

## **Burwell surgery update 18<sup>th</sup> April 2022**

A slightly longer one this time I am afraid....

### **Local Covid situation**

It has become unreliable to monitor cases recorded in our patients but I think we all know there is a lot around.

As of Thursday 21<sup>st</sup> April Addenbrookes were treating 88 patients who are confirmed positive with Covid-19, 8 of which were in critical care. I suspect that many have tested positive – but are actually admitted with something else and have tested positive for Covid incidentally (I have heard that this is the case in around 70%) of hospital cases. Perhaps the reputation of the currently circulating BA 2 variant of omicron is that it causes less severe symptoms (but is more transmissible). Anecdotally it seems that many people are still feeling very unwell with it.

Presenting symptoms have changed significantly with the current variants with the top 5 symptoms now being a runny nose, fatigue, sore throat, headache and sneezing according to a recent study.

Please note that we are still following full protective processes in the surgery. We are asking all patients to continue wearing masks and all surgery staff are using masks, relevant PPE and are still testing twice a week.

It feels a little illogical to do this in some ways with the national strategy encouraging us to live life as normally as possible. However exposure risks in health settings are higher, and we are also keen to minimise infections in our staff - having experienced the difficulties this can cause.

### **Spring Booster vaccination programme**

Our group of practices (the Ely primary care network) are supporting the delivery of the national spring booster campaign see <https://www.gov.uk/government/publications/covid-19-vaccination-spring-booster-resources/a-guide-to-the-spring-booster-for-those-aged-75-years-and-older-residents-in-care-homes> .

Immunity following vaccination starts to drop after about 6 months. These boosters are being offered to >75 year olds, the housebound, care homes and people with seriously weakened immune systems. Our local programme is being delivered again primarily in Ely and Soham. You can book a vaccination via the national booking service on 119 or <https://www.nhs.uk/conditions/coronavirus-covid-19/coronavirus-vaccination/book-coronavirus-vaccination/> . If you are eligible you should also receive a text or call from our reception staff allowing you to book a slot in our local system.

We have been vaccinating at risk 5-11 year olds at the surgery and will be offering support for all aspects of the programme as needed. Of note the boosters are largely going to be Moderna vaccine with some Pfizer.

### **Long Covid**

I have advertised the availability of the local specialist NHS Long Covid service on these updates previously. I was disappointed to find out recently that we have only made 5 referrals to this service since the beginning of the pandemic.

The service offers detailed assessment and support for all of the varied physical and mental health symptoms associated with Covid. I suppose that it is true to say, that as a new disease, we don't know how effective these approaches are. However I do worry that people are not making best use of this service.

All of our clinicians would be happy to help you access this support if you feel that you might benefit from it.

### **Other Covid related issues**

Please note that we are very reluctant to provide proof of vaccination or Covid infection for travel purposes. All of this information should be available on the NHS app or via the 119 service if necessary. Please see <https://www.nhs.uk/conditions/coronavirus-covid-19/covid-pass/get-your-covid-pass-letter/>

### **Local NHS services**

Everything is up and running but I am afraid that the waiting lists are long for pretty much every 'non urgent' issue. Waiting lists are prioritised on the basis of clinical need. The main thing is to let us know if your circumstances change (for example if your symptoms get worse). We can then write an 'expedite' letter to ensure that these changes are reflected in the hospitals management of the waiting list. These letters can really make a difference.

### **AskmyGP**

We have just had a lot of statistics back from the company that run AskmyGP. We have had considerable discussions about these internally and also with our Patient Participation Group (please see below for more information about this group).

Demand has grown significantly in the last year. Whilst this is not surprising in some ways (considering where we were in the pandemic 12 months ago), we have moved from about average in the company's list of calls per number of patients on our list, to well into the top quarter of practices. It has certainly been a pretty tough year in terms of the number of calls from a clinician's perspective. The PPG were really pleased to see that although requests had increased over the last year response times had been maintained. It was acknowledged by the PPG that this was a considerable achievement.

We have also noted a significant drop in the percentage of patients who choose to initiate the first contact with us online compared with on the telephone (reducing from about 70% to 60%). These include younger demographics that we think should not be constrained by the Information Technology! Internet contacts for us are much more efficient, going straight to clinicians, bypassing reception – letting them do other things and reducing the risks of information transfer.

We have received (in the vast majority of cases) great feedback from the AskmyGP system. Our average 'call to complete time' is only 2 hours (I know it can be longer sometimes....) however it does put our clinicians under a lot of pressure sometimes. We cannot really alter the volume of calls coming in on any particular day – so days when we are shorter staffed it can sometimes leave us under some considerable pressure to deliver the service.

We have been thinking hard how best to support our clinicians to deliver the best and most efficient service we can. Currently our AskmyGP service is open from 8.30am on Monday to 5pm on Friday and closed over the weekend.

What we would like to propose is that from the 1<sup>st</sup> of May we will keep AskmyGP open only from 6.00am to 4pm Monday to Friday.

There are 2 reasons for this:

- 1) We are hoping that it will encourage patients to contact us earlier in the day when possible allowing us to plan our work better through the day. This can be particularly important if we need to arrange tests or hospital treatment on the same day.
- 2) The current system allows requests to 'sit on the system', untriaged overnight. We feel that this institutes an element of risk and certainly is a cause of significant stress for clinical colleagues going home worrying about these calls.

Our phone-lines will still be open 8.30am to 6pm from Monday to Friday and in particular if there is something that seems urgent to you towards the end of the day in the 4-6pm period of time when AskmyGP is closed, then please feel free to call reception (who can still add the details of the call onto AskmyGP for you).

A number of other local surgeries have implemented similar measures. We will be monitoring the impact of this change closely and hope that you will understand that we feel that we need to make these changes to support our clinicians.

The 111 service is open 24/7 and is there to support urgent issues outside of our working hours.

### **Dental issues**

We continue to get a number of calls relating to dental issues.

I know that it can be difficult (and expensive) to access dental care. However as GP's, we don't have suitable experience to appropriately manage patients with dental problems. The BMA has clear advice about this see <https://www.bma.org.uk/advice-and-support/gp-practices/gp-service-provision/patients-presenting-with-dental-problems> . We are extremely reluctant to 'just prescribe antibiotics' .... As we worry that sooner or later a more sinister and serious dental problem could get missed.

The best way of accessing dental help is via your Registered Dentist. If this is not possible then ring 0300 555 6667 option 1 to access the dental access service Monday to Friday 9-5pm. Outside of this time please ring 111 who can access emergency dental slots for you.

I have heard from patients that this service often does not run smoothly. If you are really struggling having tried the above, we will see what we can do to help.

### **Burwell Surgery Patient Participation Group**

Last week we had a really positive meeting of our Burwell Surgery Patient Participation Group (PPG).

I see the group as an essential sounding board to discuss issues that directly affect the experience that patients have using our services (for example our website, waiting room and how we deliver our services). The PPG could also be a great way of raising issues to us that you think might be of wider relevance. Some of the issues we discussed last week included:

- 1) Suggesting a review of website by healthwatch (an independent patient organisation see <https://www.healthwatchcambridgeshire.co.uk/> ) – and improving updates to the website.
- 2) Improving our Facebook page (which to be fair does need some work!)
- 3) Improvements to the waiting area
- 4) The PPG have been instrumental in getting the surgery to support the development of a mother and baby clinic in the village
- 5) Discussed how we at the surgery are going to support the increase in list size from the proposed building developments in the village and surrounding areas
- 6) Issues with local chemists.
- 7) Development of a constitution for the PPG.

The PPG was well attended but it was recognised that more work needed to be done to make sure the PPG was able to fully represent the diverse group of patients that we serve.

If you would feel able to help support this really important work then please either email [admin.burwellsurgery@nhs.net](mailto:admin.burwellsurgery@nhs.net) or ring reception and ask for Amy.

The group proposes to meet quarterly on a Tuesday evening in the surgery reception, but would be happy to hear from any patients who wish to be involved in any way – even just as an email contact to complete the occasional survey or give a view on an issue.

Best wishes to you all.

Alex Manning