

THE NEWSLETTER JUNE 2013

Datchet Health Centre Patient Participation Group



The NHS reorganisation that included the creation of GP led Clinical Commissioning Groups (CCGs) has been active for two months now. The CCG for our area, Windsor, Ascot and Maidenhead (WAM), is keen for patients to be aware of their work. The CCG governing body will hold a meeting in public on 5th June; unfortunately, notice was provided too late for us to inform Datchet patients in good time. The CCG supports and fosters PPGs in their area through PPG Network meetings which representatives of the PPGs and the CCG attend. The National Association of Patient Participation (NAPP) has organised a nationwide PPG awareness week from 1 to 8 June.

In our PPG we are considering how we can be more effective. We think it important to involve as wide a range of patient representation as possible. Our meeting time, 1:30pm, is suitable for the existing membership but it excludes many others. Changing to evening meetings might attract other members, but several of the present members would be unable to attend. One possible solution is to alternate meetings between daytime and evening in the hope that a core of members could attend both even if all could not. This arrangement has been adopted for the PPG Network meetings, mentioned above. We are also considering the recruitment of "Virtual Members", patients who cannot come to the meetings but who are willing to participate by email

If you can offer any suggestions, or would like to join us, actually or virtually, please let us know by email to datchet.ppg@gmail.com or in writing via reception. **Bill Joy, Editor.**

Practice Closures

The practice will be closed for training on the following dates:

TUESDAY	11TH JUNE 2013	1.30PM - 4.30PM
THURSDAY	1TH JULY 2013	12.30PM - 6.30PM
TUESDAY	10TH SEPTEMBER 2013	12.30PM - 6.30PM
THURSDAY	17TH OCTOBER 2013	1.30PM - 4.30PM
THURSDAY	21ST NOVEMBER 2013	12.30PM - 6.30PM

The whole afternoon closures allow doctors to attend area-wide clinical training sessions for all local doctors and nurses. Administrative team members are trained in-house in pertinent areas. It is appreciated that closures present an inconvenience for patients but it is important that doctors and nurses are kept updated on latest developments in clinical areas. **KH**

National MMR vaccination catch-up programme launched

New figures published in recent weeks by Public Health England (PHE) show high numbers of confirmed measles cases in England in the first three months of 2013. Experts believe the rise in measles cases can be mostly attributed to the proportion of unprotected 10-16 year-olds who missed out on vaccination in the late 1990s and early 2000s when concern around the discredited link between autism and the vaccine was widespread. At this time measles had been eliminated in the UK, but coverage fell nationally to less than

80% in 2005, with even lower uptake in some parts of the country. After many years of low vaccination uptake, measles became re-established in 2007. Cases are distributed across England with the highest numbers of cases in the North West and North East. Almost 20% of cases (108) were hospitalised and 15 people experienced complications such as pneumonia, chest infection, meningitis and gastroenteritis.

The aim of the national catch-up programme is to prevent measles outbreaks by vaccinating as many unvaccinated and partially vaccinated 10-16 year-olds as possible in time for the next school year.

Measles is a highly infectious viral illness. It can be very unpleasant and possibly lead to serious complications, including blindness and even death. Anyone can get measles if they have not been vaccinated or had it before, although it is most common in children aged between one and four years old. The measles virus is contained in the millions of tiny droplets that come out of the nose and mouth when an infected person coughs or sneezes. The virus spreads very easily, and measles is caused by breathing in these droplets or by touching a surface that has been contaminated with the droplets and then placing your hands near your nose or mouth.

Mumps is an infection caused by a type of virus called a paramyxovirus and is very contagious. It is spread in saliva, the same way as a cold or flu. This means it can be caught from an infected person coughing, sneezing, etc. It can also be caught from touching infected objects - for example, door handles. Mumps is normally a mild illness, but complications sometimes occur. This is why immunisation is important.

MMR Catch-up at Datchet Health Centre

In response to the national catch-up campaign, Datchet Health Centre will be offering MMR Vaccination Clinics that have been set up for children outside school times. Children who have not had any protection against measles, mumps and rubella will need 2 vaccinations one month apart.

The first clinic will be held on Saturday 8th June 2013 from 9am, with further clinics being held on Thursday afternoons/evenings and ad-hoc throughout the working week. Please contact the surgery on 01753 541268 after 10am to book an appointment.

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Upgrade to Telephone System

The telephone system was upgraded in February to extend the number of lines available to patients and to avoid patients being presented with the engaged tone on contacting the surgery. Following patient feedback it was clear that the transition has not been as smooth as was hoped and unfortunately some of the functionality that the upgrade was expected to provide was not achieved. The hope was that all patients would be connected to the system and that a 'queue' system would be in operation if the number of calls exceeded the availability of Reception staff. Unfortunately it appears that this is not the case and that some patients have had an engaged tone when the number of incoming calls has been over and above line capacity.

The practice remains in talks with the telephone system supplier to try and resolve the issues that have been reported and it is hoped that patients will see an improvement in telephone access in future. The over-riding aim is to improve the service

KH

Testicular Cancer

There is a lot of awareness about women's health with breast cancer screening and cervical smears. Testicular cancer is rare so is not widely spoken about but it is one of the potentially curable cancers if caught early. Well known men like Jeremy Kyle and Lance Armstrong have both been affected by this disease.

Testicular cancer is on the rise with 2100 men being diagnosed every year in the UK. It mainly affects men aged 15-44 and those over 60 years old. It is most common in European and North American men.

The usual symptom/sign of testicular cancer is a painless lump in the testes. You can get a heavy sensation or pain in the testes. Some people present with a swelling. It can be as vague as a change in how the testes normally feel or that the size of the testes has reduced.

Your risks of having testicular cancer increase if you have had the following:

Family history of Testicular Cancer

Testicular cancer in the past

Undescended testes

Infertility

If you have any of the above risk factors it is really important to self examine your testes at least **once a month**. Even if you don't have these risk factors you should be familiar with what your testes normally feels like so you would notice a change should it occur. The best time to do this is after a shower/bath when the skin is relaxed. Use your finger and thumb to feel for any lumps or change in size or shape of the testicle.

More than a third of men present late when the cancer has spread, don't let that be you. This is a curable cancer in 9 out of 10 cases so don't let embarrassment stand in the way of you seeing your GP.

For more information visit:

<http://www.patient.co.uk/health/get-to-know-your-testes-testicles>.

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Carers

You may have noticed that GPs have been asked to watch out for signs of depression in carers. The practice does maintain a carers register and this status is recorded in individual medical records. Also, two of the receptionists take a lead in providing information for carers. Any carers who are not on the register should inform reception if they wish to be included. If you feel the practice could offer further support, please leave a note with reception.

Suggestions Box

The practice has agreed that the Prescriptions Box, in the wall between the two sets of automatic entrance doors, may also be used as a PPG suggestions box. The reception staff will pass on to me any envelopes or messages addressed to the PPG

New GP

We are delighted to announce that Dr. Murali Sivanandan will be joining the practice on Thursday 20th June. Dr. Sivanandan will be working 7 sessions per week and he has a special interest in Ear, Nose and Throat services. We very much look forward to welcoming Murali to the practice. Together with the appointment of Dr Harish Bijjala in May this will provide an additional 13 sessions of GP time per week and we very much hope that patients will experience a real improvement in access to GP appointments.

Missed Appointments

The number of missed appointments, that is patients who fail to turn up without prior explanation, is getting worse. In the first four months of this year, 340 doctor appointments, and 252 nurse appointments were missed. The totals for the whole of 2012 were 742 and 514. These figures represent a year on year increase in the average annual rate of 37% for doctor and 47% for nurse appointments.

Each doctor session has 15 appointments, so about 22½ sessions or more than 11 full days of doctor surgery time was wasted in the first four months of 2013. Moreover, these were appointments that other patients were denied. It is easy to cancel an unwanted appointment and it is inconsiderate not to do so. Generally, if an appointment is cancelled at least 30 minutes beforehand, it can be re-allocated to another applicant.

The practice is concerned at the level of missed appointments and would like to bring it down. Sanctions against offenders may have to be used as a last resort. Any constructive suggestions will be welcomed.

Diary Date – Health Education Evening

Just a date for your diaries. Our next Health Education Evening will be held on Tuesday 17th September in the evening at Datchet Hall. The topic that we are discussing will be announced shortly.

Car Parking

Finally, I repeat the plea from the residents of Green Lane, Percy Place and Datchet Place who complain they are very inconvenienced by cars that are parked inconsiderately and obstruct the roadway; they allege that some of the culprits are visitors to DHC. They also say that some drivers drop passengers near the front door and block the road while waiting for the passengers to return.

If the car park is full, and you have to park nearby, please think of the neighbours. Drivers dropping off patients may find it more convenient to take the first turning on the left after entering Green Lane (towards the Village Hall), then turn right to approach the car park. There is ample space to drop off passengers alongside the disabled spaces adjacent to the covered way.

Please spare a thought for our neighbours.