

## In-The-Know

### PPG:

[ppg.argylesurgery@gmail.com](mailto:ppg.argylesurgery@gmail.com)

### Facebook Group

- Why not join our Facebook Group where information will be posted for patients on the PPG and Argyle Surgery

[www.facebook.com/groups/argylesurgeryppg/](http://www.facebook.com/groups/argylesurgeryppg/)

### Surgery Website

- The Argyle Surgery has recently updated its website, why not check it out and find out more about the Surgery

[www.argylesurgery.com](http://www.argylesurgery.com)

### Check out how to access online services:

- ✓ Register for online services
- ✓ New Patient Registration
- ✓ Book an appointment
- ✓ Request a repeat prescription
- ✓ View your medical records



## In-Side

- PPG Survey
- What is a PPC and how do I get one
- Interview with Catherine McCarthy (Receptionist)
- In-Sight Dr Abas
- Health Tips

## In-The-Chair

I'd like to send season's greetings to all patients and staff at the Argyle Surgery and perhaps most importantly wish everyone a happy and healthy 2020.

If you're desperately searching around for a New Year's resolution, how about resolving to attend one or two of our PPG meetings? They really are very important, and we look forward to seeing more of you at our 2020 meetings.

There are just four scheduled for 2020:

Tuesday 3 March 2020  
Tuesday 2 June 2020 (AGM)  
Thursday 3 September 2020  
Thursday 5 November 2020

Our meetings start at 7pm and I ensure they never go on past 8.30pm.

If there are any issues you'd like the PPG to discuss or look into, please don't hesitate to contact me by emailing: [ppg.argylesurgery@gmail.com](mailto:ppg.argylesurgery@gmail.com)



*Alex Gerlis  
Chair, The Argyle Surgery  
Patient Participation Group*

# A-Z

HEALTH

## HEALTH A TO Z

Your complete guide to conditions, symptoms and treatments, including what to do and when to get help.

<https://www.nhs.uk/conditions/>

## MEDICINES A TO Z

Find out how your medicine works, how and when to take it, possible side effects and answers to your common questions.

<https://www.nhs.uk/medicines/>

If you need help now but it's not an emergency:

111.nhs.uk

Or call

111

# In-Focus

## PPG Survey

The Argyle Surgery has contact with seven hundred (of its 8,600) patients each week – either through face to face consultations with a GP or a nurse or a telephone consultation.

But what do all these patients think of the surgery? Thanks to 1,688 patients who responded to a survey after a consultation between April 2018-October 2019 we now have a very good idea.

What follows is a summary of the results of the survey. Not every single question is included and some responses have either been amalgamated (e.g. 'very good' and 'good') or in the case of some neutral responses, not included. We've also rounded up/down some of the percentages.

The survey shows that overall the rate of satisfaction with the surgery is high. One can divide the questions into two broad areas: those relating to the 'admin' side of the practice and those relating more directly to the clinical experience.

These are the questions more about the 'admin' experience:

- **Is the practice currently open at time convenient for you?** YES – 87%: NO - 10%
- **How easy is it to get through to someone on the phone?** VERY/FAIRLY EASY – 64%: NOT VERY/AT ALL EASY – 31%.
- **How helpful do you find the receptionists?** VERY/FAIRLY HELPFUL – 93%: NOT VERY/AT ALL HELPFUL – 6%
- **How would you describe your experience of making an appointment?** VERY/FAIRLY GOOD – 80%: POOR/FAIRLY POOR – 10%
- **How long did you wait to be seen?** LESS THAN 5 MINUTES - 14%: 5-15 MINUTES – 60%: MORE THAN FIFTEEN MINUTES: 24.5%

And here are the highlights of what could be categorised as the clinical experience:

- **How often do you see or speak to the GP you prefer?** ALWAYS/A LOT OF THE TIME – 35%: SOME OF THE TIME/NEVER – 52%
- **Last time you saw your GP, how good were they at listening & explaining to you?** GOOD/VERY GOOD – 92%: POOR/VERY POOR – 2%
- **How good was the GP in involving you in decisions about your care?** GOOD/VERY GOOD – 89%: POOR/VERY POOR – 2%
- **Confidence/trust in the GP you saw/spoke to?** TO SOME EXTENT/DEFINITELY – 97%: NOT AT ALL – 2%
- **Would you recommend the surgery?** YES – 87% NO 6%

The overall message then is a very positive one. I suspect some people reading this may be skeptical, not least to the responses on making appointments and waiting times. But these are the answers people give. If you feel, for example, that making an appointment or seeing a particular GP is problematic, have you ever taken the time to reflect that in a survey?

If you feel you want your voice to be heard even louder, you'll be more than welcome at PPG meetings.

There was a further question on the survey:

***How would you like to help us improve the Argyle Surgery?***

Some 200 patients have responded to the survey wanting to join the PPG and are on our circulation list to receive our agendas and minutes via email. Even if you can't make the meetings that we hold, you can share your suggestions and views with us to discuss at the meetings by emailing us. Your opinion counts and helps shape how the services at Argyle Surgery develop.

Next time you receive a text from the surgery after an appointment, please do take five minutes to complete the survey. And if you feel you want your voice to be heard even louder, you'll be more than welcome at PPG meetings.

7pm to 8.30pm

Tuesday 3 March 2020

Tuesday 2 June 2020

Thursday 3 September 2020

Thursday 5 November 2020

**Alex Gerlis, Chair**

## In-The-Know

## Involvement hub

There is a section on the NHS England website dedicated to patient and public involvement. It includes information and resources for the public, carers, patients, commissioners, and other health professionals who want to get involved in NHS England's work and/or enable others to participate to make a difference to healthcare.

For more information about the Involvement Hub please click the link below.

<https://www.england.nhs.uk/participation/>



## This Month's Health Tips



Alcohol Change UK is the new charity formed by the merger of Alcohol Research UK and Alcohol Concern.

Alcohol is a part of many of our lives. We use it for celebration, for comfort, to socialise, to wind down, to cope. We treat it differently to other drugs; it's legal, socially acceptable, even encouraged. Yet in the UK one person every hour dies as a result of alcohol. Alcohol harm – mental health problems, liver disease, one of seven forms of cancer, economic difficulties, and so much more – can affect any one of us, from any walk of life. The harm doesn't end with the individual; each of us who drinks too much is part of a family and a community who feel the effects too, whether through frequent use of emergency services, drink driving, violence or neglect.

Dry January is the UK's one-month booze-free challenge that helps millions reset their relationship with alcohol every year.

Taking part in Dry January is a chance to ditch the hangover, reduce the waistline and save some serious money by giving up alcohol for 31 days.

72% of people who do Dry January are still drinking less riskily six months later (according to the alcohol AUDIT, a WHO measure of risky drinking). Giving your body a break from booze is pretty good for it, but Dry January helps people cut down longer term too, and that has so many more benefits.

More details are available at: <https://alcoholchange.org.uk>

## Healthcheck Now

We all can underestimate what some simple regular checks can tell us about our health and wellbeing. Keeping an eye on things and telling the surgery team can sometimes help spot problems before they become bigger ones.

We can all take better care of our health. Even more so when we use a fantastic machine that the surgery has recently setup for the benefit of all patients. It's free to use and it measures a range of parameters that are key determinants of current and future health.

- **Blood pressure**
- **Pulse**
- **Height**
- **Weight**

It asks you questions about your smoking habits and alcohol consumption. It's information that gets printed on a slip of paper that you hand in at reception.

### **But what happens next?**

All this information is entered in your medical record by a member of the clinical team at the surgery. They check the results and if there is any concern they will be in touch for a follow up appointment. It is a case of no news is good news as they only contact those for whom they have a concern.

For instance, one patient having used the machine was identified as having high blood pressure. This puts a strain on his arteries and organs and can lead to a heart attack later.

*Continued over page.....*

## Preparing for Tomorrow Event In-Focus

On the 22<sup>nd</sup> November the Argyle Surgery hosted a very successful event for patients, their carers and families at St Stephens Church Hall. The theme for the event was called *Preparing for Tomorrow*.

Over 70 people packed the church hall on a Friday afternoon. Many commented on how the event found a good balance between being informative as well as tackling a very difficult topic. Several asked that the event could be run again so that they could tell their friends and family to attend.

Discussing all the important things in the later stages of our lives is often difficult both with our loved ones as well as our GP practice team.

This event was a well-structured and highly informative approach to a very sensitive topic.

Presenters included a representative from Age UK who talked about the various support services and opportunities available to older patients and how to access them.

There was a specialist solicitor who spoke about the need and processes of making wills and powers of attorney and also the tax implications.

A local independent funeral home described the variety and options for a funeral and what to expect from a funeral home and what the processes are.

Also, Dr Down who is a GP at the Argyle Surgery and the Macmillan lead GP for the borough of Ealing, spoke about advanced care planning and how that helps the medical teams working across the NHS to ensure that they meet the wishes of the patient.

The overall message from the speakers was that the more you prepare and articulate your wishes with your family and of course the medical teams the better for both you and them in meeting your needs.

In addition, there were a number of stands from organisations that provide community transport, community support groups and events, and support services for the care of patients in the later stages of life. Attendees discussed a variety of topics in detail and gathered leaflets and information to consider later on.

A number of other GP surgeries in Ealing plan to hold similar events in the future based on the success and positive feedback from this one. Look out for future dates.

***'The Meeting was very beneficial and helpful, lots of ideas. Well done and thanks'***

***'Extremely helpful, thank you very much'***

***'Everything was very informative, especially the wills and probate talk which was quite clear. I would recommend this talk to my friends and relations'***



# In-Focus

## Just give me my prescription!

Many of us take regular medicines and therefore routinely spend so much time between the practice and the pharmacy requesting and collecting prescriptions. What happens in between requesting the prescription and receiving your medicines and what can you, as a patient, do to make sure you get your medication easily and quickly?

### **Making the request for a repeat prescription**

Make sure you have at least one week's supply of your medication remaining before making your request for a repeat prescription. Leaving it to the last minute could create stress and put your health at risk.

The best way to make the request is online via SystmOnline which also has an app for smart phones. If you currently do not have access, the next time you visit the practice bring a photo ID and proof of address and ask the Reception Team for an online account. Once you have registered and on the site via your computer or smartphone, you can see what medicines you take regularly, which ones are due and simply tick the ones you need. This is so much easier than walking around with bits of paper. It's easier, faster and avoids mistakes being made. Go on, give it a try.

### **What happens next at the practice**

Once your request has been submitted, a Pharmacy Technician at the practice will review and check what you currently take, whether a repeat is due and more importantly checks how long you have been taking these medicines and whether it's still safe for you to continue taking them.

They may identify you need a blood test or a check-up before they can give you more. So, they might give you less than what you asked for and send you a text message to book an appointment or a blood test or follow up appointment. For your own sake please respond to this quickly, don't ignore these messages. Some medicines are not intended to be taken continually for a long time.

Once a Clinical Pharmacist is happy with the request, they will approve the prescription either electronically or sign it the old-fashioned way by hand.

## 'How do I make sure I get my medication easily and quickly?'

### **Best way to get your medicines**

Tell reception where you regularly want to pick up your medicines, instead of coming to the practice, queuing, collect your prescription, going to a pharmacy (and maybe lose the paper on the way), queue again at the pharmacy, wait for it to be prepared, discover it's out of stock, have to come back later. Surely we all have better things to do?.

If you tell Reception which pharmacy you want to use, this can be a pharmacy anyway, near home or work and from then on every prescription will be sent there electronically, you will receive a text from the pharmacy when it is ready for collection. No need to visit the practice. It's an amazing service. Try it next time.

### **What medicines are not available by Prescription?**

There is a growing list of medicines provided by the NHS but there are also many common medicines now available over the counter without prescription.

Please see the article in this newsletter called: Changes to Prescribing over the Counter Medicines:

- Don't waste your time going 'round the houses' just to get your regular prescriptions.
- Help the team at the practice and yourself to get what you need, quickly, safely and accurately.
- Follow these steps:
  1. Get an online account
  2. Nominate your preferred pharmacy
  3. Take action at least a week before you run out of medicines

*Healthcheck Now cont'd*

Having spotted this early he was booked in for an appointment with one of the team and a combination of advice on diet and exercise as well as some medicines helped reduce the risks of what could have developed into a very serious health condition.

### **Why should I bother?**

This is information that the GP, Nurse or Pharmacist at the surgery will need to routinely collect from patients. It is valuable time in a very short and busy appointment. If you use the Healthcheck machine yourself, you save time to discuss more important things during your appointment.

Also, if you use the machine each time you visit the surgery you build up a regular record of your health that can be tracked over a period of time.

So please, for your own sake, use the Healthcheck kiosk each time you come to the surgery or when you are asked to do so. Don't walk past it, it's there for you to use, not as decoration!





## Heart to Heart Course

Do you have a Cardiac condition?

Is this affecting your mood?

Join Heart to Heart 8 Week course at the Ealing IAPT office (84 Uxbridge Road, W13 8RA). IAPT uses Cognitive Behavioural Therapy (CBT) based techniques to help boost your mood and reduce anxiety in relation to having a cardiac condition.

Please contact IAPT Team on 0203 313 5660/5661 to find out more about the course.

## In-Focus

### What is a PPC and How Do I Get One?



For many years I've had my prescriptions sent electronically to a pharmacy close to where I work in the City, which is so much easier than going to the surgery to pick up the prescription and then going to the pharmacy to pick up my medication. The pharmacist often mentioned a prescription prepayment certificate (PPC) and how I could save money – I honestly could not get my head around how money could be saved so just left it as I thought there would be a catch. Eventually I decided to ask the dumb questions and am now a signed up, certificate carrying PPC member and I urge anyone who has repeat prescriptions for 2 items or more to sign up.

The current per item charge is £9.00 but if you arrange a PPC, these are the costs *regardless of the number of items you need throughout your chosen period:*

- **£29.10 for 3 months - card payment**
- **£104 for 12 months - card or Direct Debit (10-monthly instalments of £10.40)**

*Do you have repeat prescriptions, and would you like to save money?*

### How much can I save?

Every two months I have a repeat prescription for 3 items with a 4<sup>th</sup> item 4 times a year so that works out as 22 items per year which equates to £193.60 per year, on top of this there are times I may need other medication such as antibiotics, steroids etc. which could bring the total per year to £225. With the 12-month PPC I pay £104 and no more for NHS prescriptions.

The surgery continues to monitor my medication usage and I still have to attend appointments/clinics, blood tests and have my medication reviewed as directed by the Surgery.

**The easiest way to apply for a PPC is online:**

<https://apps.nhsbsa.nhs.uk/ppcwebsales/patient.do>. You will receive a digital certificate to your email address.

Alternatively, you can apply by telephone: call 0300 330 1341 and pay by debit or credit card or set up a monthly direct debit or by post, pick up an FP95 application form from the surgery or your local pharmacy then send the completed form with your cheque or postal order to the address shown on the form. You can also pay in full at pharmacies registered to sell PPCs online.

Pharmacies will ask for evidence of your PPC – I keep a photo of the certificate number on my smartphone.

Your PPC will be valid from the date you buy it, unless you ask for a different start date.

The start date can be up to 1 month earlier or 1 month later than the date you buy it.

If you're buying a 12-month PPC, you can pay over 10 months by direct debit. This will help you to spread the cost.

If you have any questions, please talk to your pharmacist.

**Anne Costello, PPG Secretary**

# In-Focus

## Changes to Prescribing over the Counter Medicines

NHS England carried out a public consultation on reducing prescribing of over-the-counter medicines for minor, short-term health concerns. The NHS spent approximately £569 million on prescriptions for medicines which can be purchased over the counter from a pharmacy and other outlets such as supermarkets.

Vitamins/minerals and probiotics were also included in the consultation proposals as items of limited clinical effectiveness which are of high cost to the NHS.

The NHS each year spends:

- £22.8 million on constipation – enough to fund around 900 community nurses
- £3 million on athletes foot and other fungal infections – enough to fund 810 hip ops
- £2.8 million on Diarrhoea – enough to fund 2912 cataract operations



The new over the counter medicines guidance will curb the routine prescribing of products that are for:

- A self-limiting condition, which does not require any medical advice or treatment as it will clear up on its own, such as sore throats, coughs and colds
- A condition that is suitable for self-care, which can be treated with items that can easily be purchased over the counter from a pharmacy, such as indigestion, mouth ulcers and warts and verrucae.

The change will also ease some of the pressure on GP surgeries so doctors and other healthcare professionals can concentrate on patients with more serious conditions for example those with long term conditions.

From June 2019 a range of medicines that were previously available to buy over the counter (OTC) from chemists and supermarkets are no longer be routinely prescribed by the Argyle Surgery.

These are medicines associated with a number of minor, short term health conditions which either get better by themselves or can be easily self-treated.

The change applies to medicines for a total of 35 conditions which includes:

- coughs/colds
- cold sores
- cystitis
- hay fever
- nappy rash
- warts and verrucas

For the full list of conditions please see the guidance from NHS England below <https://www.england.nhs.uk/wp-content/uploads/2018/08/1a-over-the-counter-leaflet-print-ready.pdf>

### Will there be any exceptions?

There are certain scenarios where patients should continue to have their treatments prescribed and these are outlined below:

- Treatment for a long-term condition (e.g. regular pain relief for chronic arthritis or treatments for inflammatory bowel disease).
- For the treatment of more complex forms of minor illnesses (e.g. severe migraines that are unresponsive to over the counter medicines).
- For those patients that have symptoms that suggest the condition is not minor (i.e. those with red flag symptoms for example indigestion with very bad pain.)
- Treatment for complex patients (e.g. immunosuppressed patients).
- Patients on prescription only treatments

Please see the link below for further guidance <https://www.england.nhs.uk/wp-content/uploads/2018/03/otc-public-faqs.pdf>

### Where can I get further advice regarding self-care?

Self-care advice is available through our website and also through NHS choices websites. You can also visit your local pharmacy for advice.

## In-The-Know

### Involvement hub

There is a section on the NHS England website dedicated to patient and public involvement. It includes information and resources for the public, carers, patients, commissioners, and other health professionals who want to get involved in NHS England's work and/or enable others to participate to make a difference to healthcare.

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# In-The-Spotlight

## Catherine McCarthy, Receptionist

Catherine McCarthy will be a very familiar face to patients at the Argyle Surgery. She's been a receptionist there for eight years. Before joining the practice, Catherine worked as a teacher and then as a nanny but she tells of how for years she would walk past the surgery on Argyle Road and always had a feeling that one day she'd work there, she also found the building inviting. "Perhaps it was the red door!"

Eight years on, she has no regrets. She talks about the friendliness of the staff, the willingness of everyone in the building to work together and support each other and, of course, her part in helping patients.

I asked her to describe the work of a receptionist – there are three on duty in the morning, three in the afternoon. Those coming in on the first shift will start at 0745 and the first two hours are especially busy answering phone calls and emails and scheduling the days' appointments. But it would be a mistake to assume the three receptionists on duty are just dealing with requests from patients. They are also liaising with the district nurses and palliative care teams, dealing with hospitals and ensuring that post-natal appointments are arranged and kept. And that's not all: the receptionists are also arranging patient transport, scanning clinic letters for patients, dealing with patients' emails and registering new patients. This 'behind the scenes' work is revealing because it is not immediately obvious to patients calling in or waiting at reception, but nonetheless vital to the work of the practice. I ask Catherine to describe the problems, the negative side of the job and the first issue she raises is that of appointments. "There can never be enough appointments slots to meet the number of requests we get each day" she says, "even if we had two or three times as many doctors". It is evident that having to prioritise appointments can be stressful and she makes the point that this can lead to rudeness from a small number of patients.

Patients, she feels, should be more open to other routes to treatment, such as being open to seeing Advanced Nurse Practitioners and even getting advice from a pharmacist at the local chemists. She also feels that too many patients insist on seeing the same doctor. Continuity of care is clearly important, but Catherine makes the point it can be unrealistic when appointments are under such pressure. "Often patients will be prepared to wait three weeks to see one particular doctor, rather than another one in a few days."

There's also the issue of people turning up late for an appointment (or, indeed, missing them altogether). If a patient is more than ten minutes late it is possible they'll miss their appointment altogether.

But Catherine is hopeful for the future: she is optimistic that the new Advanced Nurse Practitioner triage system will see a more efficient use of appointments and generally improve access to the system. She also points out that patients can book appointments at other local surgeries (known as the 'hub practices'). These appointments are from 18:30-20:00 and at weekends from 08:00-20:00 hrs and can be booked through Argyle surgery reception in the normal way or by ringing 111 when the surgery is closed.

*"I know the general view of GP's receptionists is that we're dragons and try to be difficult" says Catherine "but the opposite is true. We genuinely want to help."*

**Alex Gerlis, Chair, Argyle Surgery PPG**





## Dr Abas General Practitioner

Dr Mustafa Abas joined The Argyle Surgery in the summer of 2018. During this time, he completed his general practice training with flying colours and decided to continue working with us as a general practitioner.

**If you could learn to do anything, what would it be?** Learn as many languages as possible

**If you won the lottery, what is the first thing you would do?** Pay off my parents mortgage

**When you have 30 minutes of free-time, how do you pass the time?** Reading

**If you could be any fictional character, who would you choose?** Dr House (From the TV Show House MD)

**What was the last experience that made you a stronger person?** Living abroad on my own

**What's your favourite indoor/outdoor activity?** Football / squash

**Have you ever had something happen to you that you thought was bad, but it turned out to be for the best?** Studying Neuroscience as a first degree instead of going straight into Medicine

**At what age did you become an adult?** 25

**Ten years ago, who did you think you would be now?** A GP or A&E doctor - I'm now both!

**What's the coolest (or most important) trend you see today?** Social media fundraising for good causes

**What advice do you have for kids who are struggling in school?** As long as you know you've tried your best, you'll have peace of mind irrespective of the outcome

**What would you most like to tell yourself at age 13?** Don't stop learning to play the piano

**How do you define success?** Knowing that you've fulfilled your personal potential

**What is your favourite thing about working at The Argyle Surgery?** The staff (and the patients of course!)

**What are your top 3 movies/books?** Gladiator Movie / East of Eden (John Steinbeck) / Harry Potter series

**What is the most challenging part of your job?** Dealing with patients with complex health needs.

**If you could change one thing about healthcare, what would it be?** More doctors and nurses!

**Growing up, what did you want to be?** A doctor

**You're hosting a dinner party. Who are the 3 people, living or dead, who you would invite and why?** Alan Shearer (Favourite footballer), John Steinbeck (Favourite author), Dalai Lama (for all his wisdom)

**If you were stranded on a deserted island, what one band or musician would help keep your sanity?** The Beatles

**If you could only eat one thing for the rest of your life, what would it be?** Chips

**What is one thing you cannot resist?** Chocolate

**Marmite – love it or hate it?** Still on the fence

**What TV show/movie are you ashamed to admit you love?** The Inbetweeners

**Where is the best place you've travelled to and why?** Rome, for the amazing history

**What superpower do you wish you had?** Read people's minds

**What are your hopes for primary care?** That somehow the pressures are eased to allow more time to dedicate towards patients

**What do you like most about being a Doctor?** Helping people in their time of need

**If given a chance, who would you like to be for a day?** Bill Gates

**First concert?** Damien Rice

**If you had to eat one meal, every day for the rest of your life, what would it be?** Lasagne

**What would you most like to tell yourself at age 13?** Don't stop learning to play the piano

## In-Your-Diary

### PPG Meetings

3 March 2020

2 June 2020 AGM

3 September 2020

5 November 2020

7pm to 8.30pm at  
The Argyle Surgery  
128 Argyle Road  
Ealing W13 8ER

## Are your contact details correct?

To ensure you receive important information from the Surgery, please ensure your contact details are up to date.

You will be sent a text reminder for appointments or other information such a change to surgery opening times over bank holidays etc.

If you're not sure or would like to make a change, please email or telephone the Surgery:

Email:  
[argyle.surgery@nhs.net](mailto:argyle.surgery@nhs.net)

Telephone:  
020 8090 1153