

The Practice

The Stoke Road Surgery Newsletter
Delivering quality primary care



WINTER 2013
FIFTH EDITION



Christmas fun!

We hope you all had a lovely Xmas and New Year and enjoyed the celebrations. We were incredibly busy here, especially the week before Xmas.

Remember the pharmacist and NHS direct are available to give advice as well as GP surgeries.

However we still managed to fit in a little bit of the Xmas cheer, whilst at work.

See if you can recognise some of our colleagues in these pictures!



The PPG AGM

The Patient Participation Group (PPG) is holding its Annual General Meeting on **7th March 2013 at the Community Centre Hall in Bishops Cleeve, at 7pm.**

If you are a registered patient at Stoke Road Surgery or are a member of the community with an interest in health matters then we would be delighted if you would like to attend.

There will be a presentation by Dr Shona Arora, who is the Director for Public Health Gloucestershire, as well as our own Dr Moore who will be speaking about commissioning services in general practice. Light refreshments will be available.

We look forward to seeing you there.

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This is just a quick reminder to everyone about our triage system which is the system that we use to prioritise medical need. If you have a medical problem that you feel is urgent for that day, please let the receptionist know and she will log your call with the Duty Nurse or Doctor to call you back. We try to do this within an hour or so, depending on the number of calls.

However if you have a query that is not urgent then please let your receptionist know this too. She can either arrange an appointment for you, which can be within a couple of days or can be up to two weeks in advance. If it is something that can be dealt with on the telephone, she can arrange a telephone consultation with the Doctor of your choice.

Since we have trained our Nursing staff in triage, we have seen an improvement on our appointment times. We know in the past appointment access has been frustrating for everyone (us included!) but we think that it is beginning to improve. We would welcome your feedback on this.



Don't forget:

Advice can also be obtained from the pharmacist or
NHS Direct (0845 4647) www.nhsdirect.nhs.uk

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HPV and Cervical Cancer

HPV stands for Human Papilloma Virus and there are approximately 100 subtypes. HPV infection is common in men and women who have been sexually active. Most women will be affected at some point in their lives. Most infections have no symptoms and are effectively dealt with by the body's immune system. Infections may have been present and undetected for many years.

Some subtypes cause genital warts and a small number of subtypes (known as 'high-risk' HPV) can cause abnormalities in the cervix.

The abnormalities in the cervix often clear up without treatment when the virus clears up. However 'high-risk' HPV may persist in a small number of women placing them at greater risk of having abnormalities of the cervix (CIN). If the abnormalities are left untreated, then there is a risk the CIN may eventually develop into cervical cancer. The majority of cervical cancer is caused by 'high-risk' HPV. There were 2,300 women diagnosed with cervical cancer in 2008 in the UK.



The cervical screening programme has helped to halve the number of cases of cervical cancer since it was created, saving 4,500 lives per year in England. It is available to all women between the ages of 25 and 64 years. Screening occurs every 3 years for women aged 24-49 years and every 5 years for women aged 50-64 years. It is effective at detecting changes in the cells of the cervix, which may in time develop into cervical cancer if left untreated.

As part of the cervical screening, this year has seen the introduction of a test for 'high-risk' HPV. It is only tested when the result of the smear has shown borderline or mild abnormalities. This is good news as women in this group with a negative 'high-risk' HPV test can be reassured that all is well and they are very unlikely to develop cervical cancer. Women who are shown to have a positive 'high-risk' HPV test can be treated quickly and followed up more carefully to prevent any further problems. Women who have moderate or severe cervical abnormalities will not be tested but will always be treated promptly.

Another advance in recent years has been the introduction of the HPV vaccine. This is now part of the school vaccination programme given to all girls in year 8, aged 12-13 (with a catch-up programme for girls in year 12). It consists of 3 vaccines with an interval of 2 then 4 months. There are two vaccines available (Cervarix and Gardasil) which are very effective at preventing infection caused by the two 'high-risk' HPV sub-types most commonly linked with cervical cancer. Gardasil also protects against two subtypes of HPV that cause genital warts and since September 2012 has been the vaccine of choice in the UK. It is important that young women are vaccinated before they become sexually active. Because these vaccines only protect against 75% of all 'high-risk' HPV, women who have been vaccinated will still need cervical screening in the future.



The introduction of the vaccine and testing of high-risk HPV will result in many fewer women developing cervical cancer.

Fundraising at Stoke Road Surgery

Over the last few months we have made various charitable donations. The best (and tastiest!) was our Children in Need appeal where we did "bake a cake". Over the working week days, staff members brought in different cakes for us all to enjoy and we all donated money for these lovely morsels! We raised £ 148.00.



We have also raised £70.00 from our book swap/donation in the waiting room, proceeds went to the Air Ambulance as well as £41.25 for the Poppy Appeal and £17.00 for Wear it Pink, Breast Cancer charity.

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Letter from a patient and relative



We received this letter from one of our patients about the service and care he and his family have received from the staff at Stoke Road Surgery. He wanted us to pass this message on, so we have extracted the letter and reproduced it here.

"I have come to the surgery with my mother many times in the last few years but never got round to filing in the form with lists of complaints. So here they are

No. we don't have any. However, as a retired teacher I know that, while clients may be quick to complain, due praise is often forgotten when all is going well. I hope the following few words help to redress the balance a little.

We are delighted with the quality of care and service we consistently receive. Everyone at the practice (so well supported by the pharmacies) is very good and many are excellent, in particular, the doctors and nursing staff who have recently had particular care of my mother.

Her latest illness has been a long haul - two weeks ago we were contemplating hospitalisation - but you will be pleased to know that the second lot of antibiotics has worked well and she has been up for (and buoyed by) the Christmas family festivities; she still needs to re-strengthen but that is a challenge we can face positively. I think there is a psychological dimension to the reaction to most illnesses; thus, for my mother especially, the knowledge that there are people who really care that she gets better is very important, an integral part of the healing process.

She came to live with us after my father died in 1998. A combination of an inferior practice and her way of "working off an illness" rather than seeking a doctor means that I am quite sure that if she had not moved to you she would not be around today. My wife and I presently enjoy very good health; She hardly ever needs to visit and I was the same until Peter discovered my AF some years back. My frequent visits these days are usually accompanying my mother, occasionally apologising for a missed INR. The receptionists are unfailingly welcoming (and forgiving) and always try to 'find a way'. I have a sister-in-law who is a GP so we know the time pressures; thus we don't care if we have to wait a while (assuming continuing supply of gardening mags), especially since, however busy you are, we are still treated when seen as if we are the only ones in the surgery. That is very special. Though futures are always unknown, we have no intention of leaving our little old cottage in the country until we are extremely dodderly - for all sorts of reasons, but not least that we know we will be in good

hands in the 'ailing years'. I hope you will be able to circulate this little tribute - and people will have a moment to read it. I have no reason to doubt your continuing high standards in the future.

Wishing all a very happy new year.

VH"

Newsletter font and colour



We have had a request to change the colour of the newsletter ink. It is currently in red, as this matches the colour of "The Practice" logo. We have been in contact with the printers and asked if they can do half the order red ink and half black ink. Unfortunately the printers are not able to change ink colour half way through the order.

We have increased the font size already in response to your requests. Please let us know if you would prefer black ink instead!

Zero Tolerance

In common with all NHS centres, we have a "zero tolerance policy" at Stoke Road Surgery to violent, aggressive or abusive patients. We are aware that our reception staff are our front line and they are occasionally faced with aggression and verbal abuse. Some people who are stressed can become rude and aggressive when things don't go the way they want, occasionally even becoming violent to those who they think are blocking them. This is not acceptable behaviour and will not be tolerated at Stoke Road Surgery. It is something that we take very seriously and we can ask patients to leave our practice because of their behaviour and report them to the Primary Care Trust.

Our staff are here to help you! However sometimes they are unable, for example, to:

- ❖ make appointments when all the available ones have been filled.
- ❖ magic prescriptions out of the air! Please accept our apologies if your prescription is not ready but work with us and try not to order at the last minute as an emergency.
- ❖ answer every medical query. They are not clinicians and cannot interpret test results or give detailed medical advice.

Please respect everyone who works at the surgery as we are all here to help you.



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A Day in the Life of.....

One of our District Nurses, Lisa Drury has decided to write us a little poem about her average day, so enjoy!

The district nurses are based upstairs

Here to look after many affairs

When asked what is it that we do

We did not know where to start but we will give you a clue

We only visit people who can't get out the door

For those who can leave home practice nurse appointment you must explore

A time to visit you we cannot specify

But around hospital appointments we will try

Firstly we get our new patient referrals from many places

From the doctors, hospitals, patients relatives and other bases

Once we know of a housebound patient and they really needs us

We get to see them as soon as we can without making a fuss

We start our day at half past eight

For our patients who need insulin we can't be late

Between us we divide all the patients to see

We are all very experienced so in safe hands you will be

We give injections, insulin, b12 to name a few

Catheters and urinary problems is also what we do

If your wound needs dressing and to the surgery you cannot go

If your chemo needs disconnecting we will not be slow

As part of our job, paperwork and assessment is our chore

We apologise for all our questions we ask you it can be a bore

Referral on to specialist nurses, and clinics all takes a while

We are sure if we can sort out your symptoms it will end in a smile

At the end of the day we finish at half past four

We leave you in safe hands as we go out the door

A call to out of hours nurse is all that you do

They will travel the whole of Gloucestershire to visit you

I hope we have given you an insight into the roles that we play

And in the future you never know we may come your way!



PPG – Letter from the Chair

Welcome to 2013, and I hope that during this year you will enjoy the best of health.

The NHS is sixty five years old this year. The Rt Honourable Anaurin Bevan MP, opened the first NHS hospital, Park Hospital, Manchester, in July 1948. In 1952, a prescription charge of one shilling (5p) was introduced, and soon afterwards, a flat charge of £1.00 for ordinary dental treatment.

May I urge you to internet access search, the historical 8.46 minute video, 'A modern guide to health 1947'. Seen today, it is both heart warming in it's simple health promoting logic, and hilarious in demonstrating post - industrial human culture! Prior to the NHS introduction of a vaccination programme in 1958, up to 8000 cases per annum of Polio infection, and 70,000 cases per annum of diphtheria could occur.

In 1954, Paediatricians Sir James Spence in Newcastle, and Alan Moncroft, Great Ormond Street Hospital, identified that it was traumatic to separate hospitalised children from their parents, and recommended that visiting should be available daily rather than strictly one hour at the weekend.

A high proportion of Stoke Road Surgery patients, like myself, (polio infection 1950, six weeks in an isolation hospital), my late mother (diphtheria infection circa 1935), can testify to experiencing the real vulnerability of human pre and post war health issues, compared with the excellent health provision of today.

It is worth reflecting for a moment, that many countries in the world are only at the very earliest stages of being able to secure the health benefits that we now enjoy.

We hope that you agree, that Stoke Road Surgery offers and provides skilled medical health provision that is second to none.

This year, we are experiencing restructuring of the way that those same excellent NHS services will be delivered in our county and region. To outline the changes, the PPG, has invited guest speaker Dr Shona Arora, Director of Public Health, Gloucestershire, to our Annual General Meeting. As a patient, this is YOUR meeting, and YOUR opportunity, to engage with Stoke Road Surgery, and the delivery of medical services. The meeting commences at 7pm, Thursday 7th March, The Community Hall, Bishops Cleeve, GL52 8LR. There will be light refreshments provided by the Practice. May we look forward to welcoming you.



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