned in this article have been changed*

# Food Allergy Word Search

ALLERGIST	S X I B L I H N Z V P T G H R H
EGG	N H L S V G I Z T M A X Y B K Z
EPIPEN	G L E F P I U E R T U N A E P I
FISH	R E M L Z F J Z E R Z A J V W S
MILK	R V Z Z L E S T E R D X S E A L
PEANUT	J S I S O F P P N N D T P O K V
SHELLFISH	E E G Q U O I Y U H X I A L Y C
SOY	A L L E R G I S T V P O I E Q S
TREENUT	T J I J Y X X J H E Z M R D H M
WHEAT	R Z I S O R H X N C C H E G G W
	D T H R R R I G W J H K T V V H
	D K P V N T N K D X G Z H E O S
	Z W W I F W B G D B Q N V T O I
	W Q C Q U P G F C V I F T D Y F
	Q R E S X F L J Z P W K B S L F
	J B F Z G A K D L N C D W O O C

*If you have a food allergy make sure you know what you're allergic to before you eat food from a restaurant, at school or at a party. If you do have an allergic reaction to something you eat, you need to get help right away. Help your parents, teachers or caregivers know how to recognize the symptoms of your allergic reaction and how to treat it.*