

In-The-Know

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/

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

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

- Meet the PPG
- Interview with Susan White (Advanced Nurse Practitioner)
- How to access services
- Health Tips

In-The-Chair

Welcome to the first newsletter from the Argyle Surgery Patient Participation Group (PPG).

This newsletter is one of number of ways in which the PPG and the Practice are seeking to ensure patients are better informed and show you how you can be more involved in finding out how the practice operates and how you can have your say on critical issues.

We hope you find the newsletter useful and that it also encourages you to become more involved, especially at a time when key decisions are being made about the future of the surgery.

If there are any issues you'd like to be covered in future editions of the newsletter, please do contact us.

We meet every six weeks or so at the surgery. All registered patients are eligible to attend, and we'd love to see more people at our meetings. The meetings start at 7pm in the surgery and we do make an effort to be sure we've finished by 8.30pm.



Alex Gerlis
Chair, Argyle Surgery
Patient Participation Group



Healthy London Partnership is developing a strategy for the children & young people's mental health workforce and they want to hear from you in a number of ways:

1. To hear from people to understand what is important to them about those who support the emotional and mental health of Londoners aged 25 and under. For people under 25, please complete this survey:

www.surveymonkey.co.uk/r/LondonSays

If you are a parent or carer to people aged 0 – 25, please complete this survey:

www.surveymonkey.co.uk/r/LondonSaysParentCarer

2. In addition to these surveys, there will be a Children & Young People's Mental Health Workforce Strategy launch event, with colleagues from HLP partner organisation Youth Access and young people who support this work from Hearts & Minds peer support charity.

The event is on 30 May at the Royal Festival Hall, SE1 8XX. Please [register here](#).

If you would like to hear more about this piece of work, please contact Jessica Simpson jessica.simpson2@nhs.net.

In-Focus

The Argyle Surgery Patient Participation Group

The NHS, now 70 years old, is a wonderful institution. Everyone will have positive experiences about the way they, friends and relations have been treated by it. But it is also a vast organisation and it is often difficult to navigate ones' way through it. It's not uncommon to hear people describe how they can feel overwhelmed by the NHS and find it difficult to have a say in how it operates.

But as patients of the Argyle Surgery you do have an opportunity to be more involved in this important part of the NHS. All NHS GP's practices are required to establish a Patient Participation Group (PPG). The Argyle Surgery PPG has been in existence for less than a year and it would be fair to say we have a long way to go. For a PPG to be set up, remain active and have a real say in the running of the practice depends on patients being prepared to be involved and remain so. It is your way of being involved and having a say in a key part of the NHS.

The Argyle Surgery PPG was set up last summer following a series of what were, initially, very well attended meeting at St Stephens Church. As the PPG came into existence and a committee was elected, meetings moved to the waiting room at the Surgery.

To be honest, even in the relatively small space where we meet, the room does not exactly feel overcrowded: we've never run out of chairs.

There are probably half a dozen people who regularly attend meetings and attendance is certainly never more than ten. This is out of some 8,500 patients registered with the practice. Of course we understand that for many people meetings are often difficult to get to: family and work commitments often make it impossible and we all know how life just gets in the way of things we'd like to do.

Maybe we ought to do more to publicise the PPG and the meetings. We'd welcome any suggestions in this respect. We're looking to broaden our message out into social media and are exploring all ways of ensuring that as many patients as possible are aware of the PPG and how they can become involved in it.

The PPG is not just about attending meetings. It has a real purpose in helping to shape the way the practice operates and how it interacts with patients.

The role of the PPG is not to run the practice or to have any regulatory function.

'The PPG is not just about attending meetings. It has a real purpose in helping to shape the way the practice operates and how it interacts. with patients.'

Our purpose is to be consulted, to come up with ideas and suggestions and to be a conduit whereby the views and opinions of patients are brought to the attention of the practice and to do our best to see these are acted upon.

The PPG is not a group of cheerleaders, there to tell the practice how well they're doing and how grateful we are. We are certainly there to be constructive, but at the same time we recognise that patients have a range of concerns. The two most important concerns at Argyle are undoubtedly over the future of the practice itself and the system of booking clinical appointments.

The future of the practice will be addressed in coming weeks, but all patients will be aware that the current premises are simply not fit for purpose. When the practice opened in 1982 it had a around 800 patients, one GP and one receptionist.

By the time it moved to its current premises on Argyle Road in 1989 three GPs were looking after 4,800 patients. Now there are 8,500+ patients and it is simply ridiculous to expect a Victorian house to provide a state of the art clinical environment.

The appointments booking system is always going to be a sensitive subject, because patients have a range of expectations of how it should operate and it is only human nature to see one's own medical need as a priority.

A new system started recently whereby all on the day appointments go through a triage referral with an Advanced Nurse Practitioner. I'm sure patients will have their views on how this system is working and possibly even have their own ideas of how it could be modified or improved. The PPG is where you can express these views.

There will be other issues that matter to patients too, ranging from home visits to prescriptions

The PPG is here for all such views to be aired, listened to and hopefully acted upon. It gives you a proper forum in which to have your say. If you feel strongly about any of these matters, or simply just want to be better informed and have some say, please do come to our meetings. They're all held from 7pm – 8.30pm at the Surgery.

The elected officers of the PPG are:

Chair: Alex Gerlis
Vice Chair: Rani Atma
Secretary: Anne Costello

If you would like to email any of the officers, please email: ppg.argylesurgery@gmail.com

We look forward to seeing you at a meeting soon.

Alex Gerlis
Chair
Argyle Surgery PPG

Get-In-Touch

If you have any suggestions and comments or have a question you'd like to ask the PPG, please email:

Anne Costello
PPG Secretary

ppg.argylesurgery@gmail.com

To contact the Argyle Surgery:

Email:
argyle.surgery@nhs.net

Phone:
020 8090 1153



This Month's Health Tips

Cervical Screening Programme

In March, Public Health England launched a major new national campaign 'Cervical Screening Saves Lives', with the aim of increasing the number of women attending their cervical screening across England. Around 2,600 women are diagnosed with cervical cancer in England each year, and around 690 women die from the disease. It is estimated that if everyone attended screening regularly, 83% of cervical cancer cases could be prevented.

All women who are registered with a GP are invited for cervical screening as follows:

- aged 25 to 49 – every 3 years
- aged 50 to 64 – every 5 years
- over 65 – only women who have recently had abnormal tests

You'll receive a letter through the post asking you to make an appointment for a cervical screening test, which will be carried out by one of the Practice nurses. Regular screening, which only takes a few minutes, can help stop cervical cancer before it starts, as the test identifies potentially harmful cells before they become cancerous, and ensures women get the right treatment as soon as possible.

The test usually takes around 5 minutes to carry out. The cell sample is then sent off to a laboratory for analysis and you should receive the result within a few weeks. Some women find the procedure a bit uncomfortable or embarrassing, but for most women it isn't painful. If you find the test painful, tell the nurse as she may be able to reduce your discomfort.

More details are available at: <https://www.nhs.uk/conditions/cervical-screening> or contact the Surgery.

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

Phone:
020 8090 1153

In-Focus

I need an appointment today!

Did you know that we have specialist nurses working at our practice who are experts in diagnosing and treating patients in need of urgent medical attention?

Every day hundreds of patients ring asking for an urgent appointment with a GP. But the vast majority of them are better served by first seeing a specialist nurse. This has proven to be very successful in offering more appointments, ensuring that patient needs are met quickly and satisfactorily, and that the patient sees the most appropriate member of the team who may not actually need to be a GP.

These specialist nurses called Advanced Nurse Practitioners (ANPs) are very experienced nurses that have had specialist training and have postgraduate qualifications. They can see, diagnose and treat anything around 70 to 90% of all patients who need an urgent appointment. This then frees up the GPs, Clinical Pharmacists and other Nurses to see those patients with much more complex health needs.



This is how it works:

1. You use the telephone booking system no need to speak with someone
2. You ring in the morning asking for an urgent appointment
3. You book an urgent appointment
4. This then puts you on a list that the ANP rings back. No exact time can be given, but usually patients get a call back in about a couple of hours from when they first rang.
5. The ANP then discusses your condition. It would help if you have prepared what to say on a piece of paper. Write down what the problem is, when it started, how it has changed over time.
6. There are a number of possible next steps:
 - a. You are booked in later that day to come in and see the Nurse herself or another member of the team at the practice or to come in for blood or urine test on another day.
 - b. You are given a prescription that you pick up at your usual pharmacy. No need to come in to the practice.
 - c. You are referred onto another part of the NHS such as the hospital for more tests or to see a doctor there.
 - d. You are given medical advice over the phone.

Based on the feedback we get from patients, they love this service. It is something that only a few practices offer so we as patients at the Argyle Surgery are very lucky to have it on the NHS.

'Every day hundreds of patients ring asking for an urgent appointment with a GP. But the vast majority of them are better served by first seeing a specialist nurse.'

In-Focus

We all hate queuing, or do we?

On an average day there are over 500 calls to the practice and growing. On average each phone conversation lasts around 4 or 5 minutes. That is well over 35 hours of telephone conversations during a typical day. The reception team deal with these calls as well as countless emails, callers at the reception desk, piles of paperwork, as well as chasing patients, hospitals and other organisations. The reception team are always overstretched. It is a very challenging job and nothing like working in any other office or shop. One minute registering a new born child at the practice, the next dealing with some bad news about a serious illness or death of a patient. Who knows what the next minute will bring?

We as patients can help in many ways. We really don't need to queue for a lot of things.

Making Appointments

There are other ways of booking an appointment:

Online – if you come in with a photo ID and proof of address you can request an online account.

This then allows you to book or cancel appointments and numerous other services. It's simple, easy to use and very convenient.

There is also an app coming out soon that will make this even easier (more on that another time).

Automated telephone system – if you call the practice at any time and then choose option 1 you can use the automated telephone booking system. You need to enter your phone number and date of birth so that the system recognises the person who needs the appointment. Then follow the simple instructions. Choose between urgent and routine appointments as well as male and female doctors, nurses and clinical pharmacists.

Requesting Prescriptions

There are several ways of requesting a new prescription:

Online – once you have your online account, you can use that to see what regular medicines you take, which ones are due for renewal and then request them. It is very likely that you get your medicines quicker this way than by using paper.

Email – if you know exactly what you need and don't yet have an online account then you can email your request. In the email write you first name, surname, date of birth and the list of medicines that you regularly take for which you need a prescription. Then send the email to argyle.pharmacy@nhs.net

But remember it takes two working weekdays to get your prescription. That doesn't include the day you made the request. Allow plenty of time before your medicines run out.

Arriving for Your Appointment

At the practice is a touch screen to register your arrival. If you have arrived before your appointment then use this. No need to tell the receptionist just to say you have arrived! This then automatically tells everyone at the practice when you arrived and that you are waiting in the waiting room.

Sometimes the touch screen doesn't recognise you. This is usually because you arrived after your appointment was due. Then you do need to check with reception.

So please help yourself by not queuing. That way it saves you time and frustration. Plus, it lets a very busy reception team deal with the more complex needs of patients.

*Megan Edwards
Argyle Surgery Practice
Manager*

In-Your-Diary

PPG Meetings

21 May 2019
4 July 2019
19 September 2019
29 October 2019
10 December 2019

**7pm to 8.30pm at
Argyle Surgery**

PPG Annual General Meeting

4 July 2019

The PPG's first AGM will take place on Tuesday 4 July 2019 at 7pm in the Waiting Room at The Argyle Surgery. The agenda is as follows:

1. Report from the Chair
2. Approval of the PPG Terms of Reference and Code of Conduct
3. Election of PPG Officers: Chair, Vice-Chair and Secretary
4. 2019-2020 Priorities
5. Any Other Business

The first part of the meeting will be the Annual General Meeting followed by the PPG meeting



In-The-Spotlight

Susan White, Senior Nurse Practitioner

There aren't many Susan White's: in fact, throughout the country there are no more than a handful of Advanced Nurse Practitioners who are also full partners in a GP-led practice. While she modestly agrees, she knows of two more in Ealing and there's no doubt Susan takes great pride in being a partner, a position she was appointed to soon after joining the Argyle Surgery some 18 years ago.

I interview Susan in her surgery on the first floor, at the back of the building, away from the bustle of the ground floor. She recounts how she came to be an Advanced Nurse Practitioner: training at the old Ealing School of Nursing, then working on a busy medical ward at Ealing hospital, eventually becoming a Deputy Ward sister. But Susan had always been interested in community medicine – her mother was a community nurse. She did a degree in community nursing and then worked throughout the borough as a District Nurse for ten years. But during this time Susan suffered a personal tragedy: her partner became ill with and then died from cardiomyopathy. It made Susan realise that she wanted to develop diagnostic skills and work directly with patients, which led to her becoming an Advanced Nurse Practitioner.

Susan describes the unique role of an Advanced Nurse Practitioner, which involve three additional years of training in areas such as diagnostic and examination techniques, prescribing, assessment, advice and management. She sees herself as an all-rounder, with a range of clinical skills enabling them to treat minor illnesses and injuries, allowing GPs to concentrate more on chronic conditions and more serious illnesses. She can always refer a patient to a GP but admits that she now only does that once a week on average.

Susan points out that the role of the Advanced Nurse Practitioner is now taught at Masters Level, underlining the how important the job is in the NHS

The role of the Advanced Nurse Practitioner is one patients at the Argyle Surgery are likely to become much more familiar with.

With the appointment of a further Advanced Nurse Practitioner (ANP) a new booking system is now in operation. This means patients requiring an on the day appointment will first be triaged by an Advanced Nurse Practitioner. Patients will call from 0800 for an on the day appointment and will then be called back by the ANP who will assess the patient's request and decide whether to allocate them an appointment that day with a GP or a nurse or offer alternative options.

I point out that some patients will perhaps be unhappy with the new system - they may feel the old one has worked well enough for them. But Susan feels it is bound to improve patient access to the practice and ensure they see the right clinician. She points out it is already being used successfully at the surgery's sister practice in Isleworth.

What, I ask her, is the one thing she feels would improve the service the practice provides? Susan gives me two answers. She describes the rate of DNAs – that is people not turning up for a booked appointment – as “horrendous”. And the second answer, perhaps related to the new booking system, is a request for patients to listen more carefully to all the booking options outlined when phoning the surgery. “Book appropriately” she asks.

What, I ask, has she most noticed changing during her long career in the NHS? Undoubtedly the admin, she replies: the targets and the paperwork. She also highlights how when she first started in the NHS antibiotics were routinely prescribed, whereas now clinicians are far more circumspect before doing so.

And the best part of her job? The teamwork she says, working with colleagues, helping patients and being a partner in the practice. It's clear that Susan's enthusiasm for the job and her dedication to working with patients has not diminished since her early days at Ealing School of Nursing.

*Alex Gerlis, Chair, Argyle Surgery
PPG*

