

Balham Park Surgery

Patients Liaison Group

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Purposes of the Balham Park Surgery Patient Liaison Group (BPSPLG)

- To act as a liaison forum between patients registered at the Surgery and the GP, Nursing and Administrative staff employed at the Surgery in order to help the Surgery improve services to patients within the constraints on resources.
- To keep up with changes in the NHS and to keep patients informed about the services provided by the Surgery. The group arranges Educational talks on health issues twice a year.
- To represent the Group at local health meetings.
- To hold discussions about general patient concerns.

The BPSPLG is here to represent you. If you wish to raise any issue with the BPSPLG related to these objectives, email patientgroup@balhamparksurgery.co.uk or tell Reception who will pass on messages. We regret we cannot enter into discussions about individual cases or clinical matters; but we can raise matters of general interest at the next meeting.

Anyone can join the Group, email us to register interest or just come along to a meeting.

The Newsletter is published twice a year. It is distributed to any patient who requests it by email to those with access to the internet.

Meeting dates for 2016 (second Wednesday every month 7pm to 9pm, at the Surgery)

Meetings are attended by one of the GPs and the Managing Partner, Natalie Whyte, her Deputy and one of the receptionists. Any registered patient is warmly welcomed to join the BPSPLG. You can just turn up to meetings. Meetings this year are as follows:

9 March; 13 April; 11 May – AGM; 8 June – Education Talk – “Dermatology” by Dr Jagdeep Sandhu; 13 July; 14 September; 12 October – Education Talk (Antibiotics); 9 November; 14 December - Christmas Party.

Online Access and Medical Record Viewing

The Surgery is struggling to manage the sheer volume of calls coming in on a daily basis, in excess of 1000. For example, one day this month the reception team dealt with 1,235 incoming calls. Patients are now having to hold for longer and the receptionists are not able to spend as much time with callers as they would like. Doctors are spending longer returning calls to patients. Some calls could have been better managed in other ways. You can help. The Surgery would prefer patients whenever possible to use the online services. All you need is access to a computer or smart phone. Benefits include booking GP appointments, anytime, anywhere, 24 hours per day! Blood tests, nurse contraceptive pill checks can also be booked online. Online booking leaves less room for errors or confusion and avoids waiting in a call queuing system. You can message your doctor, you can access parts of your medical record - you are in control!

It is important to be aware that the Surgery will soon stop taking requests for repeat prescriptions via the telephone due to risks of error, which increases as the reception team becomes more stretched reception. In future, patients will be able to drop requests in to the Surgery using the tear off slip on the back of their last related prescription or in writing. Alternatively prescriptions can be requested directly online. This is another reason for you to sign up for Online Access – it's really easy to use.

Please note that patients who are housebound (or otherwise unable to visit) or who are unable to use online facilities, can request repeat prescriptions via their local pharmacy who will take the details and pass them to the Surgery and collect the prescriptions once processed.

To encourage patients to download the app, sign up and get familiar with the system, the Surgery has employed a graduate on a short-term basis. The assistant can be found in the waiting room ready to help. The Surgery will publish its success rate on the website.

Patients have for some time been able to view online their medications, allergies and adverse reactions record. Patients over the age of 18 can now view additional details of their own medical records. To gain access to your Online Medical Record, you must provide photo identity (passport or driving licence) plus one other form of proof of identity such as a bank statement or utility bill. (*You do not need to do this to use the general online services*). The consent form is available from Reception. Take up has been slow – perhaps because patients are not fully aware of the range of benefits beyond looking at medical records.

You do not need a computer or online access to see your medical records. You have the right to see what information is held on you under the Access to Health Records and Data Protection Acts, though there is a charge for this and requests must be put in writing. See the Surgery's website www.balhamparksurgery.co.uk for further details. Or contact Maria Nimer, Administrator on 020 8772 3322.

GPs Behind Closed Doors Television Series

As many of you will know from visiting the surgery and perhaps participating in the filming, or from watching television, the surgery has featured in the Channel 5 series 'GPs Behind Closed Doors' broadcast between October 2015 and June 2016 over 35 episodes. The producers of the series wanted to show the varied tasks and responsibilities of GPs in the light of critical press coverage of the NHS. General practice consumes a bare 10% of the budget yet takes on 90% of the workload. The Surgery fully supported these aims and decided to allow the cameras in after important issues such as confidentiality, in particular the right of individuals to withdraw their permission to be shown, had been settled. The Surgery accepted a certain amount of intrusion and a considerable amount of extra work

while Knickerbockerglory, the production company, filmed at the surgery. However, the results have led Surgery staff to view it as a wholly positive and worthwhile experience and are proud to have taken part.

The series succeeds in showing the work of the practice in an honest and realistic manner. It demonstrates the excellent medical and personal care provided by the surgery while being realistic about the issues facing staff. Apparently the actress Suranne Jones watched the programme in preparation for her role in BBC1's Doctor Foster so we may hope to see more realism in medical TV dramas.

The series has been well received not only by BPS patients but also nationally by professionals and the general public. Indeed one episode alone attracted an audience of 1.4 million viewers.

The response can be summed up by one person's Twitter accolade: "Making me feel proud of our NHS. This shows genuinely empathetic caring and understanding GPs doing an amazing job". The Patients Group watched a number of episodes together after the monthly meetings and concurs wholeheartedly with this praise.

If you have not seen the series yet, it is not too late. Programmes will continue to be broadcast on Wednesdays on Channel 5 at 8pm until 15 June or you can find them on catch-up <http://www.channel5.com/show/gps-behind-closed-doors>

Channel 5 generously supported the fundraising efforts of a former patient, Kevin Duckham, who sought to raise money for Trinity Hospice before his death in October 2015.

As a result of the filming, some of our doctors have been asked for comments on a number of topical medical issues in the national media. Dr Watson has written in support of the Junior Doctors Strike for The Mirror, Dr Beecraft and Dr Glynne have written various articles for The Daily Express. Dr Sara Kayat has regularly appeared on 'This Morning' as a medical expert.

Surgery Opening Hours

Phone lines operate 8.00 am to 6.30 pm Monday to Friday. However the Surgery is open early mornings, late nights and Saturday mornings for pre-booked appointments and general patient enquiries, bookings, registration, collecting prescriptions etc. The Surgery now operates three sessions (7am to 1.30pm, 2pm to 5.30pm and 6pm to 9pm).

Free NHS Health Checks

Patients aged 40-74 are entitled to an NHS health check to screen for cholesterol, diabetes and blood pressure problems. Please book an appointment for a fasting blood test. After you receive the results (usually one week), book a further appointment with Paa or Gloria (healthcare assistants) for a full health check. This will include advice on healthy living, diet etc.

Do you know that you now have a "Named GP"?

You may be aware that all GP Practices are now required to provide their patients with a 'named, accountable GP' and the surgery has set this up.

The GP Contract requires the named accountable GP to take responsibility for the co-ordination of all appropriate services required under the contract, and to ensure that they are delivered to each of their patients, where required, based on their clinical judgement.

All patients registered with Balham Park Surgery, including children, have a named GP listed in their clinical record. Patients have been allocated, whenever possible, to the doctor that they have most recently seen. In cases where patients have not been seen,

or the GP is no longer at the Practice, patients have been allocated to ensure an even distribution.

The Surgery will provide details when you visit the surgery, or when you are in touch on other matters such as prescriptions or for referrals. If you want to know the name of your allocated GP before then, please contact Patient Service Administration Team on 020 8772 3330, 020 8772 3332 or 020 8772 3333.

You can change your named GP if you wish to. Just tell Reception and we will organize for this to be amended as long as your preference is possible.

Please note that this does NOT prevent you from seeing any GP of your choice in the practice. You are unlikely to notice any change in the way care is delivered to you. Further details can be found on the [BMA website](#)

The Growing List and Extra Consulting Rooms

The Surgery list continues to grow; it now stands at 19,300+ patients. The good news is that after a two year battle the Surgery has secured funding to convert three upstairs administrative rooms into consulting spaces. Work should finish by August and this will allow for more patients to be seen during core times 8.00am-6.30pm. The new arrangements do mean there is greater capacity but it is hoped that extended hours mean resources are being used more efficiently and will offer greater flexibility to patients and staff. There are no plans to introduce 7-day working at this stage. We have introduced more extended hours and have now have clinicians working from 7.00 am until 8.00 pm Monday to Thursday in order to allow three sessions per day per room, which gives maximum usage of room. The Managing Partner, Natalie Whyte, would appreciate feedback from patients on the how the new systems are running.

Other changes to help manage the increased demand include the allocation of two on-call / duty doctors in the morning with a changeover to two others in the afternoon. They deal with patients who feel they cannot wait until the next routine appointment. On average these doctors receive up to 200 calls per day, with a phenomenal record of 237 calls one day recently. Urgent cases will be seen that day by the on-call doctor.

If you are looking for further information about a specific condition, the NHS Choices website, www.nhs.uk/Pages/HomePage.aspx is an excellent source of information for patients

Patient Feedback from the Friends and Family Survey

The Practice is keen to know how it can improve service to patients via the feedback system, "What can we do better?" Here are a few of the comments most commonly made by patients and the responses from the Surgery. If you have any suggestions, please do let us know, either using the form available in the Reception room or via our website www.balhamparksurgery.co.uk

Patients say: "It is very difficult to get an appointment. It used to be much easier. Sometimes you have to wait for a long time to get an appointment."

It is a sad reality that with growing demand and reduced funding we struggle to provide routine appointments at a time that suits all our patients. We are constantly reviewing demand for appointments and achieving the balance for on-the-day and pre-bookable appointments is a continuous challenge.

The Dr On-call system provides a safety-net. If you feel that the next routine appointment is too far away, you will be offered a telephone call from the on-call Doctor that day. They will

assess your needs and discuss the appropriate treatment with you. This may include coming into the surgery at a time that the on-call Doctor will agree with you. With the increasing number of calls on a Monday we will be introducing an On Call Bookable afternoon surgery with effect from Monday 4th April.

Patients say: “More staff and Doctors.”

Compared with many practices with our number of patients, we have a larger than average workforce. We would love to have more staff as it would ease workload pressures and increase availability of appointments. We do have constraints on room space and of course funding. With our growing list we have introduced 7.00 am to 8.00 pm working, Monday to Thursday. This allows three sessions per day per room, which would enable maximum use of rooms. We are also exploring working with the organisation that we lease the building from NHS England, to explore ways to expand our consulting space.

Patients say: “Continuity of doctors and having a relationship with one doctor to benefit client history.”

The new 'named, accountable GP' system (referred to above) addresses this issue. We do not advertise widely the areas that GPs have the lead in clinically because it is important for doctors not to become overwhelmed with a single subject area. They need to remain competent in general practice and would be at risk of losing skills if they saw mainly conditions in which they are especially interested or particularly knowledgeable. Experts in particular areas are used as an educational resource internally for other clinicians to seek advice from, and the team benefits from them providing educational updates as appropriate.

Patients say: “More nurses’ appointments for the contraceptive pill; and online nurse appointments.”

We find that national initiatives such as flu vaccines and cervical screening call-ups often impact on the availability of nurses’ appointments. Therefore we are always happy to issue a months’ supply of contraceptive pills by phone and then you can make an appointment with a nurse at a time convenient to you. Our IT team are looking into Online Nurses’ appointments which has been on our “wish list” for some time. Unfortunately it is more complicated than you may expect due to the varying lengths of nurses’ appointments for different procedures. We have recently been able to introduce nurse pill checks and blood test appointments on line.

Patients say: “Make it easier to get results of blood tests etc., rather than using up a GP appointment.”

Many of our doctors will send you a text message once the results are back, if we have your mobile number. Alternatively please phone Patient Services on 020 8772 3330/3333 between 9.00 am and 4.00 pm, or Reception 020 8772 8772 from 8.00 am to 6.30 pm as the doctors may have left a message, or we can organise a call/text from the GP when they are next available.

Patients say: “Ensure that appointments are on time.”

Our GP appointments are ten minute slots and doctors do their best to run to time. Sometimes they will spend longer with patients to save them having to return. However it may sometimes be necessary to book another appointment. Inevitably there may be clinical reasons why a doctor has to spend longer with a patient, for example where a case is more complex. We hope that you will understand and support us when this happens. It may help patients to know that if you feel that the issue(s) you have may take longer than ten minutes you may request to book a double appointment. We provide early morning, late night and Saturday appointments. If you have limited time to wait, it is always worth asking to book the first appointment of a clinician's session, as at that point they are most likely to be running to time.

Education Talks

The Group holds two Education Talks each year, usually in June and October. The Group choose subjects that are about important current health issues. We are lucky to have a range of in-house expertise in the practice. Otherwise we look for outside speakers. Suggestions for future topics are always welcomed. These are informative talks with the opportunity to ask questions and are well attended by a wide range of patients. Issues covered in 2014 were 'Dementia' and 'Diet & Fitness'. In 2015 we heard about 'Mental Health' and 'Allergies'. The next talk on 9 June will be on 'Dermatology'. The topic for the talk on 12 October will be on Antibiotics. The talks take place in the upstairs room at the Surgery and all patients are welcome. Do make a diary note to save the date.

Here are summaries of the last two talks:

Allergies Talk

Dr Sarah Glynne, one of our GPs who specialises in allergies and asthma and is currently studying for an MSc in Allergy at Imperial College, gave a highly informative and well-attended talk on allergies in September. It is difficult to do justice in this newsletter to her knowledge and enthusiasm but here is a summary of what she said:

Broadly there two forms of adverse reaction to food or other substances. It is important to distinguish between them to exclude other conditions such as coeliac disease and to ensure the appropriate treatment is followed.

1. ALLERGIES, or immune-mediated diseases (IMID), refer to any group of conditions or diseases characterised by inflammatory reactions (for example asthma, eczema and hay fever) which may be triggered by a breakdown in the immune system. Reactions can be sudden and severe but this is not the norm. Diagnosis is not straightforward: allergy tests only diagnose 'type 1 allergy' (there are 4 types of allergic reaction) and are wrong 50% of the time. Clinical context is vital.
2. INTOLERANCES, or Non-immune (or IgE)-mediated reactions, are most frequently food related. They are characterised by slow onset and chronic (long-lasting) symptoms. Intolerances are more common than allergies and have a number of different causes, such as enzyme deficiencies, a reaction to certain chemicals (eg caffeine) or to toxins (eg kidney beans or shellfish), rather than a breakdown in the immune system. Intolerances can be difficult to diagnose because reactions can be delayed and tests may not be conclusive. Symptoms include tummy upsets, rashes, joint pain, and even fatigue if the body does not absorb all the nutrients it requires. People suffering from food intolerance can usually eat a small amount of the food without experiencing any problems.

Studies show that from the late 1980s there has been a marked increase in the number of children with allergic diseases and food intolerances in the western world. Asthma for example may be described now as an epidemic. One theory is that the decrease in childhood infectious disease due to multiple causes may have led to the rapid rise in allergic disease. Scientists are now pointing to the important role microbiomes play in our health and the importance we should attach to establishing and maintaining healthy guts by following a good diet.

The take-home message is DIRT IS GOOD FOR YOU – seriously, over-zealous cleanliness can inhibit the natural development of immunities. Sarah showed a slide of a child licking the snout of a pig to make her point. While this might seem extreme, the message is clear.

How is allergy managed?

- First seek a diagnosis via a GP who will take a history and may refer you to an allergy clinic. (But be aware that tests are not definitive; up to 50% of tests may offer a false-positive result.)
- Avoid the offending substance and look for substitutes.
- In some cases, medication may be beneficial.
- Keep yourself informed about the condition – it is a rapidly changing field. A good website for parents with a child with food allergies is <http://www.itchysneezywheezy.co.uk>

Due to the complexities of allergy problems, a multi-disciplinary approach may be best.

Mental Health

Dr Mark Draper, a Consultant Clinical Psychologist and Cluster Lead, Wandle, gave a thoughtful talk on mental health.

He described the difference between a Psychiatrist and a Psychologist and their separate functions: the Psychiatrist is a qualified doctor who obtains a physical description of the condition, offers a diagnosis and, if necessary, prescribes medication. The Psychiatrist will often be the lead professional in a multi-disciplinary team. The Psychologist has a degree in Psychology and attempts to understand the role of mental functions in individual and social behaviour. This insight is used to guide treatment, usually by means of what is termed “Talking Therapies”, alongside medication prescribed by doctors in some instances.

Mark provided an overview of the most common types of mental health disorders and offered guidance on available treatments, highlighting what could be accessed via the NHS.

Psychosis is “a serious mental illness” (includes Schizophrenia, hallucinatory and delusional thoughts and Bi-polar disorder) which should be treated by a psychiatrist who may be accessed via a GP.

Neurosis, Anxiety and Depression are the most common forms of mental disorder and can become lifelong conditions without treatment:

Anxiety covers many conditions such as Post Trauma Stress Disorder (PTSD), Obsessive Compulsive Disorder (OCD), specific phobias (including social phobias), Acrophobia, Acute Stress Reaction, Hypochondria. All anxiety disorders are either directly the result of stress or are exacerbated by stress. Stress occurs when perceived demands exceed perceived ability to cope which is why it is dubbed the “the silent killer” if left untreated. For this reason it should not be taken for granted (“I’m that kind of person”) nor pushed aside.

Depression There are essentially three types of depression: i) A depressive episode from which we may recover spontaneously; ii) a Recurrent Depressive Disorder which comes and goes; iii) Dysthymic Depression, a long-term oppressive and serious condition. Symptoms include a persistent, low mood; poor concentration; withdrawal, low energy; lack of motivation; loss of appetite, disturbed sleep; decreased libido; anxiety; guilt; suicidal thoughts; hopelessness. Someone may display only a few of these symptoms and may give the outward appearance of coping but seeking help early on is advisable since studies show that 50% of people recover permanently from a single, treated episode of depression whereas the chances of recurrence rise to only 20% if left untreated.

There are many other conditions, too many to list, such as eating disorders and mood fluctuations which should not be ignored.

Causes

Mark outlined the causes of mental disorders as follows:

- Genetic. Many conditions are inherited and the number of relatives we have with a condition appears to increase the likelihood of our being affected.
- Early experiences. Trauma, abuse, neglect and the quality of parenting can affect our mental health.
- Life events. These can trigger adverse responses as well as positive responses. The most significant factor is stress, which will affect people according to their underlying vulnerabilities.

Getting Help Mark emphasised the importance of seeking help. It seems women are more willing to seek professional help while men often respond by turning to alcohol or drugs, or by indulging in angry or violent behaviour. Mark suggests more should be done to encourage men to get help. This is where family and friends can assist. There are two approaches which are not mutually exclusive:

- **Medication.** The most common are SSRIs which are non-addictive and even if used over the long term are not harmful.
- **Psychological Talking Therapies.** These come in many forms, principally: Counselling, an empathetic, non-judgemental, non-interventionist approach which focuses on emotions and can be relatively long-term. Psychodynamic, e.g. Freudian therapy, which encourages free association.
- Interpersonal therapy focuses on relationships and the impact of moods. You should be aware that **counselling and therapies of this kind are very hard to find on the NHS and there is NO free counselling in Wandsworth.** The NHS does, however, provide Cognitive Behavioural Therapy (CBT) which seeks to help people cope with problems by changing the way they think and behave. It has been shown to have lots of positive results based on good research. It is a relatively quick programme (typically 8 – 12 sessions).

See www.nhs.uk/Conditions/Cognitive-behavioural-therapy/Pages/Introduction.aspx.

Some additional thoughts arising from Mark's talk

Wandsworth IAPT Service is part of the national initiative to help people with common, non-severe, mental health problems gain timely access to effective psychological therapies. Services are available to Wandsworth residents, or those with a Wandsworth GP. Access is through self-referral (see website), or by telephone or via your GP. Up to 20 sessions are offered for free. See www.wandsworthiapt.nhs.uk/about-us The IAPT works in partnership with Big White Wall which provides therapy out of hours 24/7. www.bigwhitewall.com/landing-pages/landingv3.aspx?ReturnUrl=%2f#.Vq3ScPmLTcs.

What others can do to help

- Listen. Ask HOW someone wants to be helped.
- Inform yourself of available resources and discuss the best approach with the person you are helping. Encourage them to take the all-important first step towards getting help.
- The best source of help in first instance is www.wandsworthiapt.nhs.uk , or discuss with a GP directly.
- Encourage the affected person to engage more in activities. There is increasing evidence to show that active people are less prone to mental health disorders but do be careful not give the impression you expect someone to “snap out of it”.

Surgery News

We welcome several newcomers:

A warm welcome to our newest Registrars. These are doctors specialising in General Practice training with us for a year, or longer if part time. They have allocated trainers at the surgery and see patients routinely like other GPs:

Dr Jag Sandhu

Dr Kylan Stray

Dr Kavita Sharma

and Dr Natalie Atere-Roberts

Dr Clemence Mitchell

We also welcome Dr Devora Vinick to our team, an experienced GP, previously working at a practice in Streatham.

We have a new Reception Manager Lorraine Hayles who has a long career history in Customer Services Management at Lloyds Bank and two new receptionists, Cheylan Charles and Wasif Hussain. We are continuing to recruit.

We sadly say goodbye and good luck to:

A fond farewell to Dr Elin Cox, Registrar, who left having completed her year, to move to an ENT posting at St Georges.

Congratulations to Dr Sian Morris who went on Maternity Leave after Christmas and has since given birth to a healthy baby girl, Emilia.

A sad goodbye to Anna Neill, Deputy to Natalie Whyte, Managing Partner. She leaves us after 8 outstanding years of service occupying Reception Management, Finance Management and latterly the Deputy role. Siobhan Moriarty takes her place as new Deputy to the Managing Partner. She has experience of this role and of Reception Management. She will be coming to the BPSPLG meetings on the second Wednesday of every month at 7pm. (A plug to come and join the group!)

Receptionist, Ebere Nwoko has left us to pursue a more creative career. Helen Elliott is being trained up to replace her.

We will have GPs going on maternity leave, adoption leave and relocating out of London this year. We are recruiting to replace these positions.

GPs Behind Closed Doors filming finished on 12th February. The crew from Knickerbockerglory were very sensitive to our needs and we really felt that they were part of our team. Whilst we are sorry to lose new friends the communal spaces here will be a bit quieter and we will have a little more room upstairs to manoeuvre.