

West Bar & Hardwick Surgery Patient Participation Group Newsletter



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Swine Flu

Swine flu may become a pandemic in the UK over the coming months, so now is the time to choose your 'flu friend'. The national swine flu information leaflet that was delivered to households across the county in May makes reference to people setting up a network of 'flu friends'. A 'flu friend' can be relatives, neighbours or friends who will collect medicines, food and other supplies for you if you get swine flu, so that you do not have to leave home. Preventing people who may be suffering from swine flu from having to go outdoors will help restrict the potential spread of flu to others. It is a good idea for each person to identify up to five 'flu friends' as if your flu friend is also ill or unavailable then they cannot help you, but having at least one is very important.

A ['flu friend' form](#) is now available to help the public record their personal flu friend(s) information and to keep in a safe place in case they are ill. In addition you could consider becoming a 'flu friend' to a neighbour who may live alone, family members that might need help, or offer yourself as a 'flu friend' through networks that may be set up by local organisations, such as churches or parish councils. Anna Hinton, Principal in Health Protection, from NHS Oxfordshire said: "Now is the time to identify a network of flu friends. There is no way of telling who will catch the flu, so it is important to be aware and to plan ahead. If you are ill with swine flu it is important that you do not go out because you might spread the illness to others. Ask a flu friend to go out for you."

What to do now:

- ✓ Identify your 'flu friend(s)' and check that they are happy to help you.
- ✓ Complete the [flu friend form](#) **now** and keep it in a safe place e.g. on the fridge or by the phone.
- ✓ Make sure you know where your ID (see list of options on the 'flu friend' form) is located in case your flu friend needs to collect medicines for you.
- ✓ Think about neighbours who may live alone or family members that might need help and offer to be their 'flu friend'

Further Information:

A [Flu Friends Q&A](#) is available to help answer questions you may have.

For the latest information on swine flu visit the NHS Choices or NHS Direct websites at www.nhs.uk or www.nhsdirect.nhs.uk or call the National Swine flu information line on 08001513513. NHS Direct can be contacted on 0845 4647.

If we all follow the simple rule of **CATCH IT, BIN IT, KILL IT**, we can help reduce the spread of colds, flu and other viruses. We all have an important role to play in preventing ourselves, our families and others from spreading germs.

- ✓ **CATCH IT**
Germs spread easily. Always carry tissues and use them to catch your cough or sneeze.
- ✓ **BIN IT**
Germs can live for some time on tissues. Dispose of them as soon as possible.
- ✓ **KILL IT**
Hands can transfer germs to any surface you touch such as door handles and telephones, so clean your hands as soon as you can

As Dr M Aldous memories were late for the June issue you can read about him now. He came to West Bar Surgery around the same time as Dr Gilchrist.

Memories of Dr Michael Aldous

I started work at West Bar Surgery in July 1964. I was one of the last National Service Conscripts and had previously done two years in north Malaya in the army acting as one of the Medical officers at the training depot of the Brigade of Gurkhas, looking after the health of young Gurkha soldiers and their families. Following that, I did a GP Traineeship in Havant and then a nine month stint in a very old fashioned practice on the Isle of Wight, I was the 14th assistant who had not stayed. In 1964 the practice was in the old red brick building in West Bar, which is now serves as a driving Test Centre. I shared a room with Dr Hewlings and drove him nearly mad with my untidiness.



Where the present building now stands was a garden, at the time of my arrival the Gilchrist's were living over the top of the shop and my family started off our life in Banbury in a rented house in the Oxford Road.

Though Dr Hudson was a senior partner, he spent much of his time at the Horton Hospital as a radiologist, and Dr Hewlings was the Executive partner and very much the boss. The other partners were Dr Anne Davis, the only female doctor, Dr Long, Dr Kilpatrick, and Dr Gilchrist, Dr Hewlings was very much involved with Obstetrics and was responsible for the safe delivery of my three children, In those days we attended most if not all of the deliveries and there were many calls out to the maternity hospital at night, in those days midwives did not do any stitching.

Robert Gilchrist and I being the "juniors" were expected to share the surgery telephone line at nights and weekends, either first or second on, and do our visit and the visits of any partner on holiday though all partners visited their own patients when they were available. In those days there was a very strong personal link with one's patients day and night 52 weeks a year, and sometimes the disturbed nights from one's own crying babies and frequently ringing telephone proved a considerable strain and I for one longed for a night rota system.

We had close links with the Horton Hospital Consultants and could ring up at any time to ask advice about patients and get an immediate reading of an X-ray. A phone call to Dr Fisher about a patient's gastroenterological problems would result in his agreeing to carry out an Endoscopy the next morning at 08am. This close and friendly relationship with the Horton Consultants will remain with me as one of the most fulfilling and satisfying aspects of general practice in the sixties, seventies and eighties. Also there was a great reward in developing a close relationship with the patients on one's list. And getting to know the whole family and trying to support the family through hard and sad times. Over the years many patients became friends. In 1966 a new state of the art West Bar Surgery was built in the garden of the old practice, the pride and joy of the senior partners who had designed and created it.

Dr Anne Davies was the first partner to retire and was replaced by Dr Owen. The practice was now composed of full time male doctors and there was no female doctor until Sarah Wookey came in August 1988.

The three younger partners could now organise a night rota although the older partners continued to look after their own patients at night. Eventually as retirements took place the rota extended involving both nights and weekends but when a patient telephoned the surgery for a visit a doctor from the surgery would attend so it remained part of the practice responsibility and was still going when I retired in 1994.

For me the best years were those that preceded the advent of Kenneth Clarke and Fund Holding which caused a huge upheaval, only to be abandoned a few years later and with the arrival of a Practice Manager and the increasing financial complexities more time was spent in meetings.

Computers were introduced and while they produced benefits in efficiency over emphasis on technology was tending to change the nature of general practise.

For many years we were a training practice and every year would have a new trainee or registrar, as they are now called. They tended to be excellent doctors and it was very stimulating and enjoyable to have their input. When I retired in 1994 I had done 30 years at West Bar Surgery and I had been very fortunate in working with colleagues whom I liked and respected and now look back on those years with nostalgia.

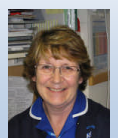
Retirement

Mrs Lorraine Pengilly has now retired and handed the practice over to Mr David Twist, Lorraine left on Friday 28th August 2009 All the best to Lorraine and we wish her a very happy retirement and she will be greatly missed by all the staff and all the PPG members.



Retirement

We would like to take this opportunity to wish Mrs Shirley Timberlake a very happy retirement as she will be retiring on 2nd October 2009, it will be a shame to lose her as she has a great sense of humour and is always smiling, but she deserves to slow down and put her feet up.



Hello I am here

While attending an appointment at the Nuffield Hospital a while ago, I was sat in a wheel chair, and I was shocked how many people treated me as almost invisible and spoke to my wife about me rather than talk to me directly. It got me wondering just how much this goes on with other people. The wheel chair is a tool and does not reflect on your state of mind or ability to do anything. Has this happened to you? How did it make you feel? A message to all people of any background, if you want to know something about a person in a wheelchair then ask the person not their wife/husband or chaperone. It is so frustrating to be ignored you want to shout, "I am here you know".



Your New Practice Manger Mr David Twist

I would like to thank the Patient Participation Group for the opportunity to write a short article to introduce myself as your new Practice Manager. My name is David Twist and I have recently taken over the job following the retirement of Lorraine Pengilley and I come to West Bar Surgery and Banbury having retired from the Royal Navy after 32 years service. So how did I find myself so far from the sea and why come to Banbury when I live in Devon?



As I was due to the leave the Navy in 2009, I was looking for an exciting and interesting employment opportunity when I was informed that the Surgery was looking for a new practice manager. Having had the chance to study the Job Description and Terms of Reference for the post I was confident that my previous experience would suit this type of job and that I had many transferable skills that could be adapted to the practice managers' role.

My Naval career can really be broken down into two halves. I joined the Navy as a 'baby' sailor at 17 as a clerk and subsequently served in a number of ships and shore establishments at various different ranks. Operationally, I served in two ships during the Falklands War in 1982 and the Middle East in 1989 patrolling the Persian Gulf. I was also lucky enough to travel extensively and visited many ports of call including the Mediterranean, the USA and Eastern Africa and was promoted through the ranks to become a Chief Petty Officer. I was then selected for Officer Training and went to the Naval College at Dartmouth in 1989. On promotion, I served in a number of interesting administrative roles but later I broadened my career to encompass Logistics. The easiest way to describe the role is that it is similar to the Bursar on a Merchant ship and it is this customer focussed experience that will allow me to serve you as your Practice Manager.

There is not the space here to go through everything I have done, but I would like to dwell on a few highlights. I managed to spend two tours of duty in the Caribbean and was lucky enough to serve in Hong Kong in 1996/97 and was responsible for the Logistics elements of closing the Naval Base and handing it over to Chinese authorities. I also served with the Army in Germany for 3 years and also undertook a tour of duty in Iraq where amongst other things I was involved in the planning for the move of the Field Hospital. My last appointment was as the Deputy Base Logistics Officer in the Naval Base in Plymouth where I was responsible for the Administrative, Living and Catering services provided to the Servicemen and women who lived in the base.

In summary, I had a very rewarding and enjoyable career in the Navy but I am now really looking forward to serving the surgery and tackling the many challenges that this will bring. I am married, have two grown up children who have left home and I currently live on the edge of Dartmoor in Devon. My hobbies include diving, long distance walking and music and I am a member of the Dartmoor Search and Rescue Team. However, I am also looking to move a bit closer to Banbury in the new year so that we can enjoy the delights that Oxfordshire has to offer and I look forward to meeting as many of you as possible.

David Twist

DIABETIC DATE AND WALNUT CAKE

8 ounces stoned dried dates, chopped
½ tsp bicarbonate of soda
¼ pt boiling water
4 ounces low fat spread
3 ounces soft brown sugar
1 size 3 egg beaten
8 ounces self-raising wholemeal flour
2 ounces walnuts, chopped.

Place the dates and bicarbonate of soda in a basin and pour over the boiling water. Meanwhile, cream the low fat spread and sugar until pale and creamy. Beat in the egg. Stir in the flour, nuts and dates and mix until combined. Place in a lightly greased 2lb loaf tin and bake in a preheated oven at 180c/350f Gas mark 4 for 1 to 1¼ hours. Turn onto wire rack and leave to cool.

Wrap in foil and store in an airtight container. Best eaten within 3-4 days. Suitable for freezing.

Taken from diabetes UK magazine.



Claire

Hanna

Judy

Jane

Louise

Sheila

Sally

West Bar Surgery Angels The District Nurse Team

Last issue I wrote an article about the Horton Angels, but we must not forget our very own West Bar Surgery Angels, the Practice nurses and the District nurses, who are a dedicated group of professionals. In this issue I will tell you about the district nurses.

They are a link between the housebound patients and the outside world, patients who are temporarily ill who need treatment in their own home. There is always a district nurse available as they take it in turns to work weekends, they are usually busy on a weekend as everybody wants to see the district nurse. They meet up at lunch time to discuss their work load, if one nurse is busier than others they share the work load to help each other out.

What does a district nurse do? Well here is a rough guide.

A district nurse provides nursing care to patients during periods of illness/incapacity in non-hospital settings, usually in their own homes, in residential care homes or in health centers. Patients may include those who are housebound, the elderly, the terminally ill, the disabled and those who have recently been discharged from hospital.

A fundamental part of district nursing is promoting healthy lifestyles and health education/teaching. District nurses also offer emotional help and advice to patients and their families and teach basic care-giving skills where needed. The district nurse team goes on a Rota to make sure the weekends are covered working a full shift on both Saturday and Sunday.

Typical work activities include:

- ✓ accepting referrals from GPs and hospitals;
- ✓ assessing, managing and planning the care of patients;
- ✓ offering emotional support to patients and their families and carers, and teaching basic care-giving skills;
- ✓ establishing links with patients' families, carers and other health professionals;
- ✓ checking patients, families and carers understand forms of treatment and how medication should be administered;
- ✓ identifying social care problems and referring to appropriate organizations where necessary;
- ✓ checking temperature, blood pressure and pulse readings, administering drugs and injections, setting up drips, cleaning and dressing wounds, taking blood and urine samples;
- ✓ collaborating with colleagues from a range of disciplines;
- ✓ Checking patients are responding well to treatment;

Prescribing aids, as required;

liaising with other services on the patient's behalf, e.g. meals on wheels, intensive home care.

Are you one of the patients who has a district nurse visit you, just think what would you do without them?

So remember next time your district nurse visits you, she is only there to help you, smile and say thanks.

Calculate your BMI for yourself

The Body Mass Index(BMI) formula was developed by Belgium statistician Adolphe Quelet(1796-1874), and was known as the Quetelet Index. BMI is also referred to as 'body mass indicator'. BMI is an internationally used measure of obesity. **How to calculate BMI** - Body mass index calculation is very straightforward. Calculating body mass index requires only two measurements, height & weight.

Measure your height in metres and multiply the figure by itself. $1.65 \times 1.65 = 2.72$

Measure your weight in kilos 85

Divide the weight by the answer $85 / 2.72 = 31.25$

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