

Boultham Park Medical Practice

Newsletter



Autumn Edition 2019

Editorial

Welcome to this Autumn edition of the Boultham Park Medical Practice newsletter which continues with the new layout that I hope is easier to read. I hope you enjoy your read and, 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.

The article about Patient Care Networks and Extended Hours goes some way to explain the new hours that the Practice provides and the options available to you..

Of course, we mustn't forget that it is the **FLU JAB** season which the Practice is working hard to fit into their busy schedule. Please remember to book your jab and ensure you turn up for it. Although inconvenient, there is a separate jab for the over 65's which may mean some people having to attend different times to their partner so please take time to book the right time.

We are always looking for new volunteers to join the PPG.

For those of you who like a little brain stimulation, there is a Soduku puzzle to try out. Look for 'Keeping the Mind Active'.

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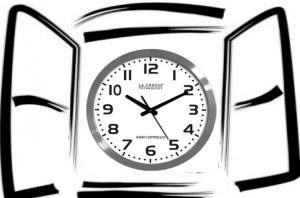
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Primary Care Networks and Extended Hours







As part of the ongoing changes to primary care within the NHS, new organisations called Primary Care Networks (PCN) have been established. Boultham Park Medical Practice is part of a new PCN called Apex.

The first additional service being commissioned by NHS England through the PCNs is the Extended Hours Service (EHS). This is additional to the Improved Access Clinics (IAC), we already provide, but will see further clinics being run in the surgery. Initially the Extended Hours Service will run on a Tuesday evening alongside our Improved Access Clinics.



The difference between the two services is that the Improved Access Clinics are available to patients registered at any of the Optimus group of practices whereas the Extended Hours Clinics will solely be for patients registered at their own practice.

In addition to the GP and Healthcare Assistant clinics that we already run on a Tuesday evening, we will now be adding a nurse practitioner, chronic disease and routine treatment room nurse clinics as well. These clinics put an additional strain on our already stretched manpower and so we ask that patients use these clinics diligently. In particular, please make sure that you really can attend prior to booking these appointments and don't then fail to turn up.



We hope patients will find these extended hours of service useful and thank you for your help in making them run efficiently.

Use your appointments wisely?



Emergency and Urgent Care needs

At all times, for life threatening emergencies only, patients should continue to call 999. For urgent (non-life threatening) medical care after 1830hrs Mon-Fri and during weekends & bank holidays, patients should continue to contact the NHS 111 service from where they will be given advice or will directed to the most appropriate service, for example, the GP Out of Hours service.



Patient Care Advisors

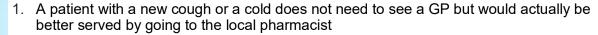




Your reception team have all recently been participating in 'signposting' training as a move towards becoming Patient Care Advisors. The purpose of this is to be able to help better direct you, the patients, to the most appropriate service or clinician.

We misuse an awful lot of appointments where patients are not booked in with the most appropriate person.

For example:





- 2. A blood pressure check is better performed by a healthcare assistant
- 3. A cytology screening test is better done by a nurse rather than a GP
- Continuation sick notes and prescription requests do not always need a GP
 appointment and medication reviews can very often be carried out by our own clinical
 pharmacists

We need to try and use the highly qualified and experienced GPs for more complex health needs rather than minor self limiting conditions.



When you book an appointment with the Reception team, they may now, under the instructions of a GP, ask you for some basic information so that they may direct you to the most appropriate service/clinician. The reception team are not prying and are bound by exactly the same rules and regulations regarding your confidentiality as the doctors and nurses.

We appreciate this might be a change that some patients are not wholly comfortable with but we ask that you cooperate so that we can make the best use of the resources and the available appointments we have.



Receptionists are here to help you





We are aware that many patients have their favourite doctor or nurse and would prefer to see them – this is a natural desire. However, we do ask that patients think carefully about the nature of the problem they have and who it is that they really *need* to see rather than who they *want* to see. If everybody thought only a doctor could solve their problems, then the difficulties some patients experience in accessing appointments would be made worse than they are now. We have a wide range of health care professionals working at the surgery now and it is important that they are used correctly:



Health Care Assistants

Take blood samples Carry out ECGs Ear syringing and health checks Basic wound care



Cervical Screening
Wound dressings
Vaccination and immunisations
Asthma checks and health checks
B12, Prostap/Zoladex injections etc



Chronic Diseases Nurse

Specialises in Asthma COP and diabetes check

Clinical Pharmacists

Minor illness/ailments and medication gueries and reviews



Nurse Practitioner/Advanced Nurse Practitioners

Additional clinical skills including prescribing, examinations, diagnosis of illness and referrals

If we all use these health professionals responsibly and appropriately, this would free up more GP time to deal with the more complex health issues rather than have them booked up with minor conditions that others can easily treat.

PS – Please don't forget that other local services are available without needing a doctor surgery appointment. For example: Over the counter medication for routine coughs & colds etc. The local pharmacists can help with the vast majority of minor ailments without the need for a GP appointment.

Self- referral exists for some services such as; stop smoking service, sexual health services and for some clinical services such as podiatry.









Electronic Transfer Prescriptions (ETP4) starts in September removing the need for printed prescriptions. It is important that patients register with the pharmacy of their choice so that their prescriptions may be sent electronically.



Those with repeat prescriptions would benefit further by registering for on line services where they can also order their repeat prescriptions without the need to attend the medical practice saving even more time!

Connect to Support





Many factors contribute to personal and family wellbeing and can have a knock on effect to people's health. While the Practice is here to provide primary medical care we inevitably become aware of other sources of help that people may find useful.



Regrettably we are not able to signpost patient to every advice, support group or charity on an individual basis; however, there are some places and organisations that keep up to date to with many, if not most, of these types of organisations. One particularly good source of information and advice is **Lincs2advice**

Lincs2Advice is a Charitable Incorporated organisation firmly focused on enabling people in Lincolnshire to be able to access quality support and information when they most need it. Through building a network of members they are able to signpost people to localised specific support.'

For more information go to https://lincolnshire.connecttosupport.org/

Or call **0300 303 8789**







Information Governance & Access to Medical Records

The data controller for patients' primary care medical records is usually the patient's registered medical practice.

How we keep your records confidential

Everyone working for the NHS has a legal duty to keep information about you confidential. We have a duty to:

- Maintain full and accurate records of the care we provide to you
- Keep records about you confidential, secure and accurate
- Provide information in a format that is accessible to you (i.e., in large type if you are partially sighted)

We will not share information that identifies you for any reason, unless:

- You ask us to do so
- We ask and you give us specific permission
- We must do this by law
- We have special permission for health or research purposes
- We have special permission because the interests of the public are thought to be of greater importance than your confidentiality

Our guiding principle is that we are holding your records in STRICT CONFIDENCE



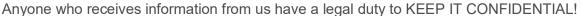
Who are our partner organisations?

We may share information with the following main partner organisations:

- NHS England
- Our Commissioners
- NHS Trusts / Organisation (Hospitals, CCG's)
- Ambulance Service
- Social Services

We may also share your information, with your consent and subject to strict sharing protocols about how it will be used, with:

- Education Services
- Local Authorities
- Voluntary Sector Providers
- Private Sector





Why we collect information about you

In the Practice we aim to provide you with the highest quality of health care. To do this we must keep records about you, your health and the care we have provided or plan to provide to you. These records may include:

- Basic details about you, such as address, date of birth, next of kin
- Contact we have had with you such as clinical visits
- Details and records about your treatment and care
- Results of x-rays, laboratory test etc
- Relevant information from people who care for you and know you well, such as health professionals and relatives

It is good practice for people in the NHS who provide care to:

- Discuss and agree with you what they are going to record about you
- Give you a copy of letters they are writing about you
- Show you what they have recorded about you, if you ask

We will only store your information in identifiable form for a long as in necessary in and in accordance with the NHS England's Rules

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How your records are used

The people who care for you use your records to:

- Provide a good basis for all health decisions made by you and care professionals
- Allow you to work with those providing care
- Make sure your care is safe and effective
- Work effectively with others providing you with care

Others may also need to use records about you to:

- Check the quality of care (such as clinical audit)
- Protect the health of the public
- Keep track of NHS spending
- Manage the health service
- Help investigate any concerns or complaints you or your family have about your health care
- Teach health workers and help with research

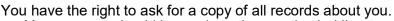
Some information will be held centrally to be used for statistical purposes. In these instances, we take strict measures to ensure that individual patients cannot be identified.

We use anonymous information, wherever possible, but on occasions we may use personally confidential information for essential NHS purposes such as research and auditing. However, this information will only be used with your consent, unless the law requires us to pass on the information.



The Legal Part

You have a right to privacy under the General Data Protection Regulation 2018 (GDPR) and the Data Protection Act. The Practice needs your personal, sensitive and confidential data in order perform our statutory health duties, in the public interest or in the exercise of official authority vested in the controller in compliance with Article 6(e) of the GDPR and for the purposes of preventive or occupational medicine, for the assessment of the working capacity of the employee, medical diagnosis, the provision of health or social care or treatment or the management of health or social care systems and services on the in compliance with Article 9,(h) of the GDPR.



- Your request should be made to the practice holding your information
- We are required to respond to you within one Month
- You will need to give adequate information (for example full name, address, date of birth NHS number etc.)

To access your record contact: The Admin Team, Boultham Park Medical Practice

National Data Opt-Out

The National Data Opt-out was introduced on 25 May 2018, enabling patients to opt out from the use of their data for research or planning purposes, in line with the recommendations of the National Data Guardian in her Review of Data Security, Consent and Opt-Outs. Patients who do not want their data to be used should be aware that they are responsible for opting out. Contact **The Admin Team** for further information

Further information is available on the Practice website





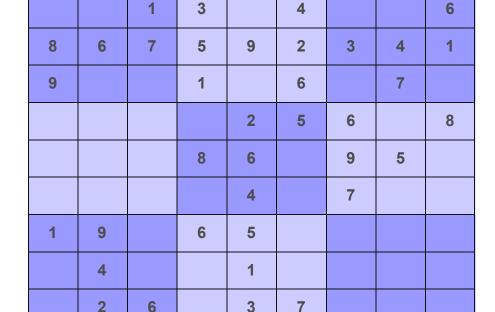


Keeping an Active Mind

Research does not definitely show that doing puzzles made brains "sharper". Or that doing puzzles staves off dementia in later life.

However, we have introduced an easy Soduku to help keep your mind active and help realise how enjoyable they can be to complete.







New Class of Cancer Drug Approved



A "revolutionary" new class of cancer drug that can treat a wide range of tumours has been approved for use in Europe for the first time. Tumour-agnostic drugs do not care where the cancer is growing in the body as long as it has a specific genetic abnormality inside.

UK doctors testing the drugs said they were "a really exciting thing". They said the approach had the potential to cure more patients and cut side-effects. The drug that has been approved is called **Larotrectinib**.



Charlotte Stevenson, a two-year-old from Belfast, was one of the first patients to benefit. She was diagnosed with infantile fibrosarcoma, a cancer of the body's connective tissue. She has been treated with Larotrectinib as part of a clinical trial at the Royal Marsden Sutton, in London, for the past year. Her mum, Esther, said: "We knew that our options were limited [so] we decided to give it a try and are so glad that we did. "We have been able to watch Charlotte develop and grow at a rapid rate, making up for lost time in so many ways and amazing us all with her energy and enthusiasm for life. "She can now have a relatively normal life and, best of all, the drug has had an incredible impact on the tumour."

Charlotte's tumour was caused by a genetic abnormality known as an NTRK gene fusion. One part of her DNA accidentally merged with another and the alteration in the blueprint for her body led to the growth of her cancer. ETTY IMAGES



But NTRK gene fusions are not unique to sarcomas - they also appear in some brain, kidney, thyroid and other cancers.

"It is a really exciting thing, as is it works across a range of cancers. It's not confined to one," Dr Julia Chisholm, a children's cancer consultant at the Royal Marsden Hospital, told the BBC.

NTRK mutations are relatively rare, but other targeted therapies are in development.



'Kinder treatments'

It marks a move away from treating a "breast cancer" or "bowel cancer" or a "lung cancer" and towards precision medicine that takes advantage of the genetic make-up of each patient's tumour.

Dr Chisholm told the BBC: "The beauty is it targets the abnormality.

"There are a number of biochemical pathways that are common in many different tumour types.

"I think this is the way things are going and this is about better outcomes, curing more patients and producing kinder treatments with reduced side-effects."



The decision by European regulators does not mean it will be instantly available for patients in the UK. But earlier this year, <u>NHS England described</u> tumour-agnostic drugs as a "revolutionary" and "exciting new breakthrough" in cancer and said preparations were under way to ensure patients were given access to them.

"The benefits for patients - in particular children - of being able to treat many different types of cancers with one drug is potentially huge, helping them to lead longer, healthier lives," NHS England chief executive Simon Stevens said at the time.

Prof Charles Swanton, Cancer Research UK's chief clinician, said the drugs were "exciting". He added: "The NHS will need to ensure the right genomic testing is available across the country to identify patients who could benefit so it's good that the NHS is already thinking about how to get this to patients with cancer as soon as possible."



Dr Brendon Gray, from Bayer, the drug company that developed Larotrectinib, said: "As the first tumour-agnostic medicine approved in Europe, Larotrectinib represents a real shift in cancer treatment."

