## May 2019 - Surgery Newsletter



Active Essex campaign - It has recently been announced that Tendring district council have been awarded some funding towards the Active Essex campaign. This means that our patients can benefit from this funding. The campaign will be looking at ways to help people become more active. It is understood that in Tendring 33% of the

general population do not exercise for a minimum of 30 minutes per week. So whether it's ways to help you get out and about for a walk, jog, run, you have an idea about a class, or just a general idea you think will benefit the local area. We will have a representative from Active Essex visit our surgery waiting room one day this month to gather ideas from patients. Alternatively you can drop us a line with your ideas. We would love to hear from you: postmaster.gp-f81021@nhs.net

## Jo - Practice Nurse

# "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

# 7. Your Doctor wants the best for you

If your GP decides not to refer you on, or not to prescribe anything, or not to investigate you it is not because they are trying to be difficult or just trying to save money (don't forget, their take home pay is not affected by these things). It's usually because they don't feel you need any of the above. They also understand, probably better than you, the risks associated with over referral, over treatment and over investigation. This is not a game where you need to see how much you can get from the NHS. This is about keeping you healthy, investigating when appropriate, and treating when we need to. Bearing this in mind, your GP will not mind explaining it to you – just ask. If you were hoping for an X-ray, mention this and have a grown up conversation with your doctor about the pros and cons of doing that.

#### 8. Your Doctor is not taking part in a medical drama.

When you watch the TV, watch out for the doctors. I bet, 9 times out of 10, that they get the diagnosis right, first time. I'm afraid this is not real life. Many conditions are not at all obvious, and time is the only sensible way to start to differentiate between them. GPs often get vilified in the press for not picking up serious illness ("I attended my GP 3 times before they referred me with my cancer..."). In reality serious illness often initially presents the same as mild, self-limiting illness. A cough, for example, can be caused by many things, from a simple viral infection to lung cancer. The patient who presents to their GP with a cough that they have had for less than a week is unlikely to get a chest X-ray on the first visit, but if it has failed to settle after 3-4 weeks, then that's a different story. Be aware of this and remember that this is complex stuff. In particular, ask about the things that you should watch for and under what circumstances you should return for review

The next meeting of the Patient Participation Group will take place at 6.30pm on Thursday 16<sup>th</sup> May 2019 at the Great Bentley Village Hall.