



# Our Newsletter

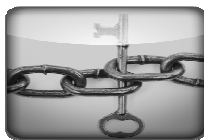
Issue 17

March 2009

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## Local Involvement Network (LINK) Update



Wandsworth LINK now has a new Executive Committee elected at a public meeting on 19 January 2009. The retiring Interim Executive was thanked for its work in setting up all the policies and procedures needed to make a LINK work. It was reported that LINK now has around 300 members, both individuals who live in Wandsworth and organisations who are active in the Borough.

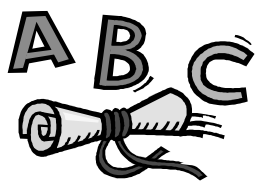
The new Executive was given the task of setting priorities for the coming year and developing a programme of activities aimed at improving services in conjunction with other health and social care organisations in the Borough. The Executive have made a good start on setting priorities. The papers can be read on the Wandsworth LINK website: [wandsworthlink.org](http://wandsworthlink.org)

The next meeting of the Executive Committee will be held in public on 20 April at 6pm. The venue will be published on the website and circulated to LINK members. If you want to know more about LINK, or if you want to become a member, either go on the website or contact the Wandsworth Care Alliance (WCA) who are host to the LINK. They will be pleased to answer your queries or send you papers.

## The NHS Alphabet

Another instalment of the user's guide to what's afoot in the ever-expanding world of NHS acronyms.

Today's is **GPLHC**, which stands for 'GP-Led Health Centre'. In its efforts to increase access to GP services and reduce health inequalities, Government has decreed that every PCT in England shall establish a new GP-Led Health Centre through an open procurement (tendering) process. This is separate from and additional to establishing polyclinics.



In Wandsworth our GPLHC will be close to Clapham Junction station and the successful provider from the bidding process should be announced soon. New services are due to start some time after 1<sup>st</sup> April this year. The GPLHC will be open 8am to 8pm seven days a week and will provide both

bookable and walk-in services for all who want to use it, whether they are registered elsewhere or not. It will also register patients who want to join the Centre.

If you want to read more about the local approach to creating the GPLHC, go to:

[www.wandsworth-pct.nhs.uk/pdf/GPledHealthCentre/QA%20final%20version.pdf](http://www.wandsworth-pct.nhs.uk/pdf/GPledHealthCentre/QA%20final%20version.pdf)

## Signed Up for Online Services Yet?

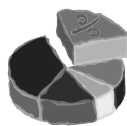
The Surgery is making efforts to reduce the time that patients have to wait to speak to Reception (see page 4). We should like to remind you of the online service described in our Newsletter 14 (May 2007). This enables patients to manage their appointments, request repeat prescriptions and submit non-urgent messages, 24 hours a day.



You'll get faster communication than is sometimes possible by phone, and you can see which doctors are available for some weeks ahead. So you can make appointments when it's convenient for you, and cancel them if necessary.

To register, contact Reception, who will demonstrate how to use these services. If you have already signed up but have lost your password, just call the Surgery on 020 8772 3326 or 3325 to get a new one.

## Poly Plans Shaping Up for South Wandsworth



Recent pre-consultation work has been carried out in 'South Wandsworth', which covers 130,000 people spread over Tooting and Graveney wards – two of our most deprived areas – as well as Balham, Bedford, Earlsfield, Furzedown, Nightingale, Southfields and the southern half of Wandsworth Common Wards (see Newsletter 16). It was found that:

- 89.1% are registered with a GP.
- 16.5% of those not registered stated that they did not know how or where to register, 29.1% were too busy.
- Local pharmacy, optician and GP services are highly regarded, being rated excellent or very good by 78.6%, 73.2% and 71% respectively.
- Some mental health and community services rate poorly with users (46.1% excellent or very good, 20.9% poor).
- Sexual health advice and 'Stop smoking' services are highly rated, whereas weight management and drug and alcohol services are not.
- 66.8% of respondents are satisfied with the range of services provided at their local surgeries, though 67.5% wanted to be treated by their GP in a local health centre offering a wide range of services.
- 84.1% would like to be able to get a blood test at a local health centre.
- 74.4% would like to be able to get an X-ray or ultrasound at a local health centre.
- 60.9% would like to have an outpatient appointment at a local surgery or health centre, instead of at a local hospital.
- 57.8% would like to go to a local health centre for healthy lifestyle advice.

When asked what would make them travel further for treatment:

- 58.4% cited weekend opening times.
- 56% cited evening opening times.
- 54% cited shorter waiting times.
- 50% cited having tests and treatments in one place without having to go to hospital.
- 35.5% cited health services in one place.
- 12.3% cited staff who speak their language.
- 5.6% cited anonymity.



A full 3-month public consultation will start shortly to present proposals planned for the coming years about how to cater for these needs and expectations, and to facilitate the major shift of activity out of hospitals and into appropriate primary care facilities. What will happen in South Wandsworth parallels the 'poly systems' approach going on in different ways in other parts of Wandsworth. Nothing is pre-determined, and the PCT has said that options for redesigning services in South Wandsworth will be informed by: the pre-consultation findings; the capacity of PCT-owned sites and other primary care premises; co-location options with the St George's Acute Trust; appraisal of potential sites for development; analysis of transport and travel times; and financial modelling. So there is every reason for patients at our surgery to have their say about the proposals and options for South Wandsworth when the formal consultation starts. You will be hearing more about 'federations', 'networks' and 'hub and spokes' possibilities to build capacity in primary care in our part of the Borough.

## Healthy Living Event – Saturday 15 November 2008

A most successful morning attended by more than 100 patients. People who attended the event said it was interesting, informative and fun. They joined in the various activities, which included getting weighed, a 'Dancing with exercise' class, cheering on the Yoga Bugs, collecting information leaflets, buying cards from Trinity Hospice, talking to representatives of local chemists, Balham Leisure Centre and the PCT, and finally taking home a Goody Bag. We drew a free raffle at 12.15 and eight lucky people could choose from the vouchers donated by Waitrose, Sainsbury's and 'Fit for a Princess' exercise classes.

There were 35 entries for the calorie competition. Only two entries appeared to fully understand the relative calorie value of different items and have an idea of what 100 grams meant, although ironically they did not get a single answer right! This must mean we all have a lot to learn about healthy eating. We had quite a lot of prizes and gave them out to at least the top two categories. We also displayed the right answers in the Surgery so people could learn a bit more about the calorie content of different items of food.

No-one wants to count calories all the time but knowing the relative calorific (and fat) value of different foods is really helpful when you are making choices about what to eat.

## Wandle Practices Commissioning Group

### Notes from the Patient Consultative Meeting held at Balham Park Surgery on Thursday 29<sup>th</sup> January 2009

**Present :** Seth Rankin, Jude Channon, Julia Smeddle, Keith Allen (Waterfall House), Adrian Lloyd (Streatham Park), Paul Dong (Earlsfield), K Pathmaseni (Elborough Street), A Messenger (Elborough Street), J Gilmore (Trinity Health Centre), Freda Hill (Franciscan), K P Pilly (Tooting Bec Surgery), J Lalla-Maharajh (BPS), N Mittal (Open Door), Leroy Gittens (Chatfield), Tom Pollock (BPS), Michele David (Southfields Group Practice)

**Apologies :** Bridie Tobin (BPS), Molly Peacock (Waterfall House), Kathleen Lynch (Triangle Surgery), Ruth Neilson (Tooting South Medical Practice), Hazel Elam (Brocklebank), Anna Tagliaferro (Furzedown), Brian Roberts (Wandsworth Medical Centre)

**Welcome.** Dr Seth Rankin welcomed everyone to the meeting. Seth highlighted that we want to talk about what's happening and what we can provide now and in the future and also want to hear what you would like us to provide.

**Urgent Care.** Seth outlined the background to this project. It was commissioned because St George's Hospital was overwhelmed with admissions, leading to a review of the system to see if patients could be dealt with better. St George's had asked GPs what they could do. A trial project is in process in Croydon to get high-risk patients to discuss their condition. GPs provide full-time GP support to a 'virtual ward' in the hope that patients can stay at home and not be admitted to hospital. Each patient has a single contact number. During working hours the Community Nurse is the contact and out of hours it's Harmoni. Currently there are 3 projects running in our area with a fourth due soon:

1. Central Wandsworth Area
2. Battersea
3. Roehampton
4. Tooting



**Phlebotomy.** The aim is to provide this service in Practices, to save patients having to travel long distances to have blood taken. So far three Practices in the Cluster currently provide this service – we hope more will follow.

**Methotrexate.** This is a drug to control rheumatoid arthritis. The third quarter of training for GPs is about to take place. Patients on this medication need to have their blood checked every 6-8 weeks to ensure that they're stable. Patients can now have this done at their Practice.

**Diabetes.** Seth confirmed that funding for five specialist community diabetes nurses has been approved. The additional nurses will support the existing three nurses and will work across Wandsworth PCT. Their role will also be to train doctors, nurses and HCAs in the care of those with diabetes and the signs to look for.

**Obesity.** Fourteen Practices across the Cluster are currently running 'healthy lifestyle' courses. Healthy lifestyle advisors (HLAs) are being trained in Practices to run shape-up groups in the community. Currently five people are employed across the Cluster to run these groups in the evenings and over weekends.

#### PCG Officers

This was discussed at the last PCG meeting in October 2009 and it was agreed that the arrangements for the meeting would remain as they are for the time being.

Jude Channon and Nicola Jones met with Colin Smith to discuss plans for next year and the future direction of the PCG. Jude mentioned that payment is being considered for specific bits of work that patients may be asked to do as part of their role in the PCG. It was suggested that a broader base of people may be needed, rather than just a Chair and Secretary. It was agreed that a conclusion to these discussions will be reached at the next meeting.

#### Date of the Next Meeting

**PLEASE NOTE THAT THE MEETING ON 26<sup>th</sup> MARCH WILL NOT GO AHEAD. IT HAS BEEN REPLACED BY A PPI WORKSHOP ON 24<sup>th</sup> MARCH AT THE GOLF CLUB, BURNTWOOD LANE, SW17 0AT.**

## SURGERY NEWS

### Client-Focused Evaluation Survey (CFEP): the 'Improving Practice' Questionnaire

Thank you to all patients who took the time to complete our annual questionnaire about the Practice and about the clinicians that you saw during late summer 2008. We are aware that some of you are bombarded with requests for feedback and that some may be suffering from 'questionnaire fatigue'. Your participation is extremely important to us, as we use the information to try to improve on our weaker areas and maintain our strengths as a Surgery. We have published a summary of results on a poster in the waiting room, on the wall facing our flat screen.

Based upon the CFEP's latest national benchmarks our mean score of 68% was in the highest 25%. Patients graded us more highly than the average for Practices taking part across the country, even in the areas where we scored lower figures than previously. That said, last year we set ourselves three priorities for improvement: telephone access; speaking to a practitioner on the phone; and seeing a practitioner of choice. Unfortunately, our scores decreased in these areas this year.

#### *The Difficulties*



**Telephone Access** Patients have expressed dissatisfaction at being asked to hold and then waiting for a considerable time. We have always tried to answer calls quickly in case it is a medical emergency, but non-urgent calls have been placed in a queue. We spent most of last year researching alternative telephone systems, as our existing one had very restricted facilities. We have recently installed a new system and have increased the number of staff available to answer telephones. Callers will now receive information on where they are in the queue, allowing them to decide whether to hold or not. We believe this will improve the speed at which patients are dealt with. Early audits suggest that this is most definitely the case. Our greatest volume of calls occurs between 8.00am and 11.30am and between 3.30pm and 6.30pm. We are generally able to answer calls more quickly during the middle of the day, between 12.00pm and 3.00pm.

**Speaking to a Practitioner on the Phone** Patients have suggested that they do not find it easy to reach a clinician over the telephone. Our clinical staff are happy to return calls after they have finished consulting, between scheduled meetings and afternoon or evening surgery. Messages can be left with reception. Sometimes it's difficult to get back to patients and time is wasted trying to catch people. We have a Patient Services Administrator who can often deal with queries more quickly through liaison with the clinical team, saving time in follow-up for patients and doctors. The direct line for this service is 020 8772 3330; alternatively, ask to be put through via our main number. We do not want you to feel that our clinicians are not accessible by telephone – it is just that they have to fit in return calls around other priorities.

**Seeing a Practitioner of Choice** It can sometimes be more difficult for patients to see the doctor of their choice if they need an appointment sooner than when a particular GP is next on duty. We have a number of part-time doctors, which adds to this problem. We particularly encourage continuity of care for patients – though we keep thorough clinical records, the GP that a patient has seen initially for a particular problem may more easily assess the next best steps.

#### Staffing



Welcome to Dr Adam Onyette, who is covering for Dr Kathryn Mounde and Dr Shehla Baig while they are on maternity leave. Dr Mounde has given birth to a healthy boy. Dr Lowri Bailey and Annie Romero-Collins, our IT Administrator, go on maternity leave in May.

Sadly, a much-loved receptionist Diana O'Bryen leaves at the end of March to relocate to France.



#### Improved Lighting to Our External Area

We have new and considerably improved lighting. We hope that you feel safer and find access easier, particularly for the early-morning and late-night surgeries.

### Dates of 2009 Meetings: Education Room, Balham Park Surgery

These are now listed on a separate sheet which will be posted in the Surgery and included in mailings.

**Balham Park Surgery – 236 Balham High Road – LONDON SW17 7AW  
Tel. 020 8772 8772**

[www.balhamparksurgery.co.uk](http://www.balhamparksurgery.co.uk)