



Our Newsletter

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An email from Dr Andy Morgan



Just before Dr Morgan's departure for Australia Bridie Tobin, on behalf of BPSPLG, presented him with a watercolour of the various locations of the Practice whilst he was with it. She received this email on October 9th 2009:

I wanted to write to you and hope you will excuse the electronic format in the circumstances. I was touched by the generosity and thought associated with the leaving gift that you presented to me on behalf of the Balham Park Surgery Patient Liaison Group. The picture will always help me to recall many happy years working at the Surgery as it moved up Balham Park Road and then on to the High Road site. Please could you convey my deep gratitude to the Group as well as to any other patients who contributed to the present.

In fact, the painting is the only piece of art that we currently have in our house in Melbourne as I brought it with us on the plane. All our other pictures are coming by ship and will not arrive until mid November. So it sits in proud isolation on our mantelpiece. We are still living out of suitcases and eating meals off a borrowed card table so it is difficult to say that we have properly settled in yet. However, William has started school and I started my new job this week, so things are progressing in the right direction.

Many thanks again for your kindness
Best wishes, Andy Morgan

A Garden for Staff

Our Practice had some money, bequeathed to us by patients. They did not indicate what they wanted us to do with the funds and we were keen to put it to good use. We did not have any usable outdoor space for the over 60 members of staff working at the Surgery, some of whom come in over weekends. Our kitchen is small, and if people wanted to have lunch outside they had to go to a café on the High Road. We decided, with the support of BPSPLG, to create a serene outdoor area facing many of the consulting rooms, to be used by staff when clinicians are not consulting.

The area now has a beautiful water feature, and lighting for use when it is dark. It has a self-watering irrigation system for the plants, so no upkeep is necessary. Feedback indicates that this addition has significantly improved the quality of working life for many of our team members, as they have an opportunity to sit outside in a tranquil environment during their short breaks. Patients also very much like the improved view. The 'before' and 'after' pictures show the fantastic transformation.



The garden was created through the generosity of Mr Thompson, Mrs Norris, Mr Raymond and Mr Galbraith and serves as a living memory of them. All of us at Balham Park Surgery would like to extend our thoughts and sincere appreciation to all their families.



Education Seminar: Men's Health

On July 8th 2009 Dr Daniel Isherwood and Dr Adam Onyett gave a lively and comprehensive presentation on *Men's Health*. It was very well attended, with standing room only in the Education Room.

Subjects the doctors covered included Prostate Cancer, Baldness (which has a surprising link with smoking), and Erectile Dysfunction (which could indicate heart disease). In all situations they stressed the importance of consulting GPs sooner rather than later. The average time for men before seeking treatment is 5 years (ranging from 3 months to 20 years!).

The doctors spoke about maintaining a healthy lifestyle. Risk factors were identified as smoking (both active and passive), high cholesterol, obesity, excessive alcohol and lack of exercise. They noted that approximately a third of men regained sexual function after a two-year weight reduction and exercise regime. They handed out a leaflet entitled "The Bandolier's Summary of Advice on Healthy Living", which contains ten lifestyle tips on how to avoid needing to see a doctor about heart disease or cancer. For more details, see the healthy living pages at www.ebandolier.com.

Barbara Madeloff: A Talk on Sensory Deprivation

On Saturday October 10th 2009 Barbara gave an interesting and absorbing talk about *Sensory Deprivation*, with personal insights into the adverse effects of blindness and other disabilities and the difficulties caused when other people do not notice or appreciate the implications of these disabilities for the individual concerned. Barbara talked about her experiences with the Surgery and with the health service generally, and about getting out and about with serious sight problems. She gave us an insight into the confusions that can occur as someone gradually loses sight or hearing. We were given some powerful examples of insensitive treatment of individuals because those around them did not appreciate there was a disability to be taken into account. Group members were keen to get Barbara's advice on what can be done to make life easier for anyone with hearing or sight defects, and they discussed what they and the Surgery could do to make life easier for these patients.

It was agreed that both staff and Group members would think about ways in which this could be achieved – perhaps including a questionnaire to patients asking them what help they needed, as well as finding ways of ensuring help was offered on arrival at the Surgery and also with prescriptions and the general medical information which is circulated in writing to patients. The Group set itself the target of agreeing some positive action during 2010.

Update on Taster Workshops and other Meetings

The workshops have been a great success since starting in September 2009. *Sleep and routine, Dealing with bereavement, Introduction to exercise, Fear of failure, Relaxation and Coping with acute and chronic pain, stress, anxiety and panic attacks* were all led by Vickie Neill, physiotherapist, and Sandra Russell, reflexologist and nutritionalist. *Assertiveness* and *Motivational strategies* were led by Pat Wiseman, our own psychologist. *Introduction to Yoga* was run by Nell Lindsell, who is now running weekly classes at the Surgery. So far we have had excellent feedback from all the sessions, with mainly very good attendance. *Managing time, Positive outlooks* and *Introduction to Pilates* will take place in the New Year; they all still have spaces available. *Caring for the carers* is to be rescheduled, with a date to be confirmed. If you would like to book a place at any of these, please speak to either Sam or Anna at reception.

Age Concern has been leading monthly meetings for the elderly, which they have really enjoyed. It has been a lovely opportunity to meet up for a chat and a cup of tea.

Anne Graham has been seeing patients for up to six sessions of relationship counselling, a free service which has been a great help to many.

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The Big Care Debate: did anyone notice?

Over the last few months in 2009 we had “The Big Care Debate” on the future of social care services. Did you notice? You can see what has been said and review the key documents via careandsupport.direct.gov.uk.

How to fund social care costs as our population ages and more of us survive for longer could hardly be more important, yet most people were unaware this debate was even happening. As an election draws nearer, be prepared for lots of confused shouting between the rival parties about what they can do better for social care. Most of it will be the usual hot air.

But back to the “debate”. What was it about? At its heart was the proposed creation of a “National Care Service” to run alongside the NHS, providing all people with needs above a certain threshold with a single England-wide service, giving them access to some public funding for their care in older age: a minimum of a quarter to a third of the cost, rising to full support for those on the lowest incomes.

Three options are proposed for how people might fund care costs not met by the state. The most feasible was a comprehensive model under which everyone over 65 would be compulsorily enrolled in a state insurance scheme, with a “one-off premium”, which people would pay whether they needed care or not.

To complicate matters, “hotel costs” in care homes would not be covered by these arrangements. But a “care now and pay later”, in effect from beyond the grave, was proposed whereby property owners could have the hotel costs for care met now, with cost recovery from their estates later on.

Whatever we think about these details, it seems to me that we are in danger of overlooking three basic things about our most important public service:

1. **First and foremost, we need one, integrated system of health and social care, not two.** A “National Care Service” that is insurance-funded will always be problematic compared with a taxation-funded National Health Service. Service users don’t see the rationale for the division between health and social care, and it is illogical in terms of how people with complex needs live their lives and need to access services. Having a seamless service is what we are supposed to be striving for.
2. **Second, the social care debate must be widened to include younger adults with disabilities and chronic conditions and the people who care for them.** Adult care is not just about elderly people. Many thousands of younger adults need better social care now – generally at home – and will increasingly do so as they live longer.
3. **While raising the universal standard of social care we must reclaim the principle of individual initiative to make extra provision.** Sir William Beveridge argued in his groundbreaking 1942 report, which created the foundations of the welfare state, that “*voluntary action by each individual to provide more than that minimum for himself and his family*” should never be discouraged by anything the state did.

The “Big Care Debate” was a missed opportunity to address these fundamental issues.

Andrew Craig

Update on Taster Workshops and other Meetings (continued)

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Finally, a carers group has been meeting monthly, with various sessions from massage to relaxation led by Karen Henderson with the help of Vickie Neill.

The workshops will continue until March 2010. We value your feedback; if you would like any of the above workshops to run again do let us know, so that these requests can be put forward for more funding.

SURGERY NEWS

New Starters, Leavers and Returners

Welcome to our new Receptionist Conal Keane, who started in December 2009.

Sadly, Anita Asiana left us for health reasons on December 10th after 13 years of service. We wish her all the very best for the future and hope she stays in touch.

Barbara Shannon, Health Visitor, retired on the same day. She is, however, hoping to return to provide part-time health visiting sometime next year.

Sarah Glynne, who trained with us as a Registrar, starts on 3 sessions per week as a Retainer (subject to Deanery approval).

Dr Daniel Isherwood (recently married) is leaving the Practice to join his wife in South Africa.

The following doctors will return from Maternity Leave:

Dr Katherine Mounde returns on February 10th, for 5 sessions per week.

Dr Lowri Bailey returns on April 12th, for 6 sessions per week, 3 early mornings and 3 early afternoons.

Dr Shehla Baig returns on April 26th, for 2 sessions per week including one early morning.

Maternity Cover Doctors who will stay with us from April 12th 2010:

Dr Laura Woods will reduce to 6 sessions per week including one late night.

Dr Meera Gowripalann will reduce to 4 sessions per week.

Dr Adam Onyett will reduce to 6.5 sessions per week.

The Swine Flu Vaccination Programme

The last six months have been busier than normal as GPs and staff dealt with people who had, or thought they had, swine flu. The vaccination programme started in November but was hard to implement, because of delays and changes in information from the Department of Health and the PCT. We have now given 800 doses to vulnerable patients and pregnant women, and are vaccinating all children under 5; we hope to finish the programme in March. The knock-on effect has been that all departments are busier, with more letters to write, busier phones and extra clinics.

New reports seem to show that the swine flu outbreak is waning, and that the mortality rate has not been as high as first reported.

DATES of 2010 MEETINGS

It was agreed at the December meeting that future meetings would revert to being held on Wednesday evenings, 7 to 9 pm. The change to Saturday mornings had not widened or increased attendance, in fact the opposite had been the case.

In 2010 BPSPLG will be celebrating its 10th anniversary and we intend to mark this with a special event in June. The forward programme is as follows:

13 January **10 February** **10 March: talk on *Sickle Cell Anaemia***

14 April **12 May: AGM, presentation and discussion about *Diabetes***

19 June, Saturday morning: 10th Anniversary Event *Celebrating Good Health*

14 July **8 September**

13 October: Education Seminar by Dr Marietta Swan on *Women's Health and Choose and Book*

10 November **8 December: Seasonal event**

We encourage any patients or members of the Practice who have a special interest in Sickle Cell Anaemia or Diabetes and would be prepared to contribute to these evenings, to contact any member of BPSPLG or Natalie Goldsmid-Whyte.

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www.balhamparksurgery.co.uk