

# Newsletter 3

- focussing on vaccination & immunisation  
for health care

L3PG

THE LAWSON PRACTICE  
PATIENT PARTICIPATION GROUP

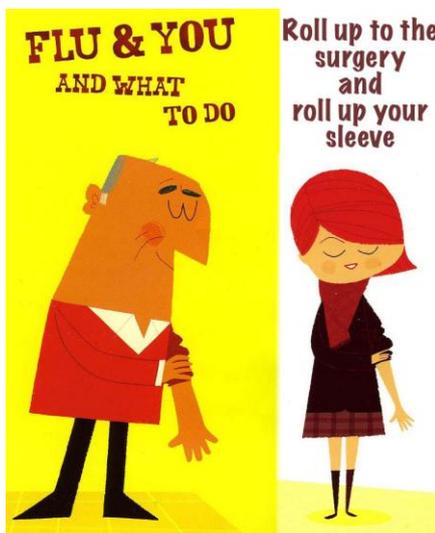
## A Patients Participation Group

This is the third Newsletter produced by the Lawson Practice Patients Participation Group which was formed in 2008. The group meets monthly to exchange and discuss views about the services provided in the Lawson Practice. The Practice Manager (Yvonne Pope) and Dr Jonathon Tomlinson meet with a diverse group of patients from the Lawson Practice who represent a mix of gender, ethnic groups and age groups – and between them have experienced most of the services offered by the practice.

The purpose of such groups is to discuss general developments in the Practice, to be aware of the wider context in which the Practice has to operate and to act as a sounding board and a channel for communication with the patients. It should be stressed that this is not a place to discuss individual patients' concerns or issues. Patient Participation Groups are being formed in a growing number of practices and there is a National Association for Patient Participation (NAPP) which we have joined. It has a website ([www.napp.org.uk](http://www.napp.org.uk)) which gives a good introduction to the aims and objectives of Patient Participation Groups (and you can find copies of our Newsletters on-line there as pdf files). In addition it is good to hear that the government, through the Department of Health, is providing funding to support the development of Patient Participation Groups. They have recognised that this collaboration between patients and Practice staff improves both the quality of service provided in a Practice and patients' understanding of primary care services. This activity is being endorsed and supported by the BMA (British Medical Association), the NHS Alliance (the association for NHS management) and the RCGP (the Royal College of General Practitioners). See the NAPP website ([www.napp.org.uk](http://www.napp.org.uk)) for more details.

Winter is approaching, swine flu is still with us and many young children are just starting school - it seemed a good time to focus on flu jabs and immunisation. So, our third Newsletter, covers these topics of health care. We can only cover these important matters briefly here. If you are concerned and want more information then do phone the Lawson Practice (020 7739 9701) for advice.

*Billy - photo courtesy of Dr Tomlinson*



(picture taken from the Sanofi Pasteur leaflet)

## The annual (seasonal) 'flu jab

Every year at about this time the doctors write to people who they feel would benefit from immunisation against influenza ('flu'). It is recommended that people who have a chronic (that is 'a long-term or prolonged') disease such as heart disease, diabetes, chronic respiratory problems and those over 65 years of age. You should by now have received a letter if you fall into any of these groups, but many letters have been delayed in the post. There is a walk in clinic (just roll up to the surgery and roll up your sleeve) between **10:00am and 12:00 noon on Saturday mornings during October**. In November the Saturday morning sessions will return to normal appointments. **Every week in November, morning and afternoon appointments with the nurses** will be devoted to 'flu jabs. We are told that the amount of vaccine available this year is limited, so we do advise you to come and be vaccinated. Again, if you are not sure if you fall into these groups, or you believe there are reasons why you should be having the jab, please phone the Lawson Practice.



## Swine Flu – what is happening?

The number of new swine flu cases in England has again risen, with an estimated 27,000 in the week to October 15, up from 18,000 the week before.

For the vast majority of people it is like any other flu – sudden high fever (over 34°C or 100.4°F) and a sudden cough. You may also have aching muscles, chills, a headache and a runny nose. In most cases you should stay at home, take paracetamol-based cold remedies to reduce fever and other symptoms, drink plenty

of fluids and get lots of rest and the flu passes in about three to five days. BUT, some people with asthma, heart, lung and other chronic diseases are at higher risk from Swine Flu. For more information visit <http://www.nhs.uk/Conditions/Pandemic-flu/Pages/Symptoms.aspx>, phone **NHS Direct** at any time on **0845 4647** or the **Swine Flu Info Line** on **0800 1 513 513** and if you are concerned **telephone from home (don't come in)** to the Lawson Practice to speak to a doctor.

## ..and what about the Swine Flu vaccine?

The vaccine should be available in England around the end of October and then has to be distributed. The NHS will initially vaccinate those who are at greatest risk. In priority order these are:

People aged between six months and 65 years (those over 65 seem to have developed some degree of immunity from living through previous 'flu epidemics); pregnant women; people who live with those whose immune systems are compromised, such as cancer patients or people with HIV/AIDS; people aged 65 and over in the seasonal flu vaccine at-risk groups (as above).

The Lawson Practice will inform people if they need the Swine flu vaccination and will invite them to the Surgery when the vaccine has been made available to the Practice. This is not likely to happen until November because the logistics of the national distribution of vaccine will take some time to perform.

## Did you know?

1. The surgery hours and the number of surgeries

TEAM 1	TEAM 2	TEAM 3	TEAM 4
JONATHAN GORE KATIE SIMPSON ROBERT PALMER JUSHNA BEGUM	DEBORAH COLVIN MEKONEN SEMERE KATIE BRAMALL SHARON WILSON	JON FULLER KIRSTEN BROWN ANDREW SIMCOCK RACHEL HARDWICK JANE FULLBROOK	JANE WILKINSON JONATHON TOMLINSON SHABANA RAUF MOMTAZ BEGUM
FELICITY TUCKER		JAYNES MWANIKI	
BOZHANA VASILEVA		MELANIE HAYES	
CHRISTINE SWASH		CHRISTINE COX	
VICKY YORKE		DONNA CAMILIS	
PAM SINCLAIR, YVONNE POPE, JO'ANNE YOUNG, BONNIE SMITH, NICOLA POPE, MARIA GORDON			

per week have been increased to make it easier to get an appointment and to see the doctor of your choice. There are now three surgeries a day, except for Monday and Thursday. On these days there will be no middle of the day surgery (the staff will be holding educational, training and meeting sessions then). Surgeries are:

**8 am - 11 am    12 noon - 3 pm    4 pm - 7 pm**

2. This means there will be 45 appointment slots per day rather than 34 and the staff have to work longer shifts. This is typical of their approach to providing an excellent healthcare service and we

should thank them for their commitment.

3. To look after patients better and to improve continuity, the practice now operates in teams as **shown to the left**. This means that you will be looked after by any of the doctors or nurses in the team of your choice. They will get to know you and your medical conditions really well. They will meet weekly to ensure they are all up to date with our situations. Administrative staff are also allocated to support the teams. Certain staff, listed at the bottom of the box, have specific roles (eg Practice Manager, Nurse Practitioner) and will continue to work for all patients.

4. These changes mean that we all need to think about this carefully and let the Reception staff know which is the team of our choice.

5. Some patients are concerned whether this new arrangement prevents them from seeing other doctors than those in their chosen team. For example, there may be occasions where a patient wants to see a specific woman doctor; or where a patient and doctor have invested some time in understanding an illness that is on-going or

recurring. The new arrangements do not affect these relationships, and patients should continue to ask to see that specific doctor when contacting the Practice.

### **The staff**

We thought it would be a good idea to do a short introduction to the staff and in each Newsletter we will feature some of them.

*Dr Jonathan Gore*



I have worked at the Lawson Practice since I came to London 16 years ago having been a GP for many years in the North of England. The staff, reception admin, nurses and doctors has grown and changed but have all always worked hard to provide high quality care and

I feel fortunate to have been a part of this. The fact that this is really a team effort makes this a great place to work. I enjoy the fact that we are constantly thinking about how to improve the service we offer. Most importantly I find our patients varied and interesting and getting to know you, some very well, is what makes being a General Practitioner worthwhile for me. I spend some of my time both outside and within the practice training doctors who are going to become GPs. Also I do minor operations and find this practical aspect of being a doctor rewarding. I have an 11 year old daughter who like me loves the outdoor life including camping in our old wooden Traveller's caravan, I also have a 14 year old son who shares my love of sport and I spend a lot of time watching him playing Rugby. So I have little time left for anything else.

*Pam Sinclair, Nurse Practitioner*

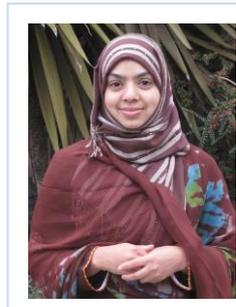


I am a Nurse Practitioner and have been working at The Lawson Practice for about 15 years. I started off as a Practice Nurse, continuing some of these duties now, but trained to see patients who have minor illnesses, taking history, examining them and deciding on their

treatment. I am also a Nurse Prescriber, so I can issue and sign prescriptions for patients who I see. As most of you may know, I do see patients for most things that you would see the doctor for. I enjoy working at The Lawson Practice (been here 15 years!!) and have seen a lot of changes during the time I have worked here. I enjoy visiting patients who are house

bound.

*Momtaz Begum, Receptionist*



I work in Team 4 as a Medical Receptionist. I have been at the Lawson Practice for 8 years. As well as being on Reception, I work closely with the pharmacy preparing batch prescriptions - for house bound patients and those on continuous medication. I also do some

of the scanning of medical letters from the hospitals and other places, so that they can be added to the patients' records. The Lawson Practice is a good place to work, with a good atmosphere and friendly people.

### **The doctors column**

We thought it would be a good idea to cover some items about the practice in each newsletter.

The major items of news are the changes to surgery sessions and the formation of the Lawson Practice Teams that have been covered above. As the new system bedded down it became clear that answering phone calls in the mornings has been very stressful for staff and unacceptably difficult for patients to get through. The Practice has now increased the number of staff answering calls.

Finally, all documents have been signed for building the Practice extension and this work has started in the garden next to the present building. It should only take 9 months to complete.

## **i mmunisation**

**the safest way to protect your child**



It is important to ensure that your child has the necessary vaccinations during their early life. This immunisation, combined with breast-feeding, good diet and healthy exercise is the way of protecting your child against serious disease. Once children have been

immunised their bodies can fight those diseases if they come into contact with them.

If a child is not immunised they will be at risk from catching the disease and will rely on other people immunising their children to avoid becoming infected.

However, if more people choose not to immunise their children, then the number of children at risk of

catching a disease will increase and outbreaks of the disease will occur. The only time to stop immunising children is when a disease has been eradicated worldwide. When every country had eliminated smallpox in 1979 for example, immunisation against the disease was stopped. It is hoped that polio will soon be eradicated and measles may follow.

### What vaccinations do children need?

The table below contains information taken from the NHS immunisation information web site at <http://www.immunisation.nhs.uk/> and from the 'red book' properly known as the **Personal Child Health Record** given to each mother by the Health Visitor, where you will find much more detail about all the vaccinations. There are a good number of documents (also in Turkish, Bengali, Polish) that can be printed or downloaded. This includes much information about the MMR immunisation pointing out how important it is for your child to have this, to ensure that measles, mumps and rubella do not become more common again.

### In summary

Immunisation is very important for all of us and

children need to receive their vaccinations at the right times in their lives. If you have any queries you should contact the Surgery and speak to a doctor or the Practice Nurse.



We have just heard that our application for funding has been successful! We have asked the Royal College of GPs for support to develop a Patient Information Centre in the new extension to the Lawson Practice. Our first task will be to ask patients what they would like to see available (we will do that survey in English, Turkish, Kurdish, Bengali and Vietnamese). That centre will have a wide range of information resources (leaflets, DVDs etc.), access to the Internet; outreach events about health matters and presentations from 'expert patients' who are prepared to talk about their own experiences. This patient focussed facility will be developed during 2010. We are also planning more activities to support the Lawson Practice and its patients. We are looking at opportunities to get funding for home visits and exercise/walking groups.

## A calendar of immunisations for your child

Age due	Immunisation
8 weeks	<b>DTaP/IPV/Hib and PCV</b> (what a terrible acronym!) is a primary immunisation. It protects against diphtheria (D), tetanus (T), pertussis (whooping cough)(P), polio (IPV - inactive polio vaccine) and Hib which is an infection that can cause meningitis, the inflammation or swelling of the lining of the brain. <b>Pneumococcal conjugate vaccine</b> (PCV) is to protect against pneumococcal disease (that means pneumonia, septicaemia - a type of blood poisoning - and meningitis)
12 weeks	<b>DTaP/IPV/Hib</b> (as above) <b>and Men C</b> - a primary immunisation given to protect against bacteria called Meningococcal C that cause septicaemia and meningitis.
16 weeks	<b>DTaP/IPV/Hib and Men C and PCV</b> - all as above.
12 months	<b>A booster of Hib and MenC</b> just after their first birthday.
13 months	<b>MMR (1st)</b> to combat mumps, measles and rubella (German measles) and <b>PCV</b> .
3-5 years	<b>DTaP/IPV</b> - a pre-school booster.
3-5 years	<b>MMR (2nd)</b> at 3years 4months or soon after.
12-13 years	<b>HPV</b> (human papilloma virus) immunisation is now given to girls to combat the risk of cervical cancer. Since it does not protect against all forms of cervical cancer it is also important to have cervical screening later in life.
13-18 years	<b>dT/IPV</b> is given as a booster vaccine to young people between to top up resistance to tetanus, diphtheria and polio.

### Getting in touch with the Lawson Practice Patients Participation Group (L3PG)

We would very much like to hear from patients. The Patient Participation Group may be contacted by leaving a written note with the practice receptionists.

*The following people are members of the L3PG:*

Dr Jonathon Tomlinson, Yvonne Pope, Ellen Aguilar, Sharon Boyea, Doreen Bullock, Alf Camp, Emine Demirbas, Veronica Duberry, Doreen Gilmour, Stewart Harvey-Wilson, Kim Cole, Christine Russell, (George) Roger Till (who prepared this Newsletter) and Josie Wilson.

### Good sources of healthcare information

If you want to read up about healthcare generally go to. **NHS Direct** <http://www.nhsdirect.nhs.uk/>

### If you don't have Internet access:

Don't worry because you can phone **NHS Direct** on **0845 4647** twenty-four /seven.