

**Would you recommend Stour Surgery? The Friends and Family Test**



**What does it mean?**

The Friends and Family test is a feedback form that can be used to improve NHS services. After each consultation you will be asked whether you would recommend Stour Surgery to your family and friends if they need similar treatment or care.

**How does it work?**

When you visit Stour Surgery for care or treatment, an opportunity is available to give feedback by answering a simple question about your experience: **“How likely are you to recommend our GP practice to friends and family if they need similar care or treatment?”** You will be asked to choose one of six options, ranging from 'extremely likely' to 'extremely unlikely'.

Space is available for you to tell us why you gave that response in your own words.

Responses are anonymous and you can deposit your opinion in a ballot box in reception or give it to a member of staff. If you are unable to answer the question, a friend or family member is welcome to respond on your behalf.

Alternatively, you can also complete the Friends and Family test online by copying the web address below in to your internet browser <https://www.leavemyfeedback.com/4661>

**How are the results used?**

The information will give Stour Surgery your views on the care and treatment you have received, which alongside other existing ways of gathering feedback, will help the surgery to make improvements for patients.

The Friends and Family Test is also been successfully used in hospitals across the country and is proving to be valuable in obtaining patient experiences.

Test results for all NHS services will be published on the NHS Choices website.

For more information on the Friends and Family Test, please visit: [www.nhs.uk/friendsandfamily](http://www.nhs.uk/friendsandfamily)

Friends and Family Test does not replace Stour Surgeries complaints procedure or other forms of feedback. You are always welcome to request to speak with, or write to our Practice Manager Faye Francombe. Gathering this information enables Stour Surgery to continuously improve its services.

**Next Carer's Meetings:**

1st November—Memory Lane  
Bring a photo or souvenir  
6th December—Christmas Meeting

**Useful Links**

- <http://www.dorsetccg.nhs.uk> (Dorset Clinical Commissioning Group)
- <http://www.nhs.uk/pages/home.aspx> (NHS Choices)
- <https://www.england.nhs.uk> (NHS England)
- <http://www.healthwatchdorset.co.uk> (Dorset Healthwatch)

**PATIENTS CIRCLE VOLUNTEERS  
PATIENT OFFICERS AND  
COMMITTEE MEMBERS**



Audrey Vincent, Chairperson	486593
John Reeves, Vice Chair	429544
Richard Smith, Treasurer	486227
Erica Philips, Secretary	471170
Tricia Fagan	477659
Rosemary Hutchings-Webber	487655
Pam Kendall	482818
Pauline Medcalf	432651
Margaret Field	

Produced with the help and assistance of the Patients' Circle, Doctors and Staff at Stour Surgery

**HEALTHCARE TEAM**

**Doctors**

- Dr Graeme Klein
- Dr Karen Wilson
- Dr Christine De Silva
- Dr Robert Jones
- Dr Anne McAskie

**Practice Manager**

Faye Francombe

**Lead Nurse**

Tia Rees

**Practice Sisters**

- Jane Weir
- Lucy Murray
- Cathie Purnell

**Treatment Room Nurses**

- Justin Evans (HCA)
- Jackie Warren (HCA)

**Stour Community Outreach Team**

- Heather Amey
- Julie Bennett
- Jo Donnelly

**Community Staff Nurses**

- Kerry Gleason
- Louise Mallon
- Sarah Rixon (HCA)
- Emma Ward-Phillips
- Sasha Slaney
- Amanda James
- Louise Mills

**Health Visitors**

- Sandra Jenkins (Admin)
- Denise Beirne
- Chantal Joyner
- Emma Harnett
- Kirsty Tointon

**Midwife**

Sarah Bailey

**Financial Controller**

Laura Lane

**Secretaries**

- Carole Moore
- Gill Shanley

**Reception /Admin**

- Kim Brooks
- Sam Cake
- Sue Guest
- Melanie James
- Stephanie Macklin
- Pamela Maguire
- Amanda Rose
- Linda Sawyer
- Carmen Stone
- Gill Shanley
- Sam Town
- Marcus Walters

Stour Surgery  
Tel : (01202) 464500



## WINTER BAZAAR

**Saturday  
2nd December  
Stour Surgery  
10am – Noon**

**Run on behalf of the surgery by our Patients Circle Volunteers**



**Refreshments**  
Tea / coffee  
Homemade Cakes

**Raffle**

Many prizes, including £50 M&S voucher

**Stalls**

Books, Cakes, Toys, Bric-a-brac, Nearly New, DVDs/CDs, Jewellery, Tombola, Plants and Games

**All proceeds**

To purchase equipment for your surgery.

ALL DONATIONS are very welcome (but no electrical equipment please).

NEW HELPERS are always very welcome!

Tel: Audrey Vincent (01202 486593)

## **Don't Let Shingles Become a Burning Issue**

As older people are more likely to get shingles, the new national shingles immunisation programme for people aged 70 with a catch-up programme for people aged 79, has been introduced by the Department of Health to help protect those most at risk from Shingles.

**If you've ever had chickenpox, you could be at risk of developing shingles.**

Shingles (also known as herpes zoster) is a condition that is caused by the reactivation of the chickenpox virus. Once you've had chickenpox, the virus stays dormant (Inactive) in your nervous system and later in life can reactivate, and cause shingles. Shingles tends to occur more often in older people and usually causes a painful rash on one side of the body.

### **How likely am I to get Shingles?**

Around 1 in 4 adults could develop shingles in their lifetime. The immune system weakens with age and so the chance of developing shingles increases as we get older.

### **What are the symptoms of Shingles?**

The symptoms of shingles can range from mild to severe and they can be unpleasant for some. Shingles usually affects one side of the body, often on the trunk, or the head, neck or the eye. Shingles usually starts with a headache and tiredness, and you are likely to feel unwell. It's very common to feel a tingling or burning pain in the area of the skin before the rash appears. It usually takes two to four weeks for the rash to heal completely.

### **Can Shingles be prevented?**

The national shingles immunisation programme has been introduced to help protect those most at risk from shingles and its complications. The Shingles vaccine is recommended for 70 - 79 year olds, however, as the vaccination programme will be phased in over the next few years not everyone will be eligible for the vaccine initially.

### **Am I Eligible?**

If your date of birth is in the following range then you are currently eligible to receive the vaccine.

Born on or after 2nd September 1946 and aged 70  
OR

Born on or after 2nd September 1938 and aged 78  
(Up to their 80th Birthday)

**Contact the surgery to make an appointment**

## **Minor Illness Clinic**

Open surgery is a very busy Nurse lead service for Patients with a minor illness or injury only.

### **What are Minor Illnesses?**

Minor Illness is a medical term and does not mean it is unimportant. From a patient's point of view such instances may well not feel minor in any sense. Clinical problems and conditions are classed as minor illness when

- They can be self treated or
- They are uncomplicated; therefore not requiring any further investigations.

To help us to continue to provide a quality service we are more than happy to see you with such conditions as:

- Coughs, colds and sore throats that haven't responded to usual remedies
- Eye symptoms such as conjunctivitis
- Earache
- Hayfever
- Urine infections
- Emergency contraception
- Minor injuries

The following are NOT APPROPRIATE and we respectfully ask you to not use Open Surgery for On-going or long term conditions

- An ongoing or longstanding problem.
- Chronic illness which your GP is treating you for.
- Prescription request
- BP, HRT, Pill Checks or commencement
- Test Results
- Dressing Changes
- Dental Problems (Please refer to your dentist)
- Sick Certificate
- Moles and Skin Lesions
- Viral illness for less than 5 days (Please see pharmacist)

For any of these conditions please arrange a telephone consultation with your usual GP or make a Nurse appointment in the usual way.

May we also remind you that, that in the interests of other patients, staff and infection control you **SHOULD NOT** attend the Surgery if you have diarrhoea and vomiting.

Your local pharmacist is also a good source of information for minor conditions. Good advice is also available through the internet on patient.co.uk



Health & Social Care  
Information Centre



### ***How do I include additional information in my Summary Care Record?***

Your GP practice may recognise that having additional information in your SCR will be of benefit to you and may suggest this change. Alternatively, you can discuss your wishes with your GP practice and agree that information should be added to your SCR.

Additional information will only be included in your SCR after discussion between you and your GP practice, and only if you give your permission.

Once you have chosen to add additional information to your SCR, your GP practice will continue to do this and keep it up to date. Remember that you can change your mind at any time by simply informing your GP practice.

### ***Vulnerable patients and carers***

Certain vulnerable patient groups such as those with dementia or with detailed and complex health problems can particularly benefit from additional information in their SCR. If you are a carer for another person and believe that they may benefit from additional information in their SCR, then you can discuss this with them and their GP practice.

### ***Children and the Summary Care Record***

If you are the parent or guardian of a child under 16 and feel that they are old enough to understand, then you should make the information in this leaflet available to them and support them to come to a decision as to whether to supplement their SCR with additional information.

If your child cannot understand and you believe that they may benefit from additional information in their SCR, then you can discuss this with your GP practice.

### ***Where can I get more information?***

For more information about Summary Care Records you can:

- i) Talk to the staff at your GP practice
- ii) Visit: [www.hscic.gov.uk/scr/patients](http://www.hscic.gov.uk/scr/patients)
- iii) Phone the Health and Social Care Information Centre on 0300 303 5678

For more information talk to the staff at your GP practice or visit [www.hscic.gov.uk/scr/patients](http://www.hscic.gov.uk/scr/patients)

You can also phone the Health and Social Care Information Centre (HSCIC) on 0300 303 5678

## Support Your Practice Book Your Flu Appointment Now

**To book is easy: either call in to reception  
or telephone 01202 464500.**

Each year, the viruses that are most likely to cause flu are identified in advance and vaccines are made to match them as closely as possible.

The vaccines are recommended by the World Health Organisation (WHO) and this year WHO has announced that the 2017/18 flu vaccine will protect you against three types of flu virus.

It is important that we vaccinate our 'at risk' patients, those over 65 with underlying disease such as diabetes or heart disease and our pregnant ladies.

Each year there are over 3000 - 4000 deaths due to flu. The vaccination is effective at reducing the complications of flu

### Children's Flu

*The flu vaccine for children is given as a single dose  
of nasal spray squirted up each nostril.*

It is recommended that all children aged 2,3 and 4 years olds (DOB 01/09/2013–31/08/2015) should be vaccinated.

By vaccinating your child against flu you protect them, and make it much harder for the flu virus to spread.



## Adding more information to your Summary Care Record

Care professionals in England use an electronic record called the Summary Care Record (SCR). This can provide those involved in your care with faster secure access to key information from your GP record.

### **What is additional information?**

Additional information can be added to your SCR by your GP practice and is a summary of information about your medical history. It can include the following:

**Your long term health conditions** such as asthma, diabetes, heart problems or rare medical conditions.

**Your relevant medical history** – clinical procedures that you have had, why you need a particular medicine, the care you are currently receiving and clinical advice to support your future care.

**Your healthcare needs and personal preferences** – you may have particular communication needs, a long term condition that needs to be managed in a particular way, or you may have made legal decisions or have preferences about your care that you would like to be known.

**Immunisations** – details of previous vaccinations, such as tetanus and routine childhood jabs.

Please note: specific sensitive information such as any fertility treatments, sexually transmitted infections, pregnancy terminations or gender reassignment **will not be included**, unless you specifically ask for any of these items to be included.

### **How will additional information help me?**

Essential details about your healthcare can be very difficult to remember, particularly when you are unwell. Having additional information in your SCR means that when you need healthcare, you will be helped to recall this vital information.

There are already clear benefits for your care from having medication, allergy and adverse reaction information available through your SCR. If you choose to add additional information, this can further increase the quality of your care. Additional information can also empower you if you need some help to communicate your complex care needs.

For more information talk to the staff at your GP practice or visit [www.hscic.gov.uk/patients](http://www.hscic.gov.uk/patients)

You can also phone the Health and Social Care Information Centre (HSCIC) on 0300 303 5678

## The Other Side

You see 'a GP,' a role who is there at your service to sort out your healthcare needs.

WHO is on the other side? Do you know? Can you see?

**What do you see?** You had to wait to be seen. This annoyed you. What on earth is the GP doing? You grumble as you go in to be seen.

**What is the other side?** Patients keep arriving every 10 minutes over and over all day long. Your GP is trying to keep to time but people keep coming in with lists, complex issues and mental health problems which can't be done in the allocated time. The GP knows you don't like having to wait. She feels guilty about this and stressed by it. She apologises even though it's not her fault. The GP is adding 'catch-up' slots in to try and prevent patients having to sit in the waiting room so long which makes her whole day even longer. For you, the patients. Putting you first. *But you don't know all this. You can't see.*

**What do you see?** You reel off a list or mention a big issue at the last moment or 'Can you just....?' You have paid your taxes. You are entitled to make the most of this service, especially as it's taken you weeks to get an appointment. It hasn't occurred to you how much time this needs and that you are now making other people wait longer.

**What is the other side?** Your GP hates that you've had to wait so long for the appointment but can't fix a system that can't cope with the increasing demands on it. Your GP is worrying about how the other patients will be getting more disgruntled as YOU make them wait longer. Your GP wants to address all these problems thoroughly but there is too much time pressure so feels like a poor job is done even though you've taken twice your allocated time. Your GP tries to make sure your needs are put first and makes extra work for herself to do this....makes sure you don't have to battle for an appointment next time. *But you don't know all this. You can't see.*

**What do you see?** The GP only has a few hours of appointments twice a day. There is loads of time off in between. Most of them only work part-time anyway. What do they do all day? Why hasn't my prescription or letter been done yet?

**What is the other side?** Your GP keeps going all day long seeing patients, phoning patients, doing home visits then straight back in to more patients and phone calls. Usually without stopping to draw breath – the regimented timing of the system doesn't allow it. There are no breaks. Lunch is a bonus but usually eaten at the same time as working. Finally the last patient contact is done. She draws breath. Now to sort and action the blood results, incoming letters, referrals to do,

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prescriptions to review. She has worked non-stop for 12 hours. So far. And still not finished. Finally, she stops, exhausted but still not finished. The rest will have to wait. Her young children have been put to bed now and she has missed it. Again. She is not part of their lives at this time of day. There's all the housework to do when she eventually gets home – the family need looking after. She'll be back at work again tomorrow to do it all again – but really can't face it.

The days are hard, stressful, long and emotionally intensive. 'Part-time' GP is as many hours as other full time jobs and extremely draining. On the days 'off,' she looks after her young children and plods through the work that needs to be done for the family, but can't keep on top of it. This is not a rest. She has nothing left to give on these days and patience is thin; the job has sapped it all away. She feels like a rubbish parent. *But you don't know all this. You can't see.*

**What do you see?** Your GP is there to talk to. Somebody to help you feel better. You feel in a dark place. Life is rubbish. It's their job to deal with things like this.

**What is the other side?** Your GP 'takes on' your problems and emotions. She empathises with the pain your life is causing you and feels your tears. Sometimes, she wants to join in. She gives you the time you need, even though she knows subsequent patients will complain about waiting. This happens time after time every day. She is human too. She is giving of herself. But it chips away bit by bit. She starts to dread seeing patients like you as it is taking it's toll. But she keeps going, giving her all at work, trying her best for her patients. *But you don't know all this. You can't see.*

**What do you see?** You had to wait ages in the waiting room today. The doctor seems to be all over the place. Doesn't appear to be taking things in properly. Nearly forgot to give you the prescription.

**What is the other side?** Your GP is human too. Your GP is not infallible. Your GP was trying to get through the day whilst feeling unwell herself. She has a chronic disease too and a virus at the moment on top. But she is desperately trying to put your needs first. *But you don't know all this. You can't see.*

**What do you see?** The wait for the appointments, the wait in the waiting room, the referral or procedure you can't have because the NHS can't afford to fund it, the referral that's been done but there's no appointments available because the system is pushed to the limit, the wait for prescriptions and letters to be done, increasing prescription fees. 'It's not good enough.' Whether it be you've paid your taxes or you're eligible for free prescriptions, you want to milk everything you can out of the system; because you think you are entitled to.

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**What is the other side?** Your GP knows you are frustrated and completely understands. Your GP and her family have medical problems too. Your GP waits for GP services. Your GP waits for hospital services. The system is pushed to the limit and failing – she knows it's not good enough. Your GP can't fix it. Your GP is also frustrated because she can't meet your needs in the way she wants to. You're making it worse trying to get every little bit you can out of it. It is a vicious cycle. You could help by remembering the big picture and taking as little as you really need to allow the system to recover a bit. Use other resources. Your GP makes the effort to try to explain this for the greater good before the NHS fails altogether. But you don't want to listen and understand. Your GP chose this job through the innate desire to help people and used to feel like she could do this and enjoy it. Now, not only can she not provide the service she wants, but the patient frustrations and overall negativity has made the whole thing a trial. She looks for a way out as several more decades of this fills her with horror. There is no way out. This is the only job she knows and she has to provide for her family. She has to keep going. *But you don't know all this. You can't see.*

**What do you see?** Your GP is off sick. Probably a chest infection or something. She'll be back soon.

**What is the other side?** No it's not that. Your GP has nothing left to give. She is broken. **But you don't know this. You can't see.**

## Little Brown Bird - © Pauline Green 2014

Little Brown bird sat still on the beam,  
"Come back to the nest", her partner cried.  
But she shook her head, fluffed her feathers out,  
"Something wonderful's happening," she replied

He flew off home, for the air was cold,  
But she shivered and stayed, eyes everywhere.  
And she saw a star rise in the eastern sky,  
As a newborn babe's cries filled the air.

A chilly draught pierced the tiny bird  
As shepherds opened the stable door,  
And as they gazed at the child with joy,  
She fell down frozen on the manger's straw.

She felt her life start to ebb away.  
But the baby smiled very gentle and sweet,  
And as he touched her feathers so soft,  
Warmth filled her. She opened her beak to tweet.

But a wonderful song filled the stilly air,  
As the shepherds looked at her tiny form.  
And still, if you're lucky you'll hear that song,  
As the nightingale sings from dusk 'til dawn'

## Stour Surgery Closures

### Protected Learning Time Training Sessions 2017

A Protected Learning Scheme has been introduced by NHS Dorset to enhance communication and learning within GP Practices and is one component supporting the implementation of new patient care pathways affecting primary care.

In order to ensure equity across all practices in Dorset, quarterly training sessions will be held on the following date and times:

**Tuesday 7 November (1.30pm-4.30pm)**

Stour Surgery will be among most surgeries in Christchurch that will close for the 3 hour duration.

If you have a concern of an urgent medical nature please contact the NHS 111 Service on 111

## Stour News is Changing

Stour news is our newsletter we create for our patients, but we need your help!

We need to know what you want to read and what you would like to see in it?

Please can you e-mail your and suggestions and ideas to [stour.surgery@dorset.nhs.uk](mailto:stour.surgery@dorset.nhs.uk) or pop them in a letter to the surgery.

I look forward to trying to implement them into future issues.

## Are you a undiscovered Mary Berry or a budding Alan Titchmarsh?

The Stour Surgery Patents' Circle is an organisation that has been running since 1996. The Circle provides a vital forum for maintaining additional links between the Surgery - doctors, nurses, administration and patients. All patients registered with Stour Surgery are members of the Patients' Circle

Our Patient Circle holds Bazaars at the surgery twice a year as part of their fundraising activities with a view to help in providing medical equipment over and above that provided by the NHS.

If you would be happy to donate to our cake or plant stand or have good quality nearly new clothes that we can sell at our Bazaars please contact Patricia Fagan 01202 477659.