

## January 2019 – Surgery Newsletter



At the time of writing (1<sup>st</sup> Dec) we only have about a dozen flu vaccines left in the village for the over 65s, although we have plenty for those eligible patients under 65. As you know the organisation for this year's flu season over the last year has been nothing short of diabolical, but to date we have fared well through tenacious planning. However now we've nearly run out we have no idea what to do for over 65s who still need their vaccine, as the lack of guidance and direction from NHS England is shocking. I hope that by the time you read this, it has been resolved.

### **Summary Care Records (SCR) & Consent Preferences**

Many patients need to use the GP out of hours, minor injuries, the walk in centre, A&E and the ambulance services. You may be surprised to learn that they DO NOT automatically have access to even your basic medical record. It's important that any health professional has this information to treat you safely, so if you can provide your consent now, it will aid any future care. In addition to this we are trying to collect patient's consent or dissent for us to contact you by email and text (SMS) for health related things other than your direct care. All this can now be done on one single form which is available to collect from the surgery or download here: <https://bit.ly/2RqaTL5> - We are measured on how many patients have consented to the SCR sharing of information, so you would help us if you completed this form.

### ***“10 insider tips I bet you don't know about your GP”***

I came across a great online blog by a Dr Jon Griffiths recently which really struck a chord with our GPs. As a result I am serialising this blog with Dr Griffith's permission and share its contents with our patients and numbers two and three are below. You can read the full blog online here: <https://bit.ly/2GHIjRt>

#### **2. Your Doctor does not like lists**

Well, let me clarify this. Your Doctor would advocate you knowing what you are coming for, and if writing this down in advance will help you, then I would suggest you do so. However, bearing in mind point one above, if you only have 10 minutes and if you pull out a list of 5 problems this is pretty stressful for your GP. Were you expecting 2 minutes per problem? Be realistic. Prioritise what you want from your doctor.

#### **3. If you arrive 10 minutes late, you have missed your appointment.**

What I mean is that if you are 10 minutes late (or more), then you are not just late, but your appointment slot has come and gone. The next patient is now due. Remember that the impact of being late is not just on your doctor. They may be prepared to finish their surgery late in order to see you, but what about all the other patients who have booked in and arrived on time? If you arrive late, this is who you are causing hassle for, all the people around you in the waiting room. I guess I'm just asking you to think – is this fair? Of course doctors can be late too, but given this is usually due to other patients' needing more time for often serious reasons, we all need to do what we can to minimise the impact on others.

**The first meeting of the Patient Participation Group for 2019 will take place at 6.30pm on Thursday 17<sup>th</sup> January 2019 at the Great Bentley Village Hall.**

**Richard P Miller – Practice Manager**