

2006

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1. TRAINING PRACTICE

We have now been approved as a Training Practice. This means that we shall have trainee GPs attached to the practice for six months at a time. The trainees are qualified doctors who need to gain further experience in General Practice before they can work as independent GPs and move on to their own practices. Dr. Ian MacLeod is the designated Trainer, although all our GPs will participate in supervising the trainee.

We are therefore pleased to welcome Dr. Carolyn Sadler, who started with us at the beginning of February and will be with us for six months, working 3 days a week.

She will, on occasions, need to video her surgeries for the purposes of assessing her consultation skills, but you will always be asked your permission both prior to and after your appointment to ensure that you are happy for the recording to take place.

2. DR HELEN VOSE

We are delighted to announce that Dr. Vose is expecting her second child and will be going on maternity leave at the end of May. We have managed to secure the services of a locum to cover her absence, Dr. Anthony Crofts-Barnes, who will be working for us on 4 days a week, commencing in mid-May.

Dr. Vose will return towards the end of the year, working 3 days per week as she does currently.

3. NEW BUILDING

Exact time schedules for our new building are still uncertain but we are hoping that work should commence this autumn. The build time is then planned to be between 14 and 18 months, so we should be able to move in some time early in 2008. The whole bureaucratic planning process does seem to have become very protracted, but the promise of larger and more modern accommodation with better facilities for our patients should make the wait more than worthwhile.

4. PATIENT SURVEY

We have recently undertaken a survey of our patients, in which they were asked questions regarding the practice, the doctors and the staff. The same survey was carried out in 2004, and we are pleased to note that our ratings have improved overall. Continued concern is expressed regarding the comfort and privacy of the waiting room, a matter over which we have little control as the building is owned by the PCT, and an area which should be addressed in the new Primary Care Centre. In the meantime we have tried to improve the situation with the acoustic screen that has been put up in the waiting room.

The results of this survey were discussed with our Patient Group, who emphasised the importance of regular communication with our patients to inform them of any changes or developments within the practice. We shall strive to do this, and we always welcome comments or

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suggestions from you as to how the practice could be improved. Please ask to see our Practice Manager, Mrs. Lindsey Stockton, if you wish to discuss any matters relating to the running of the practice.

5. RACE FOR LIFE

A group of staff members will be participating (at different speeds!) in the Race For Life on Sunday 7th May in Darley Park to raise money for Cancer Research UK. We shall be having collection boxes at the surgery if you would like to support us in this venture.

6. FLU

Many different types of flu are being talked about in the media at the moment, so we feel it would be useful to give you a few facts, to lessen any confusion you may have.

Ordinary/Seasonal Flu

Epidemics of ordinary flu occur every year, most often in winter - an epidemic is a widespread outbreak of disease in a single community, population or region. It affects 10-15% of the UK population, and most people recover from ordinary flu within one or two weeks, without requiring medical treatment. The vaccine against ordinary flu is effective because the virus strain in circulation each winter can be fairly reliably predicted. We currently offer vaccines to patients over 65 years of age and those deemed to be at high risk.

Bird/Avian Flu

Bird flu is a contagious disease of birds caused by influenza viruses closely

related to human influenza viruses. All bird species are thought to be susceptible to infection but domestic poultry flocks are especially vulnerable. It occurs worldwide, and, as you will have seen in the news, cases are being reported in many different countries. People can be infected, but only through close contact with infected birds or their faeces. **THERE REMAINS NO CONCLUSIVE EVIDENCE THAT HUMAN TO HUMAN TRANSMISSION HAS EVER OCCURRED.**

Pandemic Flu

A pandemic spreads around the world, affecting many hundreds of thousands of people across many countries. Pandemics have occurred sporadically throughout history and can take place in any season. Pandemic flu affects many more people than ordinary flu and is associated with much higher rates of illness and death. A vaccine against pandemic flu will not be available at the start of the outbreak, as the virus strain will be completely new and not predictable in the same way as the viruses that circulate during the winter.

There are concerns that the currently circulating avian influenza strain - H5N1 - may mutate and give rise to the next pandemic influenza virus. Once a pandemic virus emerges we will not be able to prevent its spread, but, by being prepared we can significantly reduce its impact.

The UK was one of the first European countries to have a pandemic flu contingency plan in place, which sets out specific measures and actions required from health and other government departments and organisations, at national and local levels, to support an effective response to a flu pandemic. We as a practice will be producing our own emergency plan in conjunction with the

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local health community and advice/information will be available should these events occur.

7. DNA's

We have on average 30 missed appointments per week. This means that 5 hours of doctor/nurse time is lost. Please could you make every effort to inform us if you are unable to keep your appointment, so that it can then be offered to someone else.

**We would welcome your comments
or ideas regarding this Newsletter
or any of our other practice leaflets.**