

LONG LANE SURGERY SPRING NEWSLETTER

Seasonal Flu Campaign

We had a very successful seasonal flu campaign this year. We started the campaign on the 4th October and have vaccinated 1,973 patients, which is nearly 10% of all our patients. We still have a few vaccines left so if you fall within the eligible groups and would like to have a vaccination please ask.

New Staff

We would like to welcome our new female doctor, Jing Mao, who will be starting with us in February. Dr Mao (33) qualified at Leicester University and has been working in Lincoln.

Single Point of Access (SPA)

All community staff are now available via SPA. To book dressings' clinics/district nurse requests or to contact any of the community teams you have to call via SPA. Coalville Health Centre does not accept bookings any more. The number for SPA is: **0300 300 7777**

NHS Health Check for patients aged 40 – 74 with no history of hypertension, diabetes, or heart problems.

‘So we’re trying to encourage patients to come forward and have a NHS Health check,’ said Rob, the practice manager, ‘perhaps one of you ladies might like to have one and then you could write up your experience of it in the newsletter.’ So, ignoring all the best advice on the folly of volunteering, I foolishly put my hand up. The first surprise came on booking in, ‘Ah yes’ said the receptionist, ‘you will need to book in for a blood test first’ and I went a bit pale, ‘I’m sure Rob never mentioned that I muttered’. The blood test however, went the way of all blood tests, ‘just a small pin prick’ said the nurse, but as usual she was being over optimistic, though once the needle was in, I must say the blood was extracted fairly rapidly and soon two phials of it were sitting in the nurse’s tray being labelled up. Then it was out to reception to make an appointment with another nurse for the rest of the health check. Two weeks later I was being weighed and measured by a different nurse, and then we sat down for a cosy chat about the blood test results and what health issues my nearest blood relatives suffer or suffered from. ‘I’m afraid you could do with losing a bit of weight’ the nurse said; she was being very kind really, the bit I need to lose is really quite a lot, at least a stone. ‘How much alcohol do you drink?’ she asked; not nearly enough to worry about apparently, so that was OK. The blood test was also all quite normal except very slightly raised cholesterol, but as I am lucky enough to have no family history of high blood pressure or heart disease, we agreed I should just cut out or at least cut down on the chocolate and cakes, of which I am overly fond, and take some more exercise. As I don’t smoke I expect I was spared the lecture on cutting down or giving up, but we all know how bad it is for us, so no excuses, I am sure your surgery would be only too pleased to help you give up, and think of the money you would save! So would I encourage you to have a health check, well unless you have a serious needle phobia, yes, it really isn’t scary at all. Look on it as a free service for your body, and who would refuse one for their car? Like me, you will probably find you have nothing or very little to worry about, but it might throw up something that could save you a lot of inconvenience or even your life.

Interview with the new receptionist

Brenda is the newest receptionist at the surgery, in a team of eight; she was taken on to help cover the lunchtime opening of the telephone lines and this is her first job in a doctors’ surgery. Members of the PPG, Mary and Pam wanted to interview a receptionist to get an insight into what it is like to be on the other side of the counter or phone.

PPG: What time do you start work in the mornings?

- Brenda:** Just before 8.30am, we need to have the computers fired up ready for the morning rush; this lasts about one hour and is handled by about three receptionists.
- PPG:** Communication between patient and surgery is obviously very important; did you receive any training before you started taking calls?
- Brenda:** Yes, before receptionists are allowed to take calls they receive full training with the help of dummy patients created on the computer for this purpose; they are then mentored by another member of staff until it is felt they are fully confident to cope with all aspects of the job.
- PPG:** What happens if you are unable answer a patient's enquiry?
- Brenda:** It would be impossible to know every aspect of how the practice runs, so we would pass you on to someone in the practice that could help you.
- PPG:** So is it important for the patient to tell the receptionist why they need an appointment or the reason for the call?
- Brenda:** Yes, we understand that this can sometimes be difficult, but it enables us to make sure that you see or talk to the best person to help with your health care.
- PPG:** What about patient confidentiality?
- Brenda:** Patient confidentiality is taken very seriously and the entire team at the surgery have signed a confidentiality document and are bound by law to uphold it.
- PPG:** What about if you want to see a specific doctor or other health care professional?
- Brenda:** We always do our best to make you an appointment with the health care professional of your choice but this can be difficult, as all our doctors and nurses are in effect part-time. In today's modern surgery, doctors have many other responsibilities besides seeing patients, but we also provide telephone consultations and one doctor will be duty doctor.
- PPG:** How many GP appointments do you have available for a morning surgery?
- Brenda:** There are 51 appointments, some are pre-bookable, and some are book on the day. We also have 38 telephone consultations. In the afternoon there are 39 appointments and 28 telephone consultations.
- PPG:** What would happen if someone, who was really unwell, phoned up after all these appointments were gone?
- Brenda:** If the patient really felt they could not wait until the next morning, I would ask the duty doctor to phone the patient back so that they could assess the situation and take the appropriate action.
- PPG:** Besides receptionist duties, do the receptionists have any other jobs to do?
- Brenda:** Yes, we have to sort the post and file hospital notes, test results etc into patients' files. Sometimes we are asked to chaperone a patient in a doctor's surgery, but the biggest job we have to do is printing off repeat prescriptions. These have to be checked and signed by the doctors before being sorted, either to be sent to chemists for making up, or left at reception for collection. We keep a check list of all the prescriptions that have been ordered, so we should know at any one time where it is in the system.
- PPG:** Have there been any surprises in your new job?
- Brenda:** I was quite shocked at how aggressive some people can be over the phones. Appointments are not unlimited and if all of them have gone we do have to ask a patient to call back the next day. We do our best to help patients but can only work within the constraints of the system.
- PPG:** Do you think that having the telephone line open throughout the day now has helped?
- Brenda:** Yes, it's always busy when the phones go on at 8.30am but the 2pm rush is now quietening down as patients are now getting used to being able to phone throughout the lunch hour.
- PPG:** What about communicating with other members of staff, do you have any meetings?
- Brenda:** Yes, we have monthly meetings with the practice manager and all the other staff. It's a time we use to talk about all aspects of the work and to keep up to date with anything new.

We would like to say a big thank you to Brenda for giving the PPG this interview and also a thank you to the other receptionists who covered for her.