### Winter Vaccinations

### Flu

This year's flu vaccination clinics start on 5 October and those eligible should have received a text message invite link for you to book yourself into a clinics, or you may have been called by one of our team.

In line with the advice and recommendations of the Joint Committee on Vaccination and Immunisation (JCVI), those eligible from 1 September 2024 are:

- pregnant women
- all children aged 2 or 3 years on 31 August 2024
- primary school aged children (from Reception to Year 6)
- secondary school aged children (from Year 7 to Year 11)
- all children in clinical risk groups aged from 6 months to less than 18 years

And from 3 October 2024 the following groups are eligible:

- those aged 65 years and over
- those aged 18 years to under 65 years in clinical risk groups
- those in long-stay residential care homes
- carers in receipt of carer's allowance, or those who are the main carer of an elderly or disabled person
- close contacts of immunocompromised individuals
- frontline workers in a social care setting without an employer led occupational health scheme.

Please book your vaccination slot as soon as you are invited or are called by our team

### **RSV**

Respiratory syncytial virus (RSV) is a common cause of coughs and colds. It usually gets better by itself, but it can be serious for some babies and older adults. From September the NHS is introducing a routine immunisation vaccination programme. You'll be able to get the vaccine if:

- You're aged 75 to 79. The Practice will contact you about getting vaccinated; please wait to be contacted.
- You're 28 weeks pregnant or more, as this will help protect your baby for the first few months after they're born. Please speak to your maternity service or the Practice about getting your RSV vaccination.

### **IN THIS ISSUE:**

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No longer need your appointment or telephone call-back?
Then please tell us!

**Voices**Open Meeting

Saturday 2 November 11:00; Medical Centre

All welcome Details on page 7



Barnabas Medical Centre





### **Covid Boosters**

Covid boosters will be available from 3 October. The following groups are eligible for this year's Autumn booster:

- adults aged 65 years and over;
- residents in a care home for older adults;
- individuals aged 6 months to 64 years in a clinical risk group;
- frontline NHS and social care workers: and those working in care homes for older people.

The NHS will contact eligible patients directly, but from 23 September you can also book your own appointments via the NHS App, participating pharmacies, drop-in clinics, or by calling 119.

The list of NW London sites offering Covid-19 vaccination is available at <a href="https://rb.gy/e99exo">https://rb.gy/e99exo</a>.

### **Whooping Cough (Pertussis)**

Pertussis continues to be a concern. Babies are generally vaccinated from 8 weeks of age. Additionally pregnant women are eligible for vaccination from week 16 of pregnancy, and this will protect their child until they are old enough to be vaccinated.

### Measles

The measles outbreak in London continues. This is worrying as only 75% of London children starting school have had both doses of MMR vaccine – far below the 95% needed to keep measles away. Parents are advised to check the vaccination status of their children and ensure they have catch-up vaccination if needed.



NW London Covid Vaccination Locations



Guidance for those with Covid Symptoms



BBC Report on Covid XEC



Guidance for those at High Risk of Covid

### **NEWS SHORTS**

### **Covid Update**

Yes, we all wish Covid had completely gone away, but it hasn't – despite what politicians would like us to believe. It's still potentially dangerous. Nor is it just another winter virus.

Judging by the few numbers available, we've come out of the summer wave. But after a brief lull cases are rising very steeply once more, heralding this year's fourth wave. These waves are so frequent that the troughs between them never reach very low levels.

Additionally there is a new variant, called XEC, which is gaining ground in many countries including the UK. It's a recombination of two earlier derivatives of the JN.1 variant; as such the latest vaccines should provide (some) protection. At the time of writing there is little data on the severity of illness due to XEC although it does seem to be able to spread quickly.

There's an early BBC report on XEC at <a href="https://shorturl.at/xc3nl">https://shorturl.at/xc3nl</a>.

So it remains sensible to take precautions, especially if you, or your family members, are vulnerable. And if you're eligible, please get your autumn booster jab as this is the best protection against serious infection.



### You said ...

You wanted more GP appointments.

### We did ...

By end of October we will have five salaried GPs working which will add an extra day a week of additional appointments.



### Glandular Fever

Glandular fever is an infection caused by the Epstein-Barr virus (EBV). It causes a sore throat, swollen glands and tiredness, and is most common between ages 15 and 24. Most people recover in two to four weeks, although many don't know they've had EBV as there may be no symptoms. Once infected you carry the virus for life as it lies dormant. About 90% of us have had EBV by the time we're adults.

The virus spreads in saliva, so you catch it by kissing, or sharing food or drink from a utensil of someone infected.

Symptoms of infection can take several weeks to develop, and can include:

- · extreme tiredness and lack of energy
- sore throat or tonsillitis
- fever
- swollen lymph glands in your neck, armpits or groin
- muscle and joint aches
- a rash

Symptoms usually start to improve in about two weeks; but you may feel tired and run-down for weeks or months.

You must get medical help immediately if you:

- have difficulty breathing; or wheezing when you breathe
- have difficulty swallowing liquids
- feel very unwell
- · have pain in your abdomen

Your GP is likely to want a blood test to confirm you have the virus.

You can relieve symptoms, and help recovery, by:

- · Getting plenty of rest and drinking plenty of fluids
- Taking ibuprofen or paracetamol for pain or the fever
- Gargling with soluble aspirin for a sore throat
- Abstaining from alcohol, contact sports & heavy lifting

Glandular fever mostly gets better on its own and there's no specific medicine for it. As it's a virus antibiotics won't work, so the aim is to ease symptoms.

Complications which can occur include:

- Swollen tonsils, which can cause breathing problems
- An enlarged spleen, which can rupture and require emergency surgery
- · Occasionally an inflamed liver and jaundice
- Tiredness may be long-lasting and lead to depression or chronic fatigue

You can help to prevent getting or spreading glandular fever by washing your hands often, and cleaning anything that comes into contact with saliva, like cups and glasses.

## NHS Online Services – Helpful Links & Videos

### **NHS App**

- You can download the NHS App from Google Play Store (Android) or App Store (Apple)
- Logon to NHS App Online: https://www.nhsapp.service.nhs.uk/login
- Video: Quick Guide to Register with the NHS App: https://www.voutube.com/watch?v=Q0SCcLtw8JA
- Video: How to Register with the NHS App: <a href="https://www.youtube.com/watch?v=4nRhmJ">https://www.youtube.com/watch?v=4nRhmJ</a> tll4
- Video: NHS Login without using Photo ID: <a href="https://www.youtube.com/watch?v=8KY2qKcA69M">https://www.youtube.com/watch?v=8KY2qKcA69M</a>
- Videos on Using the NHS App: https://digital.nhs.uk/services/nhs-app/toolkit/walk-through-videos

### **Patients Know Best**

- Logon to Patients Know Best: <u>https://my.patientsknowbest.com</u>
- Register on Patients Know Best: https://patientsknowbest.com/register/

### **Barnabas Medical Centre**

 Login or Request Access to Online Services at Barnabas Medical Centre: <a href="https://systmonline.tpp-uk.com/2/Login?PracticeId=E85127">https://systmonline.tpp-uk.com/2/Login?PracticeId=E85127</a>

### **NHS 111**

- Access NHS 111 by Phone: dial 111
- Access NHS 111 Online: <a href="https://111.nhs.uk/">https://111.nhs.uk/</a>
- Remember in a life threatening emergency call 999 immediately







NHS App Online Login



Quick Register Video



How to Register, NHS App



NHS App without ID



Walk through videos



Patients Know Best logon



Patients Know Best register



Barnabas online register & login



**NHS 111** 

### **NEWS SHORTS**

### Covid Inquiry Module 1 Report

The UK Covid-19 Inquiry under Baroness Hallett has released the report (only 240 pages) from its first module on our Resilience and Preparedness.

The inquiry found 9 major flaws and made 10 recommendations.

You can find a four page summary of the report at <a href="https://tinyurl.com/mwn9bfsm">https://tinyurl.com/mwn9bfsm</a>.

### **NHS App Flyer**

To go along with links & videos opposite, our patient group have produced a short introductory flyer to the NHS App. Copies are available in the waiting area and at <a href="https://tinyurl.com/bdfvmh8b">https://tinyurl.com/bdfvmh8b</a>.





NHS App Introduction Flyer



Covid Inquiry Module 1 Summary Report

### **Medical Terminology**

In this issue we're going to look briefly at a few miscellaneous, but common, medical terms you may come across.

- **BMI** Body mass index. Based on weight & height it's a measure of obesity.
- **BP** Blood pressure. How hard is your heart having to work.
- LMP Last menstrual period.
- **NAD** Nothing abnormal discovered. The tests haven't revealed anything.
- **AF** Atrial fibrillation. An abnormal heart rhythm. Sometimes referred to as AFib.
- **DVT** Deep vein thrombosis. A blood clot in a deep vein, usually the leg.
- **HRT** Hormone replacement therapy. Most usually to help women alleviate some of the issues with the menopause.
- **MRSA** Methicillin-resistant *Staphylococcus aureus*. An infection due to *S. aureus* which is resistant to most common antibiotics, and can thus be serious.
- **CT scan** Computerised Tomography scan. A very complicated way of looking at what's happening in a specific area inside you.
- **MRI** Magnetic Resonance Imaging. Another way to look inside you, usually at a spcific organ.
- **ECG** Electrocardiogram. A way of understanding how the heart is functioning by detecting the electrical impulses on the skin.
- **EEG** Electroencephalogram. Like an ECG but for the brain.
- **X-ray** Those pretty pictures which show broken bones etc.
- **US** Ultrasound. A way of using sound waves to image specific tissues, like an unborn baby, or a specific organ like the bladder.

\*\*\*\*\*

What other medical terminology would you like us to look at next? Please tell us – email <u>bb@barnabasvoices.org.uk</u> or leave a note for us at Reception.



### **Going to University**

Many of our younger patients will be going to, or returning to, university this autumn. Here are a few things you should do to prevent getting ill, and to be prepared if you do fall ill.

**Register with a GP** near where you live at university. Do not leave this until you are ill, and make it a priority if you have an ongoing health condition like diabetes, asthma, or epilepsy.

Check Your Vaccinations are Up To Date. You'll be mixing with lots of new people. In this environment infectious diseases spread rapidly. So ensure your vaccinations are up to date, especially:

MenACWY to protect against meningitis.

*Mumps*. If you've not had your 2 doses of childhood MMR vaccine, then ensure you get vaccinated.

*HPV*. This is a very common sexually transmitted disease. Girls have been offered the HPV vaccine at age 12-13; if you missed yours, it is free on the NHS up to your 25th birthday. Boys are now also offered the vaccine.

Flu. If you're eligible, get your flu jab.

Covid-19. Again if you're eligible get your Covid booster.

**Get Contraception.** This means all of you: boys and girls; whatever your gender or sexual orientation. You may not plan to be sexually active while studying, but things change in a new environment and with new people.



These links will always take you to the latest copies of this newsletter and our useful local guide What's Where near Barnabas.



The current issue of *Barnabas Bulletin* is always at <a href="https://barnabasvoices.org.uk/docs/Barnabas\_Bulletin.pdf">https://barnabasvoices.org.uk/docs/Barnabas\_Bulletin.pdf</a>



The latest issue of *What's Where near Barnabas* is always at <a href="https://barnabasvoices.org.uk/docs/Whats\_Where\_near\_Barnabas.pdf">https://barnabasvoices.org.uk/docs/Whats\_Where\_near\_Barnabas.pdf</a>

**NEWS SHORTS** 

### Barnabas Patient Voices

Barnabas Patient Voices is the patient group for Barnabas Medical Centre. The main aims are to:

- facilitate communication between patients and the Practice, and build good relationships with all who work at the Practice
- offer a patient's view on the services provided by the Practice and the NHS generally
- help the Practice and patients develop and improve overall healthcare.

**Barnabas Patient Voices** is run by patients for patients.

Improving healthcare together

### Join

# Barnabas Patient Voices

and help us work together to improve healthcare for all our patients.

Join online at <a href="https://shorturl.at/dlaX4">https://shorturl.at/dlaX4</a>



Join Barnabas
Patient Voices



Barnabas Patient Voices Website

### Barnabas Patient Voices

Improving healthcare together

Find us online at: <a href="https://barnabasvoices.org.uk/">https://barnabasvoices.org.uk/</a>

### Barnabas Patient Voices

### **Open Meetings**

Date for our last 2024 Open Meeting

### \* NOTE CHANGED DATE \* Saturday 2 November

Saturday 2 November 11:00; Medical Centre

All patients are welcome
Please email
chair@barnabasvoices.org.uk
for further details



### Barnabas Patient Voices

### **Officers**

### Chairman

Keith Marshall <u>chair@barnabasvoices.org.uk</u> 020 8864 7993

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### Vice-Chair

Harsha Mortemore



Email BPV Chair

### **Barnabas Patient Voices Corner**

**Updates from our Patient Group** 

### **Change and Progress**

Perhaps the most important thing that's happened recently in the BPV group is that we've had to rearrange our meetings for the remainder of this year. Unfortunately the Practice could not support our scheduled Saturday meeting in September, nor any of the nearby Saturdays. We therefore took the decision to delay the Saturday in person meeting to 2 November (see left) and scrap our November meeting on Zoom. We will start over with new dates, and hopefully more in person meetings, in early 2025.

Since I last wrote we've been able to reinstate two of our pre-Covid activities. Once more we have taken on managing the waiting area noticeboards and leaflets, so you'll see a lot of new posters. However anything which does not have the NHS imprimatur will be removed as the Practice should not be seen to be endorsing commercial activity.

The other re-enabled activity is our "Meet the Patients" sessions. On two half-days a month a couple of our members will be in the waiting area to chat to patients and offer (non-medical) information. As well as being sociable, in the two sessions held so far we've told a number of patients about the NHS App – and we've made available a brief introductory flyer about the NHS App (see page 5).

Our "Meet the Patients" sessions are scheduled for the rest of this year on the first Wednesday afternoon and the third Tuesday morning each month (providing volunteers are available) – dates below. Do feel free to drop by for a chat!

Keith Marshall, Chairman, Barnabas Patient Voices

Keith can be emailed at <a href="mailto:chair@barnabasvoices.org.uk">chair@barnabasvoices.org.uk</a>, contacted via the BPV website, <a href="https://barnabasvoices.org.uk/">https://barnabasvoices.org.uk/</a>, or you may leave a note for him at Reception.

The views expressed in this column are the author's and may not reflect those of Barnabas Medical Centre.

### "Meet the Patients" Dates for 2024

Wednesday afternoons (14:00-16:30): 2 October, 6 November, 4 December

Tuesday mornings (09:30-12:00): 15 October, 19 November, 17 December



# Why is it so Hard to Book a GP Appointment?

GPs were always under pressure, and this has got worse since the Covid pandemic. Even if we had more GPs and receptionists, the service charges only increase, and the National Minimum Wage has gone up over 10% in 2024. Meanwhile the NHS contract payment has increased by just 2% this year. Over 90% of NHS appointments are seen by GP surgeries, yet we receive only 7% of all NHS funding.

Unfortunately, we cannot do more with less.

So what are some of the day-to-day challenges we now face?

**High Demand.** The demand for GP appointments often exceeds the available supply. A growing population, an aging population, and increased awareness of healthcare services contribute to high patient demand. This results in longer wait times and limited appointment availability.

**Shortage of GPs**. There is a country-wide shortage of GPs in employment. Retirement, doctors leaving the profession, and difficulties recruiting new GPs all contribute to this shortage. The limited number of GPs means fewer appointments are available. The cost of locums is high so our ability to use them has to be restricted; they also affect continuity of care.

**Workload.** GPs have heavy workloads, managing many patients, dealing with administrative tasks, and home visits. This limits the time available for patient consultations, hence fewer appointment slots. Locum GPs can plug the gap for appointments but the ongoing admin for the patients they see returns to the regular GPs.

Complex Medical Cases. GPs are responsible for managing a wide range of medical conditions, including both acute and chronic illnesses, which may be complex. Some cases require longer consultations, or more frequent follow-ups, which will again reduce appointment availability.

**Referrals.** GPs refer patients for specialized care and investigations. When waiting times for outpatient appointments are long GPs may have to continue managing these patients in their own practices until they can be seen by a specialist. And if the waiting times for follow-up appointments are lengthy, patients may again turn to their GPs for interim care.

### **NEWS SHORTS**

### More GP Appointments in May than Before Pandemic

Despite the challenges GP teams delivered 30.5 million appointments during May 2024, compared with an estimated 25.3 million in May 2019. That's an increase of over 20%.

NHS staff continue to exceed the ambition to provide 50 million more appointments annually by March 2024, with the figures showing that GPs and their teams have delivered an extra 65.8 million appointments (excluding Covid vaccinations) over the year to May 2024, compared with 2018/19.

Looking at the publicly available data for Barnabas, in January-June 2024 the Practice provided 30,522 appointments compared with 27,810 in the corresponding period in 2023, an increase of almost 10%.



### **NEWS SHORTS**

### NHS Independent Investigation

One of the first actions of the new government was to ask renowned surgeon and independent peer, Lord Darzi, to undertake a rapid investigation of the state of the NHS, assessing patient access, quality of care and the overall performance of the health system.

Darzi's conclusion: the NHS is in critical a condition, but its vital signs are strong.

This was followed by a challenge: The NHS is now an open book. The issues are laid bare for all to see. And from this shared starting point, I look forward to our collective endeavour to turn it around for the people of this country, and to secure its future for generations to come.

Lord Darzi's summary letter is at <a href="https://rb.gy/17wysw">https://rb.gy/17wysw</a>





Lord Darzi's Summary Letter





Patients may also seek help from their GP to expedite their referral or address concerns arising from the waiting period.

**Covid-19** significantly impacted outpatient appointments. Hospitals had to adjust their services with many non-urgent appointments and procedures postponed or cancelled.

In addition, healthcare workers, including doctors and nurses, were reassigned to COVID-related duties, such as working in intensive care units, further contributing to delays in non-urgent hospital appointments.

### So what are we doing to address this?

**Staffing.** Difficult though the current situation is we are committed to recruiting more GPs and admin team to meet the demands of our patients.

Improved Ways of Working. We continue to review our processes and working methods, to improve and streamline them. This includes, improvement to the phone system, telephone triage to ensure that patients are seen by the most appropriate person within the Practice (not always a GP!) or are directed elsewhere if necessary.

Maintaining our Workforce. We have protective measures in place to keep patients and staff safe. There will be occasions where we simply have no more capacity to meet the demand. We are not an urgent or emergency care provider, but we do try to support same day needs to support continuity of care. However we do close at 6.30pm. It is important to know that most clinical staff are here before 8am, and dealing with complex medical issues all day. If we support our workforce, they will not burn out and will still be here for you.

We hope you will understand we have no control over the lack of qualified GPs to recruit and we are not able to shorten hospital waiting times. We also hope you will appreciate the moral distress experienced by a team member when they cannot give you an appointment.

Please don't say things like, "You don't care if I die". Because we really do care.

### **Mental Health Corner**

### **Tiny Changes**

Small changes can make significant improvements in our lives, whether that means setting aside a few minutes "me time" each day, or simply calling the people we love more often. These tiny changes can be a great way to give ourselves more space, more freedom, even more control of our lives.

Here are 10 ideas for small changes which you might find helpful ...

- Take small moments of rest throughout the day for micro-meditation. Give yourself permission to just sit, relax and breathe deeply for a couple of minutes at odd times during the day – like in the car before starting the engine.
- 2. Take a five-minute break every 60-90 minutes.
- 3. **Put your head under the bedcovers**. Life can be overstimulating, but you can reset your brain in just 10-15 minutes by cutting out the world completely.
- 4. **Stop saying yes when your gut says no**. Simply doing what you can, that you enjoy, when you can, fuels happiness. Practice saying "no".
- 5. **Embrace your introverted nature**. Accept that you're shy and an introvert and allow yourself the quietness to recharge.
- 6. **Be honest in every area of your life**. So you don't feel fine? Then don't say you are. Be truthful, but don't be dismal with it.
- 7. **Focus on doing what you enjoy**. If you don't enjoy it, don't do it. Find the exercise, hobbies, recipes, even work that you enjoy and you'll do them more, and more happily.
- 8. **Rescue trapped insects**. Insects are important for the environment and they get stuck indoors. Open a window and let them out, or trap them in a jar and put them outside. Feel good for a mini-life saved.
- 9. **Follow the "two-minute rule"**. If you can complete a task in less than two minutes, do it without delay.
- 10. **Do a timed 10-minute tidy every day**. Improving the cleanliness & tidiness of the house will help relieve depression.

There are lots of other ideas in a *Guardian* article at <u>https://tinyurl.com/bda7sv4h</u>.

### **NEWS SHORTS**

### Barnabas Bulletin Goes Biannual

Reluctantly we have made the decision to change to publishing this newsletter just twice a year, instead of quarterly as at present. Issues will now be published in March and September.

We regret having to make this change but it is a result of the amount of time and resource it needs from both the Practice and *Barnabas Patient Voices*.

### What do you want in Barnabas Bulletin?

This newsletter is produced to help you, the patients of Barnabas Medical Centre.

What would you like us to include?
What would most help you?
What is it about medical care you don't understand?

Let us know and we will try to include something in a future issue.

Please email your ideas to <a href="mailto:bb@barnabasvoices.org.uk">bb@barnabasvoices.org.uk</a> or leave a note at Reception.



Email <u>bb@</u>
<u>barnabasvoices.</u>
<u>org.uk</u>



Tiny Changes article

### **NEWS SHORTS**



# New Ealing Community Diagnostic Centre Opens

The Ealing Community Diagnostic Centre (CDC) at Ealing Hospital was opened in mid-August. It offers a range of diagnostic services including CT, MRI and ultrasound scans, and is intended to help ease pressure on existing hospital services and reduce waiting times. It is the largest CDC to open in North-West London and will serve communities in Ealing, Hanwell, Southall and Greenford, as well as supporting Brent and Harrow boroughs. GPs can make direct referrals to the centre.

There's a local press report at <a href="https://rb.gy/1lya4s">https://rb.gy/1lya4s</a>.

### Healthwatch Ealing Annual Report 2023-24

Our local Healthwatch have published their Annual Report for 2023-24. You can find it online at <a href="https://rb.gy/wjingv">https://rb.gy/wjingv</a>.



Healthwatch Ealing Annual Report



Ealing Community Diagnostic Centre

### **Cervical Cancer Cases**

There is good news in a study from Scotland ...

The study found that no cases of cervical cancer have been detected in young women who have been fully vaccinated as part of the HPV immunisation programme.

The Public Health Scotland research said the HPV (human papillomavirus virus) vaccine was "highly effective" in preventing the development of the cancer.

HPV is a sexually transmitted infection and is responsible for almost all cases of cervical cancer – the fourth most common cause of cancer in women worldwide.

The vaccination programme started in 2008 with girls offered the vaccine in their first year at secondary school, aged 12 or 13.

The vaccine, which is now offered to boys, also helps to protect them from other HPV-related cancers later in life, such as head, neck and anogenital cancers as well as genital warts.



### **NHS Pharmacy First Usage**

The NHS has released figures for NHS Pharmacy First Service covering February to April 2024. This new service allows community pharmacies to offer advice to patients and supply NHS medicines (where appropriate) to treat seven common health conditions without a prescription from a GP.

During the three month period there were 423,310 consultations by 9.976 pharmacies (that's an average of 42 per participating pharmacy). 78% of consultations resulted in a medicine being supplied to patients.

The consultation rates for each of the eligible conditions were:

Acute Sore Throat: 36.1%

• Uncomplicated Urinary Tract Infections (UTIs): 25.8%

• Acute Otitis Media: 14.4%

Sinusitis: 12.6%Impetigo: 4.9%

Infected Insect Bites: 3.2%

Shingles: 3%



### **Updates to the Universal Care Plan**

The Universal Care Plan (UCP) enables every Londoner who needs one, to have a digital personalised care plan, because "what matters **to** me" is as important as "what's the matter **with** me". The UCP is then available to emergency responders and clinicians, who of course may never have seen you before.

UCP is undergoing a major evolution. Following patient consultations the UCP is being transformed into a personalised care and support plan. Users have said they want a care plan that can include health needs, such as long-term conditions, and not necessarily only end-of-life care or palliative care. Nonetheless the UCP remains a tool for advanced care planning.

The UCP has been available for patients to view via their NHS website login or the NHS App since March 2024. It can be accessed via the NHS login website or NHS App, and an increasing number are viewing their UCP each month.

From summer 2024 the emergency care and treatment plan sections will be viewable by patients. This means patients can view their cardiopulmonary resuscitation (CPR) status and emergency treatment plan – a personal record of their decisions.

In future it is expected that patients will be able to update their UCP directly, via the NHS login service, and not have to rely on this being done by a clinician. This will allow patients to enter important information about themselves, including what matters to them and personal preferences. Providing this information to health and social care professionals will give further insight into how they wish to be assessed and treated.



### **NEWS SHORTS**

### CQC Adult Inpatient Survey

CQC have published the results of their 2023 survey of hospital inpatients. They surveyed over 63,000 people who had a hospital stay of at least one night in late 2023.

Headline results were:

- Waiting times have continued to decline.
- People's experience of being discharged from hospital remained poor with just 33% saying they were involved 'a great deal' in decisions about their discharge.
- However, the majority were still positive about their interactions with doctors and nurses – as has been the case in previous years.

The full report is available at <a href="https://www.cqc.org.uk/">https://www.cqc.org.uk/</a> publications/surveys/adult-inpatient-survey.

Or you can find detailed results for any specific hospital trust at <a href="https://www.cqc.org.uk/survey/13">https://www.cqc.org.uk/survey/13</a>.



CQC 2023 Survey Report



CQC Survey by Hospital Trust

### Barnabas Service Report April to June 2024

# Total Appointments 14668

Face-to-face Appointments 1750 (53%)

That's equivalent to over 6 appointments a year for every registered patient – which is better than the national average

Telephone Appointments 6573 (45%) Appointments on the Same Day as Booked

So 345 other patients didn't get an appointment they needed – and it cost the Practice over £10,000

eConsults Submitted:
Clinical: 1140
Admin: 277



Patients Who Did Not Attend their Appointment

345 (2%)





### **Staff Updates**

The Practice has recently welcomed Carla to the reception team. It is hoped to recruit a further receptionist by the end of October.



### **NEWS SHORTS**

### Ealing Pharmaceutical Needs Assessment

Ealing council are reviewing their Pharmaceutical Needs Assessment (PNA), which looks at health needs in the borough, the level and accessibility of pharmacy services, and how these will be maintained and improved. There is a short survey at <a href="https://www.ealing.gov.uk/pna">https://www.ealing.gov.uk/pna</a>, which is open until 6 October.

### Portable Liver Scanner at Northwick Park Hospital

Northwick Park Hospital now has a new "suitcase-sized" portable scanner to detect liver damage in patients at an early stage. This allows same-day results, significantly speeding up diagnosis compared to traditional methods. Report at https://rb.gy/44os47.





Northwick Park Portable Scanner



Ealing Pharmaceutical Needs Survey

### **NEWS SHORTS**



### Salmonella Outbreak

As of early September, a total of 54 cases of Salmonella Blockley ST52 have been identified across the UK. There are early indications of greater than expected severity of infection.

The source of the outbreak is unknown, but genetically similar strains of Salmonella Blockley have been identified in a small number of other countries. There is no initial indication of a travel association, which suggests that this infection may be a problem in the international supply chain.

The source of the outbreak is currently unknown but a routine investigation is underway. Meanwhile patients are advised to take especial care that food is properly cooked and hygiene is maintained.



NHS Asthma Introduction

### **Supporting Patients with Asthma**

Improving asthma care and control for children and young people is a priority for NW London NHS, and this year the focus is on helping children and young people with asthma to live their best lives.

Asthma should not limit children and young people's lives in any way and good asthma control means having no symptoms.

Children and young people with asthma should be supported to manage their condition in all areas of their lives; at home, school or college, and in the community.

To do this it is important children and young people (or their parents):

- 1. Ensure they have an asthma action plan in place
- 2. Understand how to use their inhalers correctly
- 3. Schedule an asthma review every year, and after every asthma attack
- 4. Consider air quality and its impact on lung health

There's an introduction to asthma online at <a href="https://www.nhs.uk/conditions/asthma/">https://www.nhs.uk/conditions/asthma/</a>.

NHS

# Good asthma control means having no symptoms

Children and young people with asthma can live their best lives by following these 4 steps:

- 1. Get an asthma action plan in place
- 2. Understand how to use inhalers correctly
- 3. Schedule an asthma review every year and after every attack
- 4. Ask about the impact of outdoor and indoor air pollution

### Remember ▶▶▶ Pharmacy First!

Got a minor ailment?

Why not talk to your local pharmacy?

Most are part of the Pharmacy First service,
and may be able to help with treatment.



# Where to go for the right medical help

999

Dial 999 for life-threatening emergencies



If you need medical help fast or think you need to go to an Emergency Department (A&E) use NHS 111 first – online or by phone\* – to get clinical advice or direction to the most appropriate services for treatment

GP Pharmacy www.nhs.uk

For all other health needs, contact your pharmacy or GP practice. You can also access NHS advice and information at www.nhs.uk

\*If you have difficulties communicating or hearing, you can use the NHS 111 British Sign Language (BSL) interpreter service via www.nhs.uk/111 or call 18001 111 on a textphone.

### Help Us to Help You

When you get in touch, we'll ask what you need help with. We will use this information to choose the most suitable doctor, nurse or other health professional to help you. If you need help with your appointment please tell us:

- If there's a specific doctor, nurse or other health professional you would prefer to respond
- If you would prefer to consult the doctor or nurse by phone, face-to-face, by video call, by text, or by email
- If you need an interpreter
- If you have any other access or communications needs.

### Barnabas Medical Centre

Girton Road, Northolt UB5 4SR

020 8864 4437

email:

admin.barnabas@nhs.net web: https://

barnabasmedicalcentre.co.uk

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### **Surgery Times**

Mon-Fri: 08:00-18:30

### **Out of Hours**

Please call 111

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### **Doctors**

Dr Harpreet Kooner (m)
Dr Harjeet Bhatoa (f)
Dr Rajee Navaneetharajah (f)
Dr Nikunj Patel (m)
Dr Stuti Talwar (f)

### **Practice Nurses**

Henny Shanta (f) Karen Collett (f) Nikki Onoufriou (f)

### **Clinical Pharmacist**

Paresh Virji (m)

\*\*\*

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This newsletter is a joint production of Barnabas
Medical Centre and Barnabas
Patient Voices.

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