

Welcome to the September issue of the Pinn Piper. I wish to offer our huge thanks to Hilary Scott, who retired in July, for all the support she has given the Patients' Association over the years. I know many patients would want to join me in wishing her a very happy retirement.

I want to also offer a warm welcome to Rupa Yagnik, who is replacing Hilary as the Practice Manager.

In this issue I feature an uncensored piece by one of our doctors at the Pinn. For some time now the Board of Trustees have had feedback from the Practice staff regarding the negative and unacceptable behaviour of some patients towards staff.

Whilst I fully understand the frustration patients feel in having to wait, either for an appointment or to see a doctor, I think it is also important to highlight some of the challenges staff face on a daily basis. By understanding these challenges I hope we can be a bit more sympathetic, and appreciative, of their contributions.

The crisis in the NHS is likely to grow and the issues in General Practice are relatively common almost everywhere. Please visit our website at www.pinnpatients.org for the 2017 results of the GP Patient Survey (Ipsos MORI). When compared to other Practices locally and nationally we are very fortunate at the Pinn to have a good or even better service in some cases.

That is not to say we should be complacent. Our Secretary, George Bardwell, is making another plea for patients to register with us as Members. With the current trend of all our health services being planned locally, it is more important than ever that there should be an active, thriving Patients' Association to represent the needs of patients, and take part in the various consultation exercises.

I look forward to seeing many of you at our Quiz night in November.

Joanne Daswani
(Chair PMCPA)



My name is Rupa Yagnik and I have recently been appointed to the Practice Manager position at The Pinn Medical Centre.

My work includes strategic management of the surgery and ensuring all operational plans are fully implemented to deliver safe and high quality patient care. In addition to this I am also the PM lead for the Education Forum for Harrow CCG.

I am very much looking forward to build on the great foundations that Hilary and the Partners have laid so that the Pinn can continue to provide you with outstanding patient care.

COMMUNITY QUIZ NIGHT

Saturday 25th November

MAKE UP A TABLE OF 8 OR JOIN A TABLE AND
MAKE NEW FRIENDS!

Light supper included (inc. vegetarian option)
Bring your own bottle and refreshments (cups provided)

★ **PRIZE FOR THE WINNING TABLE** ★
★ **TICKETS £10 PER PERSON** ★

tickets must be purchased in advance from
Nicky or Phillip, not available on the door

nicky@pinnpatients.org 020 8966 9339
phillip@pinnpatients.org 020 8966 7925

DOORS OPEN 7PM, QUIZ STARTS 7.30PM
ST LUKE'S PARISH HALL, LOVE LANE, PUNNER



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PMCPA vision and values

Our vision We are a patient community working in partnership with the Pinn Medical Centre to achieve the best possible care for the patients we serve.

Our values We represent Pinn Medical Centre patients. We have a culture of consultation and collaboration. We recognise diversity of need. We take account of and influence wider local and national health care provision.

A Day in the Life of a GP at The Pinn

I arrive into work for 7.50am so that I can get some admin done before my day really begins. When I turn on my computer I have 30 blood results that have arrived overnight. I look at each one, checking to see whether each part is normal or not and if not, what action needs to be taken (Do the patient need to come in and if so, do I need to see them today, next week, or at any time?). I then issue 10-20 prescriptions in my inbox, which was empty when I left at 7pm last night. Every time I issue a prescription I check what has been requested, whether a review is due and whether any blood tests are due. Before I know it, it is 8.30am and my first patient has arrived.

My surgery list this morning has 18 patients, each with a 10-minute appointment. A 20 minute coffee break is factored somewhere in the middle. Most of the patients I see have more than one problem they would like to discuss and many have more than one chronic disease to take into consideration. Several will be on more than one medication. We never know what to expect when a patient walks through the door and that is what makes General Practice interesting and exciting. However this also means we have to be very careful with every patient we see to ensure we don't miss an important diagnosis.

Today my first 3 patients are well known to me but each has several medical problems so it takes me longer than the allocated 10 minutes. By the time I call my 9am patient I am already running 20 minutes late. Of course it is not ideal for patients and I fully appreciate the frustration they must feel sitting in the waiting room waiting for their name to be flashed up on the TV screen. This is unfortunate, and I am very mindful of the time you are kept waiting but some patients do need more of my time and 10 minutes are not sufficient.

Some other surgeries have decided to increase appointment times to 15 minutes. This may allow a more reasonable time with each of our complex patients but that would mean fewer appointments to offer per day. We already have a 2-week wait to see a Doctor making it a very difficult balance to achieve.

My 4th patient is a young lady who has come for her contraceptive pill. This is an easier, shorter consultation, which allows me to catch up a little. Other patients I see include a new diabetic who is understandably shocked by their diagnosis and needs information so that she can manage her diet and lifestyle. I also see an 18 year old who has a long history of depression; she has come just for her medication but I have to fully assess her mental health and check that she is not self-harming and is not a suicide risk.

My 20-minute coffee break more often than not becomes a chance to catch up on my late running, get a quick drink from the kitchen upstairs and visit the bathroom. My day then continues with more complex patients, two blood pressure reviews requiring dose adjustment of their medications and a patient I hardly know who comes in with symptoms suggestive of cancer.

By the end of my 3 hour surgery I have received 10 messages from other staff; patients who want to speak to me, a hospital nurse who would like a call back and some queries about prescriptions and blood test forms. I work through some of these messages but I also have a home visit request for one of my patients so I leave some for later and jump in my car. My home visit takes 45 minutes (and I am relieved as I only have one not two today).

When I get back to the surgery I write my notes on the computer, make a referral to the District nurses and speak to the patient's daughter. I had managed to grab a quick sandwich on the way back from my visit. I have this while I spend the next two hours calling patients regarding queries (but I still don't manage to get through the whole list), writing referrals for some of the patients I saw this



morning, sign off more prescriptions and finally get to look at my 'documents'. About 40 letters come each day from the hospitals about my patients and each needs to be read to check for any medication changes or other actions.

Before I know it, it is 3.30pm and the first patient on my afternoon list arrives. Similar to my morning list I see a whole variety of illnesses and worries; from patients who need reassurance that nothing is wrong, to patients who think nothing is wrong but then start to describe symptoms which really make me worry. Amongst them is a middle aged gentleman who has finally plucked up the courage to come and see me after struggling with depression for many months. We have a long chat and make a plan for him to receive the right care. I make an appointment for him to come back and see me next week. I have been with him for 25 minutes and I must move on and see the next patient. I was due to finish at 6.10 but I am running 40 minutes late and my last patient leaves my room just before 7pm.

I go back to my task list, which has increased in length during the afternoon. I check that nothing is urgent and prioritise accordingly. I authorise a few more prescriptions but after a working day of 11+ hours a few things are going to have to be left for the morning, when the routine starts all over again. I have to be diligent with everything I do so that I don't miss symptoms nor make drug errors, whether it is 8am or 8pm.

This is a typical day for many of the GPs at the Pinn Medical Centre. Why are we sharing this with you? We would like our patients to understand why we run late, why we might limit you to 1 or 2 problems per consultation and why we cannot necessarily call you back the same day however hard we try. General Practice is under pressure, workload is increasing as people live longer and treatments become more complex. There is a recruitment crisis as younger doctors are choosing to either leave the profession or migrate to another country where the demands are not as great. This means that it's not possible to simply get more doctors (or nurses).

We all want to provide you with the best medical care but to do this we need you to make best use of the services; please come to the surgery when you can, rather than requesting home visits which should only be for housebound patients; please give us at least 48hrs notice when your medication is running out and not ask for it as an 'emergency'; please come to see us when you have an appointment, or cancel it, as someone else could use it if it is no longer needed; please plan ahead if you are going on holiday and know that you will need to see a nurse for travel advice or will need enough of your medications in advance; please speak to the pharmacist if you have a minor illness or a prescription query as they may well be able to help you; please download the new **HealthHelpNow App** onto your smartphone which can give you advice and signpost you to the best service; please prioritise your problems in your 10 minute appointment so that they can be reasonably addressed within the 10 minutes; please be realistic with time frames if you have a non urgent query or a form to complete, as we do have to prioritise our work; please let us know if you have changed your mobile number in case we're trying to get hold of you about an urgent result and finally, please be polite to our staff who are all doing the best they can.

This way we can work in partnership with our patients to provide high quality care. Thank you from all the Doctors at the Pinn Medical Centre.

The Pinn Medical Centre

Your Association Needs You!

Pinn Medical Centre Patients' Association Launches Recruitment Drive

The Board of the Pinn Medical Centre Patients' Association (PMCPA) has launched a recruitment drive in a bid to increase significantly the number of patients who have signed up as Members of the Association. There are currently nearly 250 members, but with a patients list at the Pinn Medical Centre of many thousands there is obviously scope for many more to join. Membership is completely free and is open to all patients of the Pinn aged 16 or over.

The Chair of the Association, Joanne Daswani, said "With the current trend of all our health services being planned locally, it is more important than ever that there should be an active, thriving Patients' Association to represent the needs of patients, and take part in the various consultation exercises."

The Association is the official Patient Participation Group for the Pinn Medical Centre and works in partnership with the Pinn to achieve the best possible care for patients. An important part of our work is to provide a transport service to patients who may have difficulty in getting to the surgery, or local hospitals; as well as a shopping and home visiting service. We keep members up to date with what's going on at the Pinn through our website, www.pinnpatients.org, and through this newsletter, the Pinn Piper. We also have an Annual General Meeting at which patients can raise points with the Partners of the Pinn Medical Centre, and members of the Board of the Association.

Joining couldn't be easier. Just go to our website and fill in the online form; or simply send you contact details to contact@pinnpatients.org; or fill in a form at the Pinn Medical Centre and hand it in at Reception. Don't worry if you don't know if you are already a member, just get in touch anyway and we'll make sure you are signed up!

George Bardwell (Secretary)



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- Fragrances, Cosmetics and Skincare

Our friendly team look forward to seeing you soon!

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Laughter is the best medicine



A cartoon showing a doctor sitting at a desk with a computer. A patient is sitting on a stool, looking distressed. The doctor says, "WOW! YOUR CHOLESTEROL HAS ME REALLY WORRIED!". The patient responds, "GACK!". The doctor then says, "UH... YOU MIGHT WANT TO ACTUALLY LOOK AT THE PATIENT...".

I hope you found this issue informative. I welcome your feedback so please email me at jo@pinnpatients.org with your comments and suggestions.

Joanne Daswani
(Chair)



A logo featuring a stylized blue figure with arms raised in a 'V' shape, with a white heart in the center, all within a white circle.