

Keith Marshall

From: Barnabas Patient Voices <keith@barnabasvoices.org.uk>
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To: Barnabas Patient Voices
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Attachments: BPV_Minutes_20220316.pdf; Annual_Report_2022.pdf; PERC-Newsletter.pdf; CQC-202204.pdf; In-Touch-127.pdf

To All [Barnabas Patient Voices](#) Members ...
[Printed copies to those members without email]
[A copy will also be posted on our Facebook Group]

[If you can't read any of the attached documents, or want printed copies of anything mentioned, please contact me and I'll try to send you a copy.]

Welcome to the May update for [Barnabas Patient Voices](#) members. I don't seem to have picked up a lot of useful healthcare news recently, but here's what I do have.

Coronavirus

First a look at the numbers.

02/05 Vaccination Status (% of total 12+ population)

	1 Dose	2 Doses	Booster
Ealing	69%	64%	44%
London	70%	65%	47%
England	92%	86%	68%
UK	93%	87%	68%

Data from UK Government: <https://coronavirus.data.gov.uk/details/>

**** These numbers are effectively static ****

02/05. Estimated Total UK Cases (millions) cf. 7 Days Earlier

01/05	2.572m	↓
24/04	3.318m	↓
17/04	3.987m	↓

Data from Zoe Covid Study: <https://covid.joinzoe.com/data>

23/04. Estimated Positivity Rate (% testing positive) cf. 7 Days Earlier

Ealing	4.2%	1 in 24	↓
London	4.1%	1 in 25	↓
England	4.4%	1 in 23	↓

Data from ONS:

<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/articles/coronaviruscov-id19latestinsights/infections>

Generally the peak seems to have passed, although infection rates are still up around the level of the previous (January) Omicron peak – still much too high, and despite the prevailing relaxed attitudes there's no room for complacency. I know several people who've not previously had Covid, and who were being incredibly careful, who've been infected in the last month. The scientific consensus is that there will continue to be waves of infection continuing for some time with the background positivity rate between 2.5% and 3% (so at any time 1 in 33 to 1 in 40 people testing positive); if this were any other disease that rate would be unacceptable.

Challenge Study Report

One interesting recent development is the report of a study (now published) by Imperial College where they deliberately infected volunteers with Covid (a "challenge study") – something which clearly has to be very closely monitored and ethically approved. Among the interesting findings is that the incubation period (from inoculation to detection of virus) was just 42 hours (1.75 days); much less than the previously assumed 5 or so days. They also demonstrated that LFTs are much more sensitive if used to swab the throat compared with the nose – something which has been anecdotally reported by many. You can find a report of the study at <https://www.imperial.ac.uk/news/233514/covid-19-human-challenge-study-reveals-detailed/>.

Barnabas Patient Voices News

May Meeting Agenda

Our next full meeting is the Annual General Meeting on Wednesday 18 May, 13:30 on Zoom. As this is our AGM, please attend if you possibly can. The Zoom information for the call is:

Link: <https://us02web.zoom.us/j/88344565328?pwd=eUs1TlZlYXV0c5VU5HV1ZZOXJ2UT09>
Meeting ID: 883 4456 5328
Passcode: 300803

Remember that even if you don't do online, you can join by phone by calling one of: 020 3481 5240, 020 3901 7895, or 020 3481 5237 and using the ID and passcode above. (Do be aware though that if joining by phone you will pay for the call at your normal rate.)

The agenda for the AGM is most likely to be:

1. Introductions & Apologies
2. Approve Minutes of March Meeting [attached]
3. Annual Report [attached]
4. Covid-19 Update and Roundtable
5. Members Feedback/Issues
6. Practice Updates
7. Other PPG Updates
8. Matters Arising, AOB

Note: there will be no officer elections at the AGM as Keith (me, Chairman) and Harsha Mortemore (Vice-Chair) were elected at last year's AGM to serve for 2 years (as provided for in our Governing Document).

Annual Report

As should be clear from the AGM agenda I will be presenting my Annual Report at the meeting; a copy is attached.

Next Informal Calls

Our next two informal calls are on Wednesday 4 May, 18:00 and Wednesday 1 June, 10:00.

The Zoom information for these calls is:

Link: <https://us02web.zoom.us/j/7279594414?pwd=VmYwODdoWGg2eTFvTlVjVlZyRmhSQT09>
Meeting ID: 727 959 4414 Passcode: 149417

Do drop in for some chat and any recent stories and updates. Again you should be able to join by phone by dialling the numbers above with these codes.

Patient Experience Sharing

As patients we know that it would often be helpful to have some idea what it will be like when you have to undergo some treatment or procedure; or indeed what you need to be aware of afterwards. This is why we are gradually producing a set of "Patient Experiences" write-ups. These are based on our experiences (anonymously, of course); they are helpful hints and not medical guidance. They can be found on our website under "Resources". We have recently added items on recovery from a broken leg, and having a lidocaine infusion.

If anyone can contribute to the series, this would be very welcome. You don't need to write polished English, just a few notes are fine – drop them to me in a note and I'll polish them. And yes, they will be anonymous, only you and I will know the real author!

General NHS & Healthcare News

Measles

Unicef is reporting that measles cases have increased worldwide by around 80% in the wake of Covid. This is thought to be due to gaps in vaccination campaigns, and vaccination hesitancy, due to the pressures of Covid. Measles is seen as the "canary in a coalmine" indicating that outbreaks of other diseases are likely to be on the way. Although measles is a viral disease affecting mainly children, it can have serious complications including blindness, brain swelling, and severe respiratory infections – and death is not as uncommon as often supposed. The best way of avoiding measles is for there to be a 95% take-up of the vaccination. There's a *Guardian* report at <https://www.theguardian.com/technology/2022/apr/28/measles-cases-surge-nearly-80-in-wake-of-covid-chaos-with-fears-other-diseases-could-follow>.

Scarlet Fever

The UK Health Security Agency (UKHSA) is warning to parents following a rise in cases of scarlet fever across the UK. The increase is compared to 2021 when Covid pandemic measures such as social distancing, enhanced hygiene and school and nursery closures kept cases below average. Scarlet fever is usually a mild illness, but it is highly infectious; symptoms include a sore throat, headache, and fever with a characteristic fine, pinkish or red body rash with a sandpapery feel. Scarlet Fever used to be a much more serious disease (due to its infectiousness and complications) and until the advent of antibiotics was often treated with an extended stay in an isolation hospital. Report at <https://www.thisislondon.co.uk/news/20052870.scarlet-fever-symptoms-parents-issued-warning-cases-rise-england/>.

Involvement Opportunities

Don't forget you can find all the current involvement opportunities offered by the Voice network online at <https://www.voice-global.org/public/opportunities/>. You can also sign up for their weekly email newsletter.

Newsletters

Several useful newsletter received this month:

- Patient Experience Research Centre Newsletter – attached.
- UKHSA Vaccine Update # 325. This is aimed at GP practices so I don't normally include it here, but this issue gives some background on flu vaccination. It's online at https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1069628/UKHSA-vaccine-update-325-April-2022-flu-special.pdf.
- CQC Newsletter – attached. Like the Vaccine Update this is usually fairly tedious, but this issue contains some involvement opportunities.
- NHS In Touch #127 – attached.

That's all for this month. Stay safe and enjoy the Spring weather.

Keith

Keith Marshall, Chairman, [Barnabas Patient Voices](#)
76 Ennismore Avenue, Greenford, UB6 0JW
Phone: 020 8864 7993 – Mobile: 07847 149 417
Email: keith@barnabasvoices.org.uk or kcm@cix.co.uk
Web: <http://barnabasvoices.org.uk/>

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