Young People at Risk as Many Miss Routine Vaccinations

The take-up of adolescent vaccines offered to those in school year 9 have not returned to pre-pandemic levels.

The data shows that take-up of all childhood vaccinations fell during the 2021-22 academic year, leaving many young people unprotected from life-threatening diseases.

All routine adolescent immunisation programmes have been impacted by the pandemic and coverage is not back up to prepandemic levels. Parents and guardians are being urged to ensure eligible young people are up to date with their adolescent vaccines before they leave school.

Td/IPV and MenACWY

The Td/IPV booster is the last routine dose for tetanus, diphtheria and polio, and provides long-lasting protection into adulthood. The MenACWY vaccine helps protect against four types of meningococcal disease, which can cause lifethreatening illness.

Take-up of the Td/IPV and MenACWY vaccines for children in school Year 9 was 69%, around 7% lower than the previous year and well below pre-pandemic levels (87.6% for Td/IPV and 88% for MenACWY in 2018-19).

HPV

Human papillomavirus (HPV) vaccination coverage for children in Year 8 also decreased in 2021-22 and has not returned to pre-pandemic levels. The vaccine protects against HPV infection responsible for cervical cancers, as well as genital warts, other cancers of the genital areas and anus, and some cancers of the head and neck.

MMR

In the first 16 weeks of this year, there have been almost as many cases of measles as in the whole of 2022, with most of these cases in London.

Measles is a very highly infectious disease that can lead to serious problems such as pneumonia, meningitis, and on rare occasions, long-term disability or death. Symptoms include a high fever, sore red watery eyes and a blotchy red-brown rash.

As with other childhood vaccinations the take-up has fallen in recent years. Take-up for the first dose of

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Don't forget your holiday vaccinations

See back page



Barnabas Patient
Voices
Next Open Meeting

Tuesday 18 July 10:00; on Zoom

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

the MMR vaccine in children aged 2 years is 89% and take -up of the two MMR doses by age 5 years is just 85%. This is well below the 95% target necessary to achieve, and maintain, elimination of the disease.

Parents of young children and teenagers are being asked to check they are up to date with their MMR vaccines, especially before they travel this summer and before attending summer festivals where measles can spread more easily.

Polio Boosters in London

UKHSA has announced that the NHS will deliver a second phase catch-up vaccination campaign in London. This will offer polio, plus routine childhood vaccines such as MMR, to unvaccinated or partly vaccinated children aged 1 to 11 years, during summer 2023.

Children and young people (or their parents) who have missed out on their vaccines should contact their school nurse, school immunisation team, or GP surgery to arrange a catch-up.

All these vaccines offer the best protection as young people start their journey into adulthood and mixing more widely whether going to school or college, starting work, travelling, or going to summer festivals.

And remember: vaccination gives you protection, but also helps to build herd immunity and protect others who may not be able to be vaccinated or have weaker immune systems.

Source: UKHSA and NHS England

Hepatitis C Home Testing

Home test kits for the Hepatitis C virus which attacks the liver are now available to order online from the NHS in England, as part of a a drive to reach all those needing treatment.

Hepatitis C most commonly affects current or past drug users, and people who have had contact with infected blood through a tattoo or medical procedure abroad, especially in the countries of South Asia.

Hepatitis C can lead to liver disease and cancer, but symptoms often go unnoticed for many years. The NHS website says it can usually be cured by taking a course of tablets.

More than 70,000 people are thought to be living with the virus in England, with many not knowing they're infected and so unlikely to go to their GP for a test.

More on Hepatitis C at https://bit.ly/2vb097A; order a home testing kit at https://hepctest.nhs.uk/.

NEWSROUND

Covid Update

Covid is still around and is unlikely to disappear entirely, so the general feeling, as well as advice from the government, is that we're going to have to live with it. While understandable, this remains a problem for the elderly and those who are at highest risk should they become infected. The latest advice can be found at the guidance websites for those with symptoms and high risk.



Guidance for those with Covid **Symptoms**



Guidance for those at Covid High Risk

Booster Vaccinations. Covid Spring booster vaccinations are still available for those over-75 and those at high risk. Details can be found on the NHS Spring Booster website.



Spring Boosters



NHS Hepatitis C Information



NHS Hepatitis C **Test Ordering**



We're always anxious to improve. So please tell us what you would like us to do differently. Although change may not always be possible, we will look seriously at all suggestions. You can give us feedback by emailing

admin.barnabas@nhs.net
(marked for attention of
the Practice Manager) or by
leaving a note with
reception.



GP Contract Changes

It seems that NHS England were unable to reach agreement with GP representatives, so have imposed changes to the GP contract in April. Much of the change is at a technical level, however there are a few changes which may directly affect patients.

The most notable change is in the way practices are required to engage with patients. The requirement is that from 15 May:

... patients should be offered an assessment of need, or signposted to an appropriate service, at first contact with the practice. Practices will therefore no longer be able to request that patients contact the practice at a later time.

While the aspiration of the new requirement is laudable, many in the GP profession see it as unachievable given current staffing and workloads. It remains to be seen quite how this is going to work out.

The other big area of change concerns patient access to their GP records:

... To make it easier for patients to access their health information online without having to contact their practice, the GP contract will be updated so new health information is available to all patients (unless they have individually decided to opt-out or any exceptions apply) by 31 October 2023 at the latest.

Note that this applies only to new records, ie. those created after the practice switches on availability, and that there are exceptions and patients may choose to opt-out.

Source: NHS England



What do you want in Barnabas Bulletin?

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

What would you like to see included?
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 Keith Marshall, chair@barnabasvoices.org.uk or leave a note at Reception.

Withdrawal of Cough Medicines Containing Pholcodine

Cough and cold medicines containing pholocodine have recently been withdrawn from sale, and removed from



pharmacy shelves, because of a concern over possible allergic reactions.

If you are taking a cough medicine (whether as tablets or a syrup), please check the packaging, label or Patient Information Leaflet. If pholoodine is shown as an ingredient please talk to your pharmacist, who will be able to suggest an alternative medicine for you.

There is evidence that using pholcodine-containing medicines can lead to an increased risk of a very rare allergic reaction (anaphylaxis) in patients who receive general anaesthesia involving neuromuscular blocking agents during surgery. So before you undergo surgery you must tell your anaesthetist if you have taken, or think you may have taken, pholcodine in the previous 12 months.

There is no increased risk of allergic reactions, including anaphylaxis, with other allergens following pholocdine use and the absolute risk in patients who have used pholocdine is very small. However patients should talk to their pharmacist, GP or surgical team if they have any questions.

Source: Medicines and Healthcare Products Regulatory Agency (MHRA)





NEWSROUND

Walkers, Hikers & Mountain Bikers

All walkers, hikers and mountain bikers are being encouraged to check themselves for ticks after a serious virus (in addition to Lyme Disease) has been found in the UK.

The first confirmed case of Tick-Borne Encephalitis Virus (TBEV) was identified in a mountain biker in Yorkshire. The virus has since been found in Hampshire, Dorset, Norfolk, and probably central Scotland. It may be present elsewhere as the tick species that carries the virus is widespread in the UK.

Ticks are tiny (1-10mm) spider -like creatures found in woodland and moorland areas. They feed on the blood of birds and mammals, including humans. If you have acquired a tick then the UKHSA Lyme Disease: Signs & Symptoms webpage has advice on removal, and the disease symptoms to watch out for.

Ticks will probably look something like those below.







UKHSA Lyme Disease Advice

NEWSROUND



Cancer-Causing Syndrome

The NHS has begun rolling out a genetic test for Lynch syndrome, an inherited condition that increases the risk of certain cancers, including bowel, ovarian and pancreatic. It is estimated that 1 in 400 people in **England have Lynch** syndrome, but only 5% of them are aware they have the condition. Diagnosis not only improves the patient's chances of successful treatment, but also enables relatives to be tested.

See the NHS announcement at https://



Cancer-Causing Syndrome

Mental Health Corner

5-Minute Rule

Are you feeling a bit unmotivated and in a slump at the moment? Struggling to get started on doing things?

If so you might want to try the 5-Minute Rule – it may help.

The 5-Minute Rule is a strategy to get moving and doing the things you enjoy (or maybe doing something you've been putting off) due to feeling low, stressed, or unmotivated.

Whatever it is that you're trying not to do – whether it's reading your favourite book, getting some fresh air, mopping the floors, or writing that report – the goal is to do it for just 5 minutes. After 5 minutes you can either give up, or carry on.

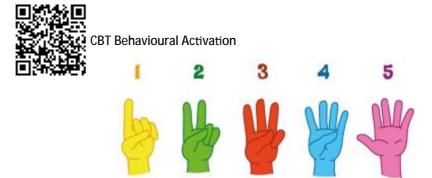
If the task still feels difficult after 5 minutes is up, then that's okay, mission accomplished! You did 5 minutes. Well done!

However what often happens is that once we get going we'll keep going until the activity is done – or at least for longer than the target 5 minutes – because the brain has been tricked into believing the task is easier than it seemed.

By using the 5-Minute Rule, the task may feel less daunting and overwhelming. Over time you'll likely find your motivation builds along with a sense of mastery – all while being kind and going easy on yourself.



(Based on CBT Behavioural Activation, see for example https://bit.ly/3pzl3ir.)



Amnesty for Walking Aids

In the past we have always been led to believe that walking aids were not reused because their condition, and thus safety, could not be guaranteed. However that is now changing.

The Physiotherapists at our local London North West University Healthcare NHS Trust (that's Northwick Park, Ealing and Central Middlesex Hospitals) are appealing to people to return any unused walking aids.

Thousands of walking aids are given to patients every year, but many aren't returned when patients no longer need them.

So if you have a metal Zimmer frame, crutches, or walking sticks, please return them to one of the drop-off points:

- Northwick Park Hospital Level 4, Physiotherapy Reception
- Central Middlesex Hospital Ground floor, Physiotherapy Reception
- Ealing Hospital Level 1 Orange Wing, Physiotherapy Department

The aids can then be refurbished and reused, or failing that recycled.

But please note that wooden walking sticks and commodes cannot be returned.

Full NHS article is at https://bit.ly/44Xhtiv.

GP Registration Online

It should be quick and simple for a patient to register with a GP surgery, but often it isn't. Whether this is because patients are daunted by dated, confusing and lengthy paper registration forms or needing to prove identity, or busy practice staff struggling to find the time to deal with new registrations, it can lead to a poor experience for all.

Hopefully, however, this is changing as a new online registration process is being rolled out by GP practices across the country. (There will also be a revamped paper process for those who need it.) This will provide a simplified, and consistent, requirement for information from patients; and eventually it is hoped automated methods for getting the information into the practice's clinical system.

The online registration facility will be accessible through the NHS website, NHS App and practice websites.

So far around 1000 GP practices in England (about 15%) are using the new "Register with a GP Surgery" service.

Source: NHS Digital

NEWSROUND



Join our patient group Barnabas Patient Voices

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

Join online at https://shorturl.at/dlqX4.



Join Barnabas Patient Voices



Amnesty forWalking Aids



Barnabas Patient Voices Improving healthcare

Improving healthcare together

Find us online at: https://barnabasvoices.org.uk/

Barnabas Patient Voices

Officers

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

Vice-Chairman Harsha Mortemore

Barnabas Patient Voices Open Meetings

Dates for our2-monthly Open Meetings are:

Tuesday 18 July; 10:00 Wednesday 20 September; 13:00

Thursday 16 November; 17:00

Please email for details of venues. All patients are welcome

Barnabas Patient Voices

Monthly Informal Calls

We also hold monthly, ½-hour, informal calls to keep in touch and share updates. The dates

are:

Monday 26 June; 17:00 Thursday 27 July; 10:00 Tuesday 29 August; 12:00 Monday 25 September; 17:00 Thursday 26 October; 10:00 Tuesday 28 November; 12:00 Monday 18 December; 17:00

All these calls are on Zoom; please email for call details.

Barnabas Patient Voices Corner

Updates from our Patient Group

AGM Report

On Saturday 20 May we held our AGM – and it was our first "in person" Open Meeting in over 3 years. Although some of us continue to wear masks, as we're fairly vulnerable, it was really good to see everyone, especially those who've not been able to join our Zoom meetings over the last couple of years.

The AGM element of the meeting was fairly straightforward. I presented our Annual Report for 2022-23, which was accepted. Although I don't feel proprietorial about the Chairmanship, there being no alternative volunteers I was asked to continue in the role. And in response to my proposal Harsha Mortemore was re-elected as Vice Chairman. Both of us serve for the next two years.

Following the formal AGM part of the meeting Sheila Hayles and I talked about our experiences of being involved in medical research trials. In Sheila's case this was a clinical trial of a completely new drug, whereas I was involved in a long-term, non-invasive, study of the effects of already common medication on cardiovascular events in diabetics. This generated some interesting and useful discussion, especially as some other members have been involved in various other non-invasive research studies, particularly around Covid-19.

I am very conscious that we have been in large part marking time over the last couple of years, and I do want that we become more usefully active and have more interesting meetings. So we are going to look at how best to return to regular face-to-face Open Meetings. If we can achieve this (and we ought to) then we will have more scope for informal talks and discussions such as we had on 20 May.

Respiratory conditions, Do Not Resuscitate plans, and the menopause have already been requested as topics for talks. If there are subjects you would like us to cover – and then hopefully write up briefly in this newsletter and/or on our website – then please get in touch and we will see what can be done.

Finally I would like to thank the Practice for hosting our recent meeting, and especially Practice Manager Matt Edwards and Dr Bhatoa for giving up their Saturday morning for us.

Keith Marshall, Chairman, Barnabas Patient Voices

Keith can be emailed at <u>chair@barnabasvoices.org.uk</u> or you may leave a note with Reception.

See also the BPV website, https://barnabasvoices.org.uk/

Clinical Trials

Part 1: What Are Clinical Trials?

We often hear about clinical trials, but what are they and why are they done?

When a potential new drug (or other treatment; we'll use "drug" here to cover everything) has been discovered as part of a research effort, it first has to be tested in the laboratory on cell cultures, and then on animals. Even getting this far takes years and huge amounts of money.

If the drug proves safe and effective (so far) it then has to be rigorously tested on humans before it will be approved for use. This testing happens in several stages; these are the clinical trials. There are normally three trials, called Phases I, II and III.

- A Phase I trial tests the new drug on a small group of (usually healthy) people (maybe a few tens) to judge its safety, including any side effects, and to test the dosing.
- A Phase II trial includes more people (typically a few hundred) to help determine if the drug is effective, and get early data on whether the drug works in people who have the target disease or condition. Safety and short-term side effects continue to be monitored.
- A Phase III trial gathers evidence from many thousands of people, often looking at different populations and dosages, and comparing the new drug with current medication or treatment approaches. This may involve patients, healthy people, or both; and mixes of age, sex, ethnicity etc.

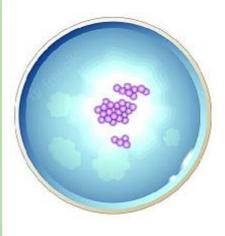
If the Phase III trial is successful, then there will be a request for the drug to be approved. These trials can take many more years and expense. However at least 80% of all new drugs and treatments fail during Phase I, II, or III trials.

Most of today's treatments, whether they are drugs, surgical procedures, vaccines, or approaches like Cognitive Behavioural Therapy, have been subject to clinical trials similar to that described above. Without these trials we would not have safe and effective modern medicine. So by participating in clinical research trails, you can help scientists develop new medications and other strategies to treat and prevent disease.

Whether you're healthy or have a medical condition, people of all ages and backgrounds can participate in clinical trials. And by participating you are contributing to future healthcare for everyone, and you may benefit too.

In Part 2, we'll look briefly at what you might expect if you decide to take part in a trial.

NEWSROUND

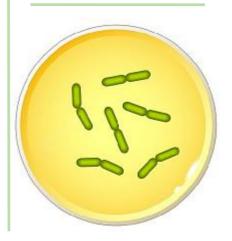


New Rare Diseases

In a piece of pioneering research, scientists have identified at least 60 previously unknown, but rare, diseases. This was done by looking at the DNA of babies and their parents. As a result many children were given a previously unavailable diagnosis and potentially improved treatment.

See the *BBC News* report at https://bbc.in/41owsPb.





NEWSROUND

PPG Awareness Week

This year PPG Awareness Week runs from Wednesday 31 May to Tuesday 6 June.

As a part of this our patient group Barnabas Patient Voices are embarking on a new project to write a short history of the Practice.

A History of the Practice

We Want Your Reminiscences

Barnabas Patient Voices

member Noreen Marshall – who is a retired museum curator – is embarking on writing a short history of Barnabas Medical Centre.

We know many patients have memories of the Practice's earliest days – especially the time before the current medical centre was opened. We would very much like to record these memories before they are lost.

We hope this will make a useful piece of local history, and be an interesting project for both patients and the Practice.

If you have recollections of the Practice, Noreen would love to hear from you – you can email her at norm@barnabasvoices.org.uk or leave a note at reception. Contributions will be used anonymously.



More Convenient Care from Pharmacies

Millions of patients will receive quicker, more convenient access to NHS care from their high street pharmacy, thanks to a major expansion of services planned by the NHS.

For the first time ever, patients who need some prescription medications will be able to get them directly from a pharmacy, without a GP appointment. Seven common conditions are targeted for inclusion by next winter; these include earache, sore throat, and urinary tract infections.

A recent blueprint defines action to improve access to care, better support patients to manage their own health, and to modernise general practice for future generations.

Almost half a million women will no longer need to speak to a practice nurse or GP to access oral contraception, and will be able to request it from their local pharmacy.

Many more people will be at lower risk of a heart attack or stroke, with almost 1.5 million more people able to access blood pressure checks at their local pharmacy.

The actions set out in the plan are expected to free up around 15 million GP appointments over the next two years.

Ending the 8am rush for appointments is a key part of the plan, with no patient having to wait on hold only to be told to

call back another day for help.

In another significant new step, up to half a million people a year will be able to self-refer to key services, including physiotherapy, hearing tests, and podiatry, without seeing their GP first.

Source: NHS England



More Care from
Pharmacies

Medical Specialisms

Do you find the names of medical specialisms confusing? That's hardly surprising as they're mostly based on ancient Latin and Greek – and how few of us ever studied them at school?

Most of the specialist subjects are [something]-ology; and most of the specialists are a [something]-ologist. Here are some of the more common ones you might meet.

Specialism	Study & Treatment of	
Anaesthesiology	General & local anaesthetic, pain	
	relief, trauma & critical care	
Audiology	Function of the ears: hearing &	
	balance	
Cardiology	Heart & cardiovascular system	
Dermatology	Skin	
Gastroenterology	Digestive system	
Gerontology, Geriatrics	Old age	
Gynaecology	Female reproductive system	
Nephrology	Kidneys	
Neurology	Nervous system	
Obstetrics	Pregnancy and childbirth	
Oncology	Cancers and tumours	
Ophthalmology	Eyes and vision	
Orthopaedics	Musculoskeletal system (bones &	
	muscles)	
Otorhinolaryngology	Ears, nose & throat (ENT)	
Paediatrics	Children	
Pathology	Cause & effects of disease & injury	
Pharmacology	Drugs & their biochemistry	
Physiotherapy	Enhancement & restoration of	
	movement	
Psychiatry	Mental health conditions	
Radiology	Medical imaging (x-rays, scans)	
Rheumatology	Inflammation of the bones, muscles,	
	joints & organs	
Urology	Urinary system and male	
	reproductive organs	



NEWSROUND



Prostate Cancer Stories

Prostate Cancer Research
have created a huge collection
of stories from men who have
undergone treatment for
prostate cancer. One of the
stories, in the form of five
short videos, is from Barnabas
Patient Voices member
Sennen Chiu. Anyone with
prostate cancer (or those
close to them) may find these
stories helpful. Well done,
and thank you, to Sennen.



Prostate Cancer Research UK



Prostate Cancer Stories



Sennen's Story Videos

NEWSROUND

Health & Care Strategy for NW London

NW London NHS have published the first draft of a new 5-year plan to improve services, needs, equity and access across the eight boroughs.

This draft plan is being shared publicly; feedback and comment is being requested.

Find the draft plan at https://strategy and fill-in the feedback survey at https://form.jotform.com/231352708 924356 (and there's a chance to win a £100 voucher). The survey is open until 30 June.





Healthwatch Ealing Patient Experience Report

Our local Healthwatch have released the results of their patient experience survey for October-December 2022 which covers the whole of Ealing Borough. The results are not quite as devastating as might have been expected.

On local GP services the major results are:

	Very or Fairly Easy	Not at All or Not Very Easy
Getting an appointment	62%	38%
Getting through on the phone	62%	38%

	Excellent or Good	Poor or Terrible
Quality of telephone consultations	61%	13%
Staff attitudes	71%	6%
Quality of treatment & care	80%	7%

For our local (NPG) Network the top three positives were:

- Staff attitudes
- · Quality of Health Professionals
- · Appointment availability

and the top three negatives:

- Appointment availability
- · Getting through on the phone
- · Quality of telephone appointments

For local hospitals (majority Ealing Hospital) the results were:

	Excellent or Good	Poor or Terrible
Getting a referral or appointment	59%	15%
Getting through on the phone	46%	25%
Waiting times at the hospital	36%	27%
Staff attitudes	80%	3%
Communication between hospital & GP	52%	17%
Quality of treatment & care	80%	7%

Holiday Vaccinations

If you're planning to travel outside the UK, you may need to be vaccinated against some of the serious diseases found in other parts of the world. This is especially important if you're:

- travelling in rural areas
- backpacking
- · staying in hostels or camping
- on a long trip rather than a package holiday

Vaccinations are available to protect you against infections such as yellow fever, typhoid and hepatitis A. However the NHS does not provide free vaccination against all of the infectious diseases found overseas.

You should see your GP, or a private travel clinic, at least 6 to 8 weeks before you're due to travel, as many vaccines need time for your body to develop immunity. And some vaccines require a number of doses spread over several weeks.

Some countries require proof of vaccination (for example, for polio or yellow fever), which must be documented on an International Certificate of Vaccination or Prophylaxis (ICVP).

You can find out which vaccinations are necessary or recommended for the areas you'll be visiting at NHS Fit for Travel or Travel Health Pro websites.



NHS Fit for Travel



Travel Health Pro



Barnabas Medical Centre



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, when requesting care, 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 with the doctor or nurse by phone, face-to-face, by video call or by text or email
- · If you need an interpreter
- · If you have any other access or communications needs.

We will always do our best to support you.

Barnabas Medical Centre

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020 8864 4437

email: <u>admin.barnabas@nhs.net</u>

web: <u>https://</u> parnahasmedicalcentre

barnabasmedicalcentre.co.uk

Surgery Times Mon-Fri: 0800-1830

Phone lines are open Mon-Fri 0800 to 1800

Out of Hours For urgent healthcare outside surgery times please call 111

Doctors

Dr Harpreet Kooner (m)

Dr Harjeet Bhatoa (f)

Dr Elizabeth Fong (f)

Dr Rajee Navaneetharajah (f)

Practice Nurses

Henny Shanta (f)

Karen Collett (f)

Nikki Onoufriou (f)

Clinical Pharmacist

Paresh Virji (m)

Practice Manager

Matthew Edwards

Office Manager Angela Hemingway

*** *** ***
Barnabas Patient Voices

Chairman: Keith Marshall 020 8864 7993

<u>chair@barnabasvoices.org.uk</u> https://

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

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