

Ivy Grove News

always aiming to provide high quality and friendly family health care

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in this bumper issue

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This Issue

We continue our aim to keep you informed of the services at Ivy Grove and also let you know about the latest medical developments.

Over 65s Open Day

Janette, our deputy manager, writes about our forthcoming Open Day which is open to all our over 65s.

Patient Group News

Mike Ingham updates us on latest Patient Group News.

Make the Most of your GP Part 9

Our series of articles on making the most of your GP continues.

Letter to the PM

Dr Wong continues with his letter to Mr Cameron about his concerns for the NHS.

Did you know?

We continue our series providing bite sized snippets of easily digestible information.

Antibiotic Prescribing

An interesting study on GP antibiotic prescribing and patient satisfaction.

Your Feedback

Your feedback is very important to us – feel free to write to us with your comments or questions. Our address is shown on the back page of this newsletter.



Ivy Grove Surgery Over 65s Open Day

Come and join in the fun at the Ivy Grove Surgery Over 65s day on Wednesday 18th May between 2.00pm and 6.00 pm. The event has

been organised and arranged in conjunction with the Patient Group and Ivy Grove Surgery and it is hoped that this will be a regular item on the Surgery calendar.

One of the aims for the day is to raise as much as possible for the *Derbyshire Air Ambulance* service, the charity that has been chosen by the Patient Group. The other aim will be for patients to obtain information and help from a number of local organisations who will be attending the event.

We have a number of local organisations and individuals already confirmed, including *Amber Valley CVS, Futures Homescape, Community Transport for Town and County, Hearing Help UK, Sight Support Derbyshire, Citizens Advice, Fire and Rescue Service, Derbyshire Carers Association, Stroke Association, Ripley Leisure Centre, Scrivens Opticians, Derbyshire Community Health Service Continence Service, Manor Pharmacy, Specsavers, Sue Dundon (Community Matron), Micheala Kirkman (Care Co-ordinator)* as well as representatives from the District Nursing and Physiotherapy Teams.

The doctors and nursing staff from the surgery will be carrying out height, weight

and blood pressure checks. The administration staff will be on hand to get you online, which will enable you to book appointments and order medication without having to visit the surgery. You will need to bring some form of photo ID for this.

Are you a fan of the *Great British Bake Off* or simply a budding Mary Berry? If so, why not enter our own version, the *Ivy Grove Bake Off*. You can enter either 10 cupcakes or 1 large cake. Please ensure that you bring your cake to the surgery for 12.00 pm and judging will take place around 2.30 pm. Prizes will be awarded to the winner and runner up.

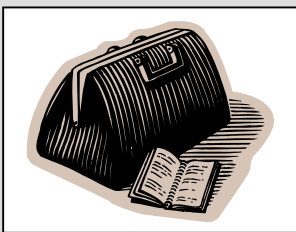
If you are not a fan of the Bake Off, then we still have something for you. After the judging has taken place all the cakes will be cut up and sold off with a cup of tea or coffee and all the proceeds will go to the named charity.

We are also planning to run a raffle to try and raise as much money as possible for this very worthwhile cause. However, we need your help and are looking for donations of items suitable for raffle prizes; if you wish to donate, please drop them off at reception.

We really want this day to be something that can be remembered, so please help us by dropping in, even if it is only for a cup of tea and a slice of cake!!



**ivy grove
surgery**



Make the Most of Your GP part 9

Keep to the same doctor

We know it can sometimes be a struggle to get an appointment with any doctor, let alone the one that you want to see, but we would always encourage patients to try and stick to the same doctor for any ongoing problem, even if it may mean a short wait. By doing so, you will maintain continuity, one of the guiding principles of practising safe medicine. Seeing another doctor for an ongoing problem, whilst it may be convenient, may not provide you with the best care: the doctor must spend significant time evaluating your condition from the beginning again, they may not agree with previous treatments, they may come to a completely different conclusion or feel pressured into acting outside their normal practice. All of this may therefore not be in your best interests.

Try not to miss your slot

We offer text reminders of your appointment and will confirm your appointment time and date with you when you book. Despite this, we do still however have many patients who miss their slots. By doing so, such patients waste precious appointment time, and will deprive other needy patients from seeing the doctor. Please be considerate: if you cannot attend, do let us know as soon as you can so that we can offer your slot to another patient.

Check our website

We will collate all these articles into one page on our website for ease of reference. Watch this space!



Ivy Grove Patient Group

Latest update from Mike Ingham
Chair of the Patient Group

THE CQC INSPECTION AND THE IVY GROVE PATIENT GROUP

Your Patient Group, (PG), is still actively engaged with the work of the Practice and in representing your views, where it can, in terms of how the Practice delivers services to you. The current Group is almost three years old and now has a strong nucleus of active members some with a background of employment in the health service in general which is most helpful.

The Group meets at 7.00 p.m. on the last Thursday of every month except August and December at the Surgery and had its third AGM meeting in February this year. Among others my role as Chair was up for re-election and part of the reason for this article is to encourage you to consider getting involved in the work of the Group and possibly eventually becoming Chair yourself in time. Meetings are quite informal, lasting about an hour and whilst we have representation from the Practice the Group is totally independent of the Practice. We do need new members who are prepared to invest a little time to work with the Practice on a range of initiatives and put across the patient viewpoint.

2016 has already become a

landmark year because the Practice has had deal with an inspection by the Care Quality Commission, (CQC). That resulted in the PG undertaking one of the most important roles it will ever undertake by supporting the Practice in preparing for the inspection and meeting the inspectors ourselves. The CQC regulates all GP practices and assesses their performance and fulfils a general regulatory role. A crucial part of that process was an opportunity for the Patient Group to meet the CQC inspectors and discuss with them aspects of the Practice's performance from the patient's perspective. The Group was very pleased to be able to support the Practice in this way. The inspectors were impressed with the value of the support given to the Practice by the PG and welcomed the dialogue which takes place between the two.

The PG is one way of making your views and that of other patients known to the Practice

The PG is one way of making your views and that of other patients known to the Practice about such things as the adequacy of the services they provide, the level and range of services and the standard of delivery which the Practice achieves. These were some of the areas we covered in our meeting with the CQC

inspectors.

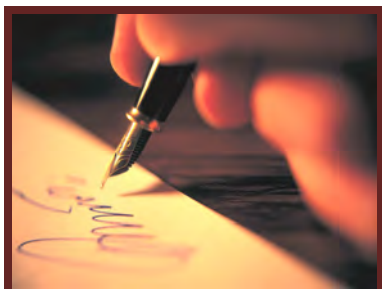
The normal procedure is for a practice to be given very little advance warning of an inspection but it is true to say that an inspection was anticipated with reasonable certainty so we were able to prepare our comments in advance. The Practice carried out a huge amount of preparatory work to prepare for the inspection; work which involved everyone in the Practice led by Dr Wong and carried out to a very high standard as one would expect from Ivy Grove. They really are to be congratulated on what was achieved.

With the AGM behind us the PG has begun to consider where it will focus its efforts in 2016. In that respect we are always looking for new ideas, new input and support so please consider coming along to a meeting and becoming involved. Let me stress again that the PG is entirely independent of the Practice. It is your group and it can and does effectively put across the views of patients on a wide range of issues and initiatives. So why not come along and give us your input too.

I hope to meet some of you soon at a future meeting.

Regards

Mike Ingham



Letter to the Prime Minister (part 7)

Dr Wong shares the letter about the NHS which he sent to Mr Cameron

In previous issues of the newsletter, we carried the first parts of a letter that was sent directly to the Prime Minister, and also to Jeremy Hunt, the Secretary of State for Health. We continue with part 7 here.

The tone of language and intentional humour, which has been left intact, should not detract you from what are real and genuine concerns.

Further clues lie with the fact that CQC currently has its hands in determining how and when we as GPs can add members to our own partnerships. GPs have been working in partnerships for half a century, all above board, all without external interference. Now there's form filling, external approval, strict time scales. If you ask me, CQC's role here is more suited to having a controlling influence in how private companies hire and fire their workers and directors. Hmm, why would you need that?

Even more clues lie with DHL, Circle, Alternative Provider Medical Services (APMS), Virgin, United Healthcare, supermarkets, opticians, Any Qualified Providers (AQPs), Private Finance Initiatives (PFIs), Walk-in Centres (WICs), Coca Cola, Boots, the list is endless, all are or have been players on a very muddy playing field with NHS workers (if at all) manning a massive open goalmouth at the bottom

of a hill. Unfair competition in a competitive market, which in effect isn't a market at all because it's completely closed. Another genius idea.

Third prong in your Plan is responsibility. Shift it. Away from yourself, preferably. Whilst maintaining control. Another master stroke with which I am impressed. This is where the CCGs come in. Get them to take on record-breaking debt from their predecessor organisations. Reinvent Primary Care Trust (PCT) management structure, but without the supporting infrastructure, staffing, funding or expertise. Offer 'control' in exchange for the purse strings and with it a large shift of work into the community. Keep every one of these organisations busy reinventing the wheel with make-it-up-as-you-go-along guidance.

Why do this? Obviously when it goes belly up you do not want to be the one who was left pulling the trigger, OK, not trigger, more of a smouldering match dropped on a very long fuse leading to a massive stash of dry gunpowder. See what I did there with the dry powder thing? Oh, never mind.

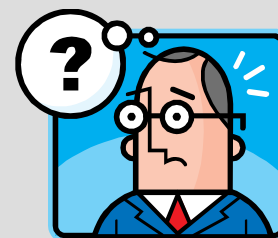
I'm not going to get into a massive debate about CCGs or the consequent provider organisations that must spring up in response, but I think the results speak for themselves. What results you ask? Exactly. Just add it to the list of mindless money wasting

exercises that is the endless Reorganisation and Reinvention of the NHS rather than money well spent on Improving Patient Care.

What's the fourth prong in your Plan? Control the profession. That's been an ongoing process for quite some time now. You can't have Professionals running the health service and interfering with your Plan. It could be, well, Dangerous. They might have ideas and get ahead of themselves, and take away one of your main sources of votes. We don't need to mention the isolated case of one particular mass-murdering psychopathic GP too much, but that really was a gift to you wasn't it?

With the shameful collusion of our leaders and professional bodies, this gift brought the opportunity of tightened control of the profession, through the evidence-free process of Revalidation and all the nonsense that entails. But don't forget, we've had to contend with other extremely dodgy processes along with way, like Modernising Medical Careers (MMC), Medical Training Application Service (MTAS), Referral Diversion, Choose and Book...

This very long letter will continue in many future editions of the patient newsletter. However, you can read or download the full letter online at ivy.gs/opinion.

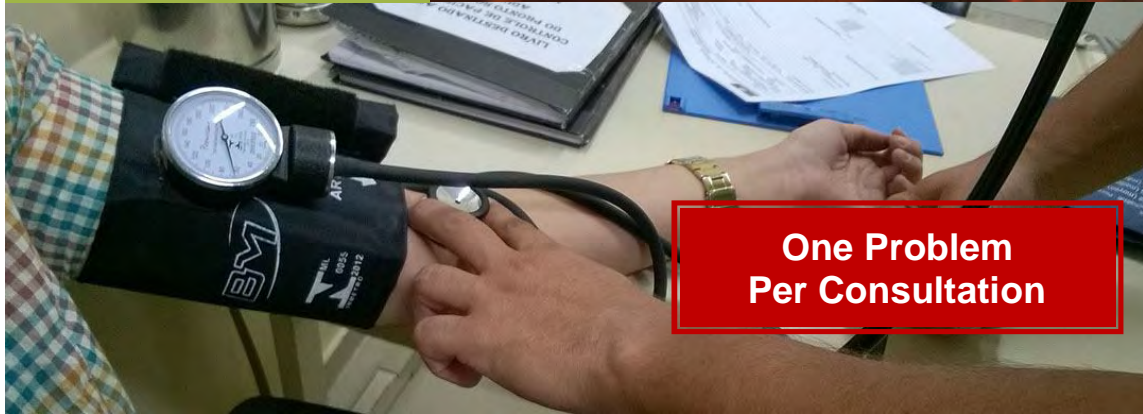


Did you know...?

...there is a search function now on certain key pages of our website? If you need to search for newsletter content (ivy.gs/ign), telephone numbers (ivy.gs/numbers), downloadable leaflets (ivy.gs/dl), symptoms (ivy.gs/symptoms) then please use the search boxes now provided on those pages.

...Ripley Hospital no longer take children's blood tests For blood tests in children aged 5 to 12 years old, contact Royal Derby Hospital 01332 340131 or Ilkeston Hospital 0115 930 5522 extension 231 to book an appointment for a blood test.

...domestic violence affects all people regardless of age, colour or sex - it happens in all kinds of families and relationships. Persons of any class, culture, religion, sexual orientation, marital status, age, and sex can be victims or perpetrators of domestic violence. For help ring the Derbyshire Domestic Abuse Helpline available 24 hours a day, seven days a week, on 08000 198 668. In an emergency, contact 999. You will find posters that can be read in private in our patient toilets.



NEWS SNIPPETS

APPOINTMENT SITUATION

Demand for appointments has escalated to an unprecedented high level recently. We are seeing huge numbers of adults and children in the earliest stages of self-limiting minor illness, such as sore throats, coughs and colds, temperature and diarrhoea. Most of these cases will resolve without treatment from the doctor.

We would encourage all patients to self-care where appropriate to ease pressures on the already strained health services.

MAY BANK HOLIDAYS

We will be closed on the bank holidays of Monday May 2nd and Monday May 30th. If you need medical attention or advice when we are closed, please ring NHS 111 on 111, or see our website. Please remember to hand in your repeat prescription requests well in time, or use our online service.

CQC INSPECTION

We recently had our CQC inspection and will update patients on the final report when it comes available. In the meantime, please see our public CQC page at

ivygrove.org.uk/cqc.html.

MEDICAL RECORDS

From April 1, 2016, you will be able to view other information in your medical record, such as consultations, results, immunisations and problems on request. We are committed to implementing access to records, however please bear with us as we put in place robust procedures to deal with such requests and train our staff on such processes. More information may be found on our online services page at ivy.gs/online.

We have a 'One Problem Per Consultation' policy

We know that getting an appointment with the doctor is sometimes difficult (see 'News Snippets' on right). We know that patients do 'save' their problems and present them to the doctor at the same time, with or without a list. We know that the doctor may also run late.

All of this increases the tendency for patients to present multiple problems to their doctor at one consultation.

We kindly ask that all patients try and stick to our 'One Problem Per Consultation' policy.

The main reason for this request is for clinical safety.

It has been shown that

presenting the doctor with multiple problems distracts them and increases the risk that mistakes will be made and things to be missed.

The doctor may be inclined to rush, particularly if other patients are waiting.

Ten minutes really is not a lot of time, even for just one problem, e.g., 1 minute to get to doctor's room and sit down, 3 minutes to tell a history, 3-4 minutes to perform targeted examination, 2 minutes to explain, advise and treat. There is no time left of the ten minutes to write up notes, fill out forms, dictate referrals or speak to other team members for advice.

One of Primary Care's main purposes is to detect serious disease early. Presenting multiple problems to the doctor, not all of which may be serious,

increases the difficulty of this task – it is like finding the 'needle in a haystack'.

Doctors cannot see huge numbers of patients with multiple problems and continue to practise safely and effectively. A stressed doctor is not a good doctor.

We do consider that GP appointments are a limited resource and we would kindly ask that such a service be used with care and consideration.

Therefore please do not be offended if the doctor asks you to rebook for your other problems. We are working in your best interests in order to keep you safe.

We would always encourage patients to book double appointments if there are multiple problems that need discussing.

How can I tell if my child is poorly?



At a recent clinical meeting the doctors and nurses at the practice decided to develop standard minor illness pathways. This has been prompted by the unprecedented demand for appointments recently (see 'News Snippets' on right) where we are seeing huge numbers of patients with self-limiting illness. These are conditions which will get better by themselves, with appropriate self-care at home. We are developing resources to help.

We know that worries about ill-health can be as draining as ill-health itself and we are

therefore working hard to encourage patients to address their worries effectively in a way that encourages self-care.

In terms of childhood illness, we have written an advice leaflet for parents and carers in order to help them decide if their child is poorly and what to do about it. Hopefully this will reduce undue worry when dealing with children, but also help parents to act quickly if there are signs of actual serious illness.

Your doctor or nurse will issue a leaflet where appropriate, but feel free to ask for a leaflet at any time, either from reception or your doctor or nurse.



Dental Problems

A recent study in the British Journal of General Practice has highlighted the need to remind patients to see their dentist if they have a dental problem. Many patients see their doctor believing that antibiotics are required, however antibiotics are often inappropriate and increase resistance (see below) and do not replace a long term treatment plan from a dentist, which may or may not involve extraction or root canal treatment.

If you attend the surgery with toothache, or what appears to be a dental problem, you will be advised to see a dentist. If you are not registered, please ring NHS111 or go to the NHS Choices website to find a dentist.

Open letter to all Patients... by Mike Ingham, PG Chair

This letter is by way of a brief introduction to the Group and how it operates.

The most important thing about this, as yet, small group is that it is your Group. The current Group is approaching the third anniversary of its formation and has an active core membership of a dozen or so members. I have chaired the Group for the whole of that period and, whilst I'm happy to continue doing that if that is what the Group wishes, the Group needs to evolve and maybe would do that more effectively under a different Chair: time will tell.

The Group was formed early in 2013 and whilst it would be untrue to say it hasn't had its teething problems along the way it is now well established and has established a sound working relationship with the Practice. It must be stressed that it is entirely independent of the Practice and among its main roles is that of representing the views, interests and concerns of patients. It is a means of giving you, as a patient, a real voice in how the practice delivers services to patients as a whole.

The Group has become progressively stronger and more active and has worked with the Practice on a range of matters. But it could and really should play a much bigger role in supporting the Patients and the Practice on, among other things, a range of general patient health initiatives promoted by the NHS, our Clinical Commissioning Board, (CCG), and other groups within the overall health care community.

There is huge potential to get involved and it need only involve a little of anyone's time. The Group meets once a month at the Surgery on the last Thursday of each month, except August and December, at 7.00. Meetings normally do not last more than an hour despite always having a full agenda including monthly feedback reports from Dr Wong, who is the doctor representative on the Group, and Charmagne Stephenson, the Practice Manager.

If you would like to come along to a meeting and get involved in any way we would be pleased to see you. I understand that everyone has far too many commitments these days but this is a route down which you can invest a little and see huge gains for the almost 11,000 patients at Ivy Grove.

If you would like to know a little more about the Group then ask at Reception for them to put me in touch with you or vice versa, and you can e-mail me at the Group's e-mail address which is ivgpatientgroup@gmail.com. If you are happy for me and the Group to have your email address you can ask the Practice to forward it to me. The Group has a notice board in the Surgery waiting area with more information.

Best wishes and I hope to meet you soon.

Should you have any comments, complaints or compliments about the service you have received from the practice please ask to speak to our practice manager, Mrs. Charmagne Stephenson or write to us at the address below.

Contributions and letters to the newsletter are very welcome. Please address correspondence to the address below.

Written by Dr M. Wong unless otherwise stated
Email: mail@ivy.gs



**ivy grove
surgery**

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New Partners

We welcomed Dr Simon Francis and Dr Riva Greer as partners to Ivy Grove Surgery on April 1, 2016. They joined as salaried doctors in August 2014. As partners, both doctors will now have additional responsibilities and decision making involving the business aspect of the practice and we very much look forward to their positive contributions in continuing to make Ivy Grove Surgery a safe, effective and pleasant environment for all our staff and patients.

We have clinical vacancies available – please see ivy.gs/jobs for details.

GPs who prescribe responsibly get poorer feedback

Study shows that patients don't always appreciate careful medicine

GPs who resist patient demand for antibiotics get marked down in satisfaction surveys according to a study published in the *British Journal of General Practice*. The findings are concerning because patients are increasingly encouraged to choose doctors on the basis of such surveys.

Researchers found that keeping prescribing 25% less than the national rate was linked to a reduction of up to five percentage points for a practice that would otherwise have an average rating. The study at King's College, London, compared prescribing records from 7,800 practices with the NHS GP Patient Survey.

They also checked prescribing levels of other common drugs, such as painkillers or antidepressants - but found much smaller links with satisfaction ratings. Researcher Dr Mark Ashworth said: "GPs often feel pressured by patients to prescribe antibiotics and find it difficult to refuse a patient who asks for them."

Commentators on the study reported that patients should understand that inappropriate antibiotic prescribing increases the risk of bacteria developing resistance. Infections with these bacteria increase levels of disease and death, as well as length of hospital stays. Patients treated inappropriately with antibiotics may become colonised or infected with resistant bacteria. Fewer new antibiotics are being developed. As resistance increases, it will become more difficult to treat infection, and this will harm patient care.

Remember antibiotics will not work for the viruses which cause colds, flu and most upper respiratory infections like coughs, sore throats and ear infections, and we encourage appropriate self-care for these conditions.

REMINDER

Please remember to hand in your repeat prescriptions well in time. Patients are welcome to use our online service, details available at ivy.gs/rx.

NEXT ISSUE

Details of our next issue will be posted on the surgery website at ivy.gs.

MAILING LIST

If you want to join our mailing list and get this newsletter sent out to you electronically in PDF format whenever it is published, please send us an email to mail@ivy.gs.

We would love to hear your comments about our newsletter and also any articles you could contribute, so feel free to write at any time. Our address is above.

IVY GROVE SURGERY OVER 65'S DAY

WEDNESDAY 18th MAY 2pm-6pm



BAKE OFF 10 Cupcakes or 1 Large cake. Judging will be at 2.30 after which all cakes will be sold with all proceeds to be given to charity.

BLOOD PRESSURE CHECKS The GP's will be available to check your blood pressure.



HEIGHT and WEIGHT The nursing team will be available to measure your height/weight and offer advice if needed.

GET ON-LINE Members of the admin. staff will help you register for online ordering of medication and booking appointments. Please bring some photo ID if you want to do this.



PLEASE NOTE : This event is only open to you if you are a patient registered with Ivy Grove Surgery

It is hoped that Derbyshire Carers, Podiatry services, Citizens Advice, CVS, Future Homescapes and other local organisations will also be in attendance on the day.



TOO MANY PROBLEMS
DISTRACT THE DOCTOR



DOCTOR MAY BE
MORE LIKELY TO RUSH



TEN MINUTES IS
NOT LONG AT ALL



OTHER PATIENTS WILL
BE KEPT WAITING

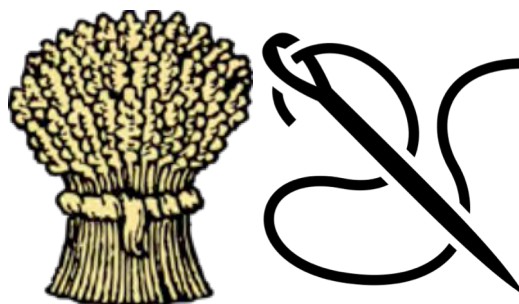


SERIOUS ILLNESS
MIGHT GET MISSED

ONE PROBLEM PER CONSULTATION PLEASE



DOCTOR NEEDS TIME
TO WRITE UP NOTES



DOCTOR NEEDS TO FOCUS TO
DETECT SERIOUS DISEASE EARLY



A LIMITED RESOURCE SHOULD
BE USED WITH CARE

REASONS FOR A HOME VISIT

APPROPRIATE



Bedbound



Terminally ill



**Would come to
serious harm if moved**

UNSUITABLE



No transport or money



**Children, young people &
anyone who is mobile**



**Social reasons or
for convenience**



**Other help more
appropriate**

THE SMALL PRINT

- Patients **do not have an automatic right** to a home visit
- Under their terms of working, doctors are required to consider home visits for **medical reasons only**
- If you think you qualify for a home visit, please **ring before 10.30am**
- All visit **requests will be medically assessed** to check if appropriate

WHERE TO GET HELP!

Examples only



SELF-CARE

minor grazes, coughs and
colds, sore throat,
hangover



PHARMACIST

diarrhoea, runny nose,
headache



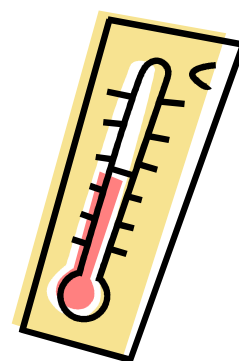
MINOR INJURIES UNIT

sprains and strains, cuts,
rashes, stings and bites



A+E or 999

chest pain, head
injuries, stroke, severe
bleeding, deep
wounds, severe
shortness of breath,
broken bones



GP SURGERY

fever, earache, stomach
ache, vomiting



DENTIST

toothache, abscess,
gum disease



NHS 111

advice, medical help,
not sure who to call

YOU CAN ALSO REFER YOURSELF DIRECTLY TO...

PODIATRY (01773 743456) at Ripley Hospital for foot and nail care

PHYSIO DIRECT (01335 230079) Physiotherapy for back, neck and joint problems

COUNSELLING (various providers) for anxiety or depression available – ask for a leaflet

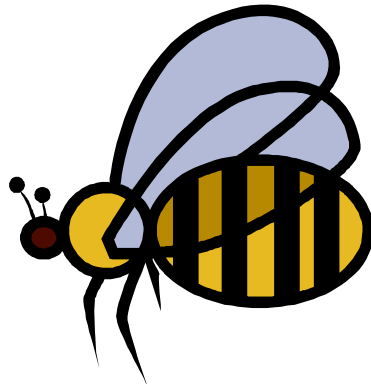
SEE ALSO our website at ivy.gs/numbers for contact details of other sources of direct help

IVY GROVE SURGERY

? DO YOU NEED THE MINOR INJURIES UNIT ?



SPRAINS & BREAKS



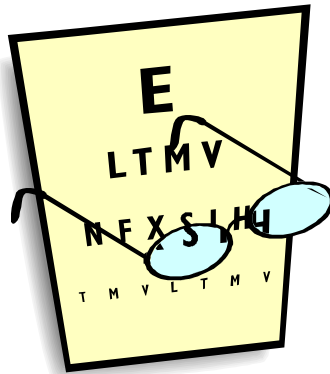
INSECT BITES & STINGS



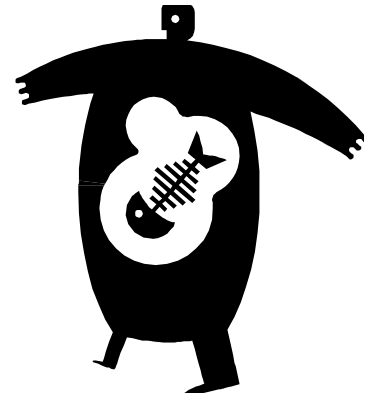
HEAD INJURIES



BURNS & SCALDS



EYE PROBLEMS



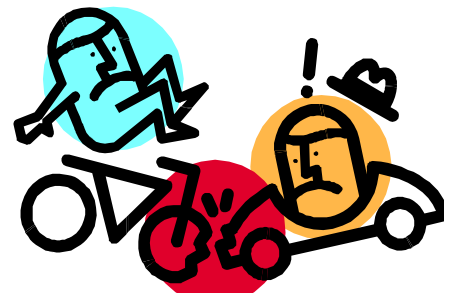
FOREIGN BODIES



MINOR WOUND
INFECTIONS



CUTS AND
GRAZES



ROAD TRAFFIC
ACCIDENTS