

UNDERWOOD SURGERY

NEWSLETTER 06 / 14

Practice building works

Please be patient with us during July and August as we are undertaking improvements to our clinical rooms, toilets and front door. This may mean we will need to change the waiting room temporarily. In addition the car park may be harder to access at peak times. We are sorry for any inconvenience.



New services for 'at risk' patients and Over 75s

The NHS has introduced a new service for people who might be more at risk of an unplanned hospital admission in an emergency situation and who would be likely to benefit from more tailored, active support from their GP surgery. We have written to nearly 200 of our patients who we believe would most benefit from this service.

In addition, every patient aged over 75 has a named, accountable GP. This GP will take lead responsibility for ensuring that all appropriate services required are delivered to each of their patients aged 75 and over.

This might involve:

- working with relevant associated health and social care professionals to deliver a care package that meets the needs of the patient
- ensuring that the physical and psychological needs of the patient are recognised and responded to by the relevant clinician in the practice
- ensuring the patient has access to a health check.

(There is more on your named GP overleaf)

Change to Extended Hours Surgeries

We have been running extended hours surgeries on Monday evenings and Tuesday mornings for a few years now. They are popular with our patients who can't come to the surgery during normal hours. But the service we can provide in the evening surgeries has not been ideal, for example we cannot take blood tests as we can't get the blood to the hospital; in addition we don't have chaperones or receptionists available. Also, patients sometimes seem to mishear AM or PM, so they turn up for their appointment either 12 hours early or 12 hours late!

So we are going to experiment from July with moving our Monday evening clinic to the morning, so there will be extended hours clinics early on both Monday and Tuesday mornings. We hope this change will enable the service to operate more effectively for the people who really need it.



Your GP Cares

The British Medical Association is running a campaign called 'Your GP Cares' to draw attention to the work that GPs do and ensure that it is properly recognised by the NHS. GPs deal with 90 per cent of all patient contact in the NHS. But increasing workloads, declining resources and an overstretched workforce are going to place a huge strain on the services that we can provide in the future.

The BMA wants to make sure the NHS continues to support general practice and they are asking patients to contribute to the debate. If you would like to know more, you can visit their website on: www.bma.org.uk/YourGPcares

What to do if you don't see your usual GP?

At Underwood we have a Triage GP available throughout the day to speak to any patient or carer who cannot see their usual GP in time. You might therefore be offered an appointment with a different GP. This GP might then follow you up with the new problem before returning you to the care of your usual GP.

Urine Infections

Cystitis means inflammation of the bladder. It is usually caused by a urine infection. Typical symptoms are pain when you pass urine, and passing urine frequently. You may also have pain in your lower tummy (abdomen), blood in your urine and a high temperature (fever). Your urine may also become cloudy and may become smelly.

Some conditions cause symptoms that may be mistaken for cystitis. For example, in ladies vaginal thrush. Also, soaps, deodorants, bubble baths, etc may irritate your genital area and cause mild pain when you pass urine.

What is the treatment for cystitis?

Treatment options include the following:

Antibiotic medication. A three day course is a common treatment for most women.

Symptoms usually improve within a day or so after starting treatment. On average, taking antibiotics shortens the duration of symptoms by around one day. One option is that your doctor may offer you a delayed prescription for antibiotics. You then need only cash in the prescription if your symptoms worsen, or do not improve, over the following few days. In men and children the course is likely to be 7 days.

- **Not taking any treatment** may be an option. Your immune system can often clear the infection. Without antibiotics, cystitis (particularly mild cases), may go away on its own in a few days. However, symptoms can sometimes last for a week or so if you do not take antibiotics.

Paracetamol or **ibuprofen**. These ease pain or discomfort and can also lower a high temperature (fever).

WHO IS YOUR USUAL GP?

The surgery tries to allocate you a usual GP, particularly if you have a repeat prescription. In addition all patients over 75 years and those at risk of admission to hospital will also have a named GP. The name of this GP appears as the signing GP on your repeat prescriptions.

If you need a birth month review for blood pressure, heart disease, stroke diabetes, COPD or asthma then this should normally be with the practice nurse who specialises in that area. Once you have seen the nurse your usual GP will review your records and should put your next review date forward 6 or 12 months.

If your usual GP needs to see you then they will give you a note asking for a medication review face to face or via telephone.

Please note that it might take 2 weeks to get to see your usual GP so please plan in advance. This is because some GPs are part time, they have to cover the emergency line, there are holidays and in addition we have a branch surgery to cover.

If you are admitted to hospital or seen in Outpatients, please ensure the hospital is aware of your named GP.

Doctor Robin Hollands