Welcome to this Spring edition of the Boultham Park Medical Practice newsletter which has lots of interesting content for you to enjoy. As usual, you are welcome to take a copy home with you although an electronic copy will also be available on the Boultham Park Medical Centre webpage as usual.

We would like to welcome Isobel Webster as our new Chairperson for the Patient Participation Group (PPG) and wish her well in her new post. We would also like to thank Margaret Gould, our outgoing Chairperson for the time and effort she put in during the previous year.

We have continued our theme of including bitesize steps to help you with using the surgery website. Remember to apply at Reception for a User ID and Password which will be sent to you. In this edition you will be shown how to log on to the webpage and book an appointment and if you are unable to attend, how to cancel an appointment. This will save you having to come and queue early in the morning or spend time trying to get through on the telephone. Remember, there will only be a limited number of appointments available.

We would also be delighted to learn about your views, ideas and what you would like your patient group to focus on. There is a questionnaire for your comments on the PPG noticeboard. Also look out for our Patient Survey which will be promoted soon. Help us to improve you're the service provided by Boultham Park Medical Practice.

Niloc
Hello again.

As this is the first of our quarterly newsletters since Christmas, can I start by saying on behalf of all of the team at the surgery, a very big thank you for all the cards and gifts given to the surgery in the run up to and during the Christmas period. We were all very much appreciative of your generosity and your kind thoughts and words.

Well with winter over and nicer weather on the way we should have seen some strain on the NHS lifted, but no, there has been no let-up in demand! Ordinarily we would expect to see the winter pressures on NHS Services easing by now but at the time of writing this article, we are still seeing an extraordinary level of demand with the County Hospital A&E operating to it absolute maximum. With this consistent level of unprecedented demand, it is unsurprising to many of us that services are struggling to cope. I myself spent a difficult evening at A&E recently with a daughter who had an accident and damaged her knee and so saw for myself first the pressures they were under. More worryingly while waiting, I was surprised at how many people, waiting for 4-5 hrs openly complained about the waiting times but then said they were there because their children had a cold or because they didn't want to go to the GP in the day when they had other things to do. Is this really how we should be using the NHS?

As the weather warms up and the holiday periods draw nearer we too will no doubt start to get people not attending GP/Practice nurse appointments because “they forgot and went to the beach instead” – unfortunately it happens every year. We still have patients complain about appointment availability and yet who then fail to attend their appointments. The same goes for home visits when the GPs go to patients’ homes only to find that they have gone out shopping to the hairdressers etc when they have a home visit appointment booked and yet who insist they are housebound! In the time it takes to go out and do just one home visit, a GP would normally expect to be able to see 3 different patients in the surgery.

Please think carefully about how you use the NHS resources and try to think if your appointment really is necessary or does it really justify a visit to A&E, which is for accidents and EMERGENCIES, not routine coughs and colds etc. We don’t want to deter the genuinely unwell or concerned but the NHS really does not have the capacity to cater for the minor self-limiting conditions such as short term coughs and colds.

Neil Hewson – Practice Manager

There are some excellent sources of self-care advice on the NHS website or other sources locally such as your local pharmacy that will save you having to go to the GP or to A&E. PLEASE PLEASE PLEASE use the NHS wisely.

On a more cheerful note, you will see in this edition of the newsletter that the Practice has signed up to become part of the NHS Clinical Research Network, please have a read.

Dementia is never far from the news these days and there is a nationwide Dementia Research project that is helping people with dementia their carers or anyone interested in dementia to be matched to studies. If you, or anyone you know would like to be involved please read the short article. Sign up forms are available at the surgery.

As many of you will know from past communications Dr McGowan left the surgery in December last year after many years’ service. We are very pleased that Dr Rebecca Caruana has now joined the Practice as a replacement. Dr Caruana will be working in the surgery for 8 sessions per week (Dr McGowan was 6 sessions).

In further anticipated manpower changes, Dr Whitlow will be reducing the number of sessions he works every week down to 4 clinics from July this year. Dr Whitlow will remain as the senior partner and will be remaining very active and engaged within the Practice. We are already looking at future manpower requirements and solutions.

Health Visitor and Speech and Language Services
Later in the year, the Health Visitor service will move from being a service run by Lincolnshire Community Health Services (LCHS) to a service provided by the local authority. This will entail a big change in the way services are provided and it is unlikely that after July this year that the Health Visitors will be holding clinics at Boultham Park Medical Practice any longer. They are being moved to a mobile working model and hence clinics from this surgery will unfortunately no longer be available. As a Practice we are very sorry to be losing this service and the close relationship that we have enjoyed with our Health Visitor nurses over many years.

On a similar note, some of you may well have already realised that the Speech and Language Service provided by Lincolnshire Community Health Services has already ceased from providing clinics from our Surgery. We are pleased though that LCHS wish to continue providing both a physiotherapy and podiatry service from our surgery.
The NHS vaccination schedule is a complex beast and not easy to describe here. The first and most obvious categories of vaccinations are those given to new-borns and the very young up to and including preschool vaccinations. These are extremely important vaccinations that need to be given at specific time and to a designated schedule if the child is to gain the necessary protection. We encourage all new parents and those with parental responsibility to ensure that these young children are brought to the surgery for their vaccinations.

The remaining vaccines that the majority of people either need or are entitled to, free under the NHS, include things like seasonal flu and pneumococcal, pertussis (whooping cough) for pregnant ladies, meningitis for University freshers, and shingles. For all of these vaccination there are qualifying criteria and not everyone needs them. The attached information shows the majority or routine vaccinations that we provide under the NHS.

Some vaccinations such as Hepatitis B are usually given for occupational health reasons and in this case it is usually the employer that pays for them rather than the NHS, especially if they are a requirement of a job role.

A Vaccination chart is enclosed as a flyer

Travel Vaccinations
Travel vaccinations are usually not provided on the NHS and are classed as private work, there are some that can be given under the NHS under certain circumstances but not many. While this is non-NHS work we do not charge for travel vaccination appointments but where the vaccine is not provided by the NHS there will be a charge to cover the costs.

Many travel vaccines require them to be administered in a certain time frame for them to have sufficient time to help the body become protected. When you suspect you require travel vaccinations, it is important that you complete a travel vaccination questionnaire as soon as you have booked your travels so that the nurses can then work out what is required and provide you with the correct advice and information. Having been informed of what you will need, you should aim to come and see the Practice nurse at least 8 weeks before you travel.

EHIC Travel Insurance – If traveling to countries in the European Economic Area and Switzerland then you should also ensure that you have a European Health Insurance Card (EHIC). These are FREE and provide a degree of healthcare cover whilst in these countries. More details can be found online at:

https://www.ehic.org.uk/Internet/startApplication.do

Have you ever wondered how your doctor or nurse knows the best treatment to prescribe when you are ill? The answer is simple – it’s all down to research studies which are designed to find ways to treat or prevent disease and improve patient care.

While we have been involved in some research work in the past we have recently formally registered to become research active, joining the NHS Research Initiative Scheme. Working with the National Institute of Health Research (NIHR) will enable the practice to open high-quality, carefully selected research studies that we feel will be relevant to our patients. This means you might be asked to take part in a clinical research study; of ours there is no obligation to do so if you do not wish. Alternatively, ask our staff about clinical studies suitable for you.

Taking part in a clinical research study is voluntary and can be a rewarding experience. We will be featuring more about the individual clinical studies we open in future newsletters.

No personal or identifiable information about any of our patients will be provided for research without the express consent of the patient concerned. If we think you are a suitable candidate for any given research project we may as a Practice write to patients on behalf of the research organisation but this will be an invitation to participate sent from us and the decision on whether or not you contact the relevant research organisation and agree to participate or provide your details will be entirely up to you. We will not divulge any information without your written consent.

To find out more about clinical research in the East Midlands visit:
http://www.nihr.ac.uk/nihr-in-your-area/east-midlands/

JOIN DEMENTIA RESEARCH
The National Institute for Health Research (NIHR) in partnership with Alzheimer Scotland, Alzheimer’s Research UK and Alzheimer’s Society have developed ‘Join Dementia Research’, a new service which allows people to register their interest in participating in dementia research and be matched to suitable studies. Patients, carers or anyone over 18 who is interested in participating can sign up—whether they have been affected by dementia or not.

This practice is helping to spread the word by displaying posters and leaflets in our patient waiting areas, or you can get involved by signing up on-line.

For further information or to sign up, please access:
www.joindementiaresearch.nihr.ac.uk/
**Using the Surgery On-Line Services**

**Step 1 – Accessing the Internet**

Log on to your computer in the usual way and access the internet by clicking on [link](#). (Sometimes you may need to double click it).

This will open the internet screen known as the ‘Web Browser’ which will look similar to this depending on the version of the Microsoft Internet browser:

**Step 2 – Access the Boultham Park Medical Centre Webpage**

On the screen there is a field headed ‘Web Search’ or ‘Where to Next?’ Click in this field and type: **Boultham Park Medical Practice** (Don’t worry about capital letters!) As you type, various options may be displayed beneath the field.

Either:

![Web Search field example](#)

Or:

![Where to Next? example](#)

With the first option – click on [link](#)

On the following screen you will see a ‘link’:

![Boultham Park Medical Practice](#)

Click on the blue/purple header. With the second option (Where to Next?), move your mouse and click on the option displayed as a website. (This is normally preceded with [http](#))

The Boultham Park Medical Practice webpage will now be displayed. The header looks like this:

![Boultham Park Medical Practice header](#)

At the bottom of the screen there will be a message about the site using cookies.

![Cookies message](#)

This allows the interaction between your computer and the Boultham Park Medical Practice webpage to work properly. Click on [link](#)

You are now ready to use the webpage to order repeat prescriptions, book appointments and read your medical history to name but a few. You will need your **Username** and **Password** mentioned earlier.
Access the Appointment System On-Line

Moving down the webpage you will see the following button:

Click on this button to display the following screen:

Enter your Username and Password in the fields provided
Click on the Login button with your mouse.

The following screen is now displayed:

Check your details and address are correct in the top left hand corner of the header. Please inform the Practice if they are incorrect

Click on Appointments and another screen will appear called ‘Appointments’.
Click on Book Appointment

A display of available sessions will be shown with a field identifying the next two weeks. If there are no sessions available for this period it will say so!

To see if there are any appointments available in the following two weeks click on the drop down arrow at the end of the date field and select the second date period option
Click on Show
If there are any available appointments, you will see something similar to the following screen (The number of available appointments will vary)

Click on the View button next to the appointment period and Doctor you would like. The appointment time slots will now be displayed which may include more than one available appointment time slot:

Choose the appointment you would like by clicking on the Book button

You can also add any comments into the Reason field if you wish to indicate why you need the appointment

You can also use the Cancel button if you do not want to select any that is offered

At any stage of the process you can always click Back to stop the process

Sunscreen Tips

Tips on applying sunscreen:
- To be most effective, apply sunscreen liberally. The average amount of sunscreen needed for the average adult to achieve the stated protection is around 6 to 8 teaspoons of lotion. If applied too thinly it provides less protection
- If you’re worried you might not be applying enough SPF15, you could use a stronger SPF30 sunscreen.

What are the SPF and star rating?
The sun protection factor, or SPF, is a measure of the amount of UVB protection. The higher the number, the greater the protection. In the UK, UVA protection is measured with a star rating. Sunscreen ratings range from 0 to 5 stars. The higher the number of stars, the greater the protection.

How long can I stay in the sun?
Don’t spend any longer in the sun than you would without sunscreen. In the UK, the sun is at its strongest from March to October, especially from 11am to 3pm. Try to spend time in the shade between these times. You can still burn in cloudy conditions, even if it is not warm. Find out your skin type and your sensitivity to sunlight on the Cancer Research UK website.

Should I reapply sunscreen if I swim?
Water washes off sunscreen, and the cooling effect of the water can make you think you’re not getting burned. Water also reflects UV rays, increasing your exposure. Sunscreen should be reapplied straight after you’ve been in water (even if it is “water-resistant”) and after towel drying, sweating or when it may have rubbed off.

What clothing should I wear?
Wear clothes that provide sun protection, such as:
- A wide-brimmed hat that shades the face, neck and ears
- A long-sleeved top
- Trousers or long skirts in close-weave fabrics that do not allow sunlight through
- Sunglasses with wraparound lenses or wide arms with the CE Mark and European Standard EN 1836:2005

What should I do if I get sunburn?
Painkillers, such as paracetamol or ibuprofen, will ease the pain by helping to reduce inflammation caused by sunburn. Sponge sore skin with cool water, then apply soothing after sun or calamine lotion. If you feel unwell or the skin swells badly or blisters, seek medical help. Stay out of the sun until all signs of redness have gone.
Are children more at risk of sunburn?
Yes. Take extra care to protect children and babies. Their skin is much more sensitive than adult skin, and repeated exposure to sunlight could lead to skin cancer developing in later life. Children under 6 months should be kept out of direct strong sunlight. In the UK from March till October children should:
- Cover up with suitable clothing
- Spend time in the shade (particularly from 11am to 3pm)
- Wear at least SPF15 sun screen

Apply sun screen to areas not protected by clothing, such as face, ears, feet and backs of hands. Consider sun screens that are formulated for children and babies’ skin as these are less likely to irritate their skin.

My child has eczema. What sun screen should I use?
Some sun screen may aggravate eczema. Check the label for ingredients that you know your child is allergic to. Test any sun screen on a small area before applying it to the whole body. Put on your child’s emollient and steroids first and then apply the sun screen about 30 minutes later. Remember to reapply sun screen regularly throughout the day and especially after swimming.

What are the signs of heat exhaustion?
Heat exhaustion occurs when the body cannot lose heat fast enough. If it’s not treated quickly, it can lead to heat stroke which is a much more dangerous condition. Signs of heat exhaustion include faintness, dizziness, palpitations, nausea, headaches, low blood pressure, tiredness, confusion, loss of appetite and hallucinations.

What should I do if I see someone with signs of heat exhaustion?
Get them to rest in a cool place – ideally in a room with air conditioning. Give them plenty of water. Avoid alcohol or caffeine as this will increase dehydration. Cool their skin with cold water by using a shower or cold bath or, if this is not possible, with a wet flannel or face cloth. Loosen any unnecessary clothing and make sure that the person gets plenty of ventilation. Monitor them closely.

Should I cover up a mole in the sun?
If you have lots of moles or freckles, your risk of getting skin cancer is higher than average so take care. Avoid getting caught out by sunburn. Use shade, clothing and sunscreen with a minimum of SPF15 to protect yourself. Check for a new mole, growth or lump or any moles, freckles or skin that changes in size, shape or colour. Report these straight away to your doctor as soon as possible. Skin cancer is easier to treat when caught early.

New Prescription Charges 2017
An NHS England spokesperson: “New guidelines will advise CCGs on the commissioning of medicines generally assessed as low priority and will provide support to clinical commissioning groups, prescribers and dispensers. The increasing demand for prescriptions for medication that can be bought over the counter at relatively low cost, often for self-limiting or minor conditions, underlines the need for all healthcare professionals to work even closer with patients to ensure the best possible value from NHS resources, whilst eliminating wastage and improving patient outcomes.

The government has announced an increase to the NHS prescription charge by 20 pence from £8.40, to £8.60 per prescription item or appliance dispensed. This change will come into effect from 1 April 2017. To ensure that those with the greatest need, including patients with long-term conditions, are protected, the cost of the Prescription Pre-Payment Certificate (PPC) has been frozen for another year. The 3 month PPC remains at £29.10 and the cost of the annual PPC will stay at £104, allowing unlimited prescriptions within a specified time period. Taken together, this means that prescription charges are expected to rise broadly in line with inflation.
Existing arrangements for prescription charge exemptions will remain in place:
- Certain medical conditions like cancer, epilepsy and diabetes
- Pregnant women and new mothers
- Children under 16
- Anyone over 60
- Those on low income
**Staff Training**

With the NHS workforce and shortage of qualified people never far from the news, it is important that the tomorrow’s workforce is foremost in our minds and that everyone plays their part in ensuring that we have the right people training now in order to serve us all in the future.

As a training Practice, we have been taking GP Registrar’s (qualified doctors who are now training to become GPs) for some time. We have also over the last year been taking nursing students.

We are now expanding our involvement in training further and will be taking medical students on 3 occasions this calendar year – these are students currently studying medicine at University. We have also now taken some work experience placements through a scheme with Nottingham University and many of you will already have met Sophie, one of our reception team who is undertaking an apprenticeship with us and doing an NVQ in customer service.

So what does all this mean? In addition to all the normal fulltime and longstanding members of our team, there are often new faces around. We, and they, know they don’t always have the depth of experience of some of the team and we cater for that with proper educational and training sessions. Sometimes things take a little longer and sometimes they will be asking question under the guidance of another member of the team or sitting in and watching. You don’t have to be seen by a trainee but they do need our help, and yours, to complete their training. If you have a real objection then please let the reception team know, and if someone is sitting in with another doctor or nurse, then you will be given the opportunity to speak to the GP/Nurse alone if you wish. We hope that where possible will help us train tomorrow’s workforce and thank you in anticipation of your help.

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**Guidance on Low Value Prescription Items**

To find savings of up to £400m a year in low-value prescription items, such as pain-killers, available over the counter, often at lower cost, NHS England has commissioned a review accompanied by new guidance for CCGs. Initial focus is on 10 medicines that are ineffective, unnecessary or otherwise inappropriate for NHS prescription, costing the NHS £128m per year. Following consultation, a national approach will be set out to be adopted by individual CCGs across England. The review seeks to address growing concern over the justification for low value prescriptions which absorb millions of NHS funding every year, that could be spent on care which has a bigger impact on improving outcomes for patients. NHS Clinical Commissioners have requested that NHS England now set out a national approach that would, following consultation, be adopted by individual CCGs across England.

The review will seek to address the growing concern over the justification for many low value prescriptions which absorb millions of NHS funding every year, that could be spent on care which has a bigger impact on improving outcomes for patients. NHS England will work with clinicians and clinical commissioning groups to develop guidelines initially around a set of 10 medicines which are ineffective, unnecessary, inappropriate for prescription on the NHS, or indeed unsafe, and that together cost the NHS £128m per year. In developing the guidance, the views of patient groups, clinicians, commissioners and providers across the NHS will be sought.

In light of the financial challenges faced by the NHS, further work will consider other medicines which are of relatively low clinical value or priority or are readily available ‘over the counter’ and in some instances, at far lower cost, such as treatment for coughs and colds, antihistamines, indigestion and heartburn medication and sun cream. Guidance will support CCGs in making decisions locally about what is prescribed on the NHS. Careful consideration will also be given to ensure that particular groups of people are not disproportionately affected, and that principles of best practice clinical prescribing are followed.
It is widely accepted that many visits to the GPs increase and medical problems exacerbated by patients' social conditions and environment. This can range from not being able to get out of the house, social isolation, the need for some basic domestic and personal care. As health and social care become increasingly integrated it is acknowledged that helping the public with social concerns can have a hugely beneficial impact on their lives and their health needs.

Some of you may have been aware of the former Primary Care Navigator service is now being sustained by Age UK Lincoln & Kesteven under the new name of: Personal Independence Coordinators.

The Personal Independence Coordinators are experienced staff who continue to support people at a significant time in their lives, helping to develop relationships with a wide range of NHS organisations and social care professionals.

The coordinators are able to open the door for those professionals, customers and their families to the wider range of services and products that are available to them and assisting them to ‘navigate’ their way around those services.

To date it has supported people with specific needs of varying degrees. Whether encouraging and signposting to support groups for individuals who are socially isolated, to ensuring that someone was receiving all the benefits that they are entitled to and has small aids and adaptations in their home to keep them safe. In addition to this positive move for the user, professionals referring in to the coordinators have seen significant levels of support and preventative measures put in place in a very short space of time, to help people remain living independently in their own homes.

One gentleman who referred his friend into the service commented: ‘It’s made a fantastic difference, it’s as if someone has waved a magic wand… he’s realised that people do care and it has even helped build relationships between him and other family members.’

Another comment from a GP surgery commented that having the coordinator present in the surgery has: ‘transformed the help that can be offered to our patients’

You can self-refer for help or for family members by contacting Susan Kellitt at Age UK Lincoln & Kesteven on 01522 696000. While run by Age UK, the service is available for those aged from 18 upwards, who are...
(Mark Goodier, Radio DJ, suffered from a stroke last November)

Research shows that 24% of people would wait to call an ambulance because they wrongly believe that they need to see 2 or more symptoms of stroke to be sure. Other barriers to dialling 999 include feeling that they need permission to act on behalf of others.

As part of the campaign people are being encouraged, whether they are a stranger in the street, a family member or the person themselves, not to hesitate and make the call immediately when they see any of the main stroke symptoms:

1. **Face** – has their face fallen on one side? Can they smile?
2. **Arms** – can they raise both their arms and keep them there?
3. **Speech** – is their speech slurred?
4. **Time** – to call 999 if you see any single one of these signs

Additional symptoms of stroke and mini-stroke can include:

- Sudden loss of vision or blurred vision in one or both eyes
- Sudden weakness or numbness on one side of the body
- Sudden memory loss or confusion
- Sudden dizziness, unsteadiness or a sudden fall, especially with any of the other symptoms

There are over 1.2 million people in the UK living with the effects of stroke. A mini stroke is also known as Transient Ischaemic Attack (TIA). It is caused by a temporary disruption in the blood supply to part of the brain.

The **Stroke Association** is a charity who believe in life after stroke and that together a stroke can be conquered. They work directly with stroke survivors and their families, carers, health and social care professionals and with scientists and researchers. They campaign to improve stroke care and support people to make the best recovery they can. They fund research to develop new treatments and ways of preventing stroke.

_The Stroke Helpline number is: 0303 303 3100_
**Boultham Park Medical Practice**

**Patient On-line Access - Survey Questions:**

1. Are you aware that Online Services are available for:
   - a. Booking appointments? Yes/No
   - b. Cancelling appointments? Yes/No
   - c. Ordering of repeat prescriptions? Yes/No
   - d. Access to test results? Yes/No

2. Are you already registered for these services? Yes/No
   - a. If yes, are you using the services? Yes/No
   - b. If No, would you like further information? Yes/No
   - c. If No, what sort of information would you like to receive and how?

3. If you are not using the services, please give a reason why:
   - a. No internet access Yes/No
   - b. Too complicated Yes/No
   - c. Prefer to come to Reception Yes/No
   - d. Other reason why not (please give details)?

4. If not registered for online services or using the on-line service what sort of information would help you to consider do so?

If you have not already done so, please also register for our SMS service including appointment reminders, just ask at reception.