



Welcome to the latest edition of our Practice Newsletter.

As we take up our pen to touch base with our patients, Spring sunshine is pouring through our office windows, a very welcome sight after what seemed like a very long, wet winter. It's amazing what a little sunshine and Spring flowers can do to lift the spirits! Our team are really needing that lift at the moment as we are navigating a particularly difficult time with stretched resources, which we will talk more about on page 2 in our article on Capacity versus Demand.



If you have recently received correspondence from us or visited our website, you may have already noticed that we are undergoing a visual refresh, which includes a new logo and letterhead. We hope you like our fresh, new look, but we know pleasing visuals alone don't make an organisation, but what is at the heart and running through the veins of every organ and limb that collectively makes a service run and deliver at its optimum.

As a Practice we are constantly striving to do the best we can for our patients and this is summed up in our Mission Statement:

- We support people to live healthier lives
- We believe in what we do and the difference it makes
- We care

Living a healthy life is important for everyone, but it can be challenging to know where to start. We are dedicated to supporting people in their journey towards a healthier lifestyle. We believe that small changes can make a big difference and we are committed to helping people make those changes.

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Capacity versus Demand

We are currently facing unprecedented demand on our GP appointments compared to the capacity we have available to us and we apologise for the difficulty you may be experiencing in trying to book an appointment. There are a number of contributing factors, some of which are outlined below...

- Clinical staff shortages - Winter viruses are still circulating resulting in recurrent instances of short term staff absence due to sickness.
- Funding cuts have meant we have not been in a position, financially, to employ locums to try to bridge the gap.
- Increased hospital waiting lists mean that patients who we have referred to secondary care are needing continued support from primary care to manage their condition whilst waiting to be seen by a specialist.

We are doing everything we can to ensure we fully utilise all the appointments and services we have available to us to ensure we see our patients in a timely fashion and by the most appropriate person first. This means that, on occasions, our admin team may offer an alternative to a GP appointment, some examples of these services are listed below, please click on the links for further information.

[Pharmacy First](#) - You may already be familiar with the Community Pharmacy Consultation Service that has been operating for some time, where pharmacists can deal with a number of minor conditions, without the need to see a GP. This service has recently been extended to include 7 new conditions that Pharmacists have been trained to treat and are able to prescribe, where appropriate. Our admin team may signpost/refer you to the pharmacist, but you can also self-refer to any participating pharmacy.

[First Contact Physiotherapy](#) - Our in-house Physiotherapists, Nausheen and Victor, see patients at Arlington Road on Mondays, Wednesdays & Fridays. Our admin team can book patients, with appropriate conditions, directly into Nausheen and Victor's appointments without the need for a GP referral.

[SDHC Extended Access Appointments](#) - South Downs Health and Care (SDHC) provide additional capacity for all GP Practices in Eastbourne, Hailsham and Seaford as well as the Havens and High Weald. The GP or Advanced Care Practitioner that you see or speak to will not necessarily be from Arlington Road but they will be a fully qualified Healthcare Professional, who will be able to access your notes and will be able to issue a prescription if needed. The service offers both telephone and face to face consultations and these appointments are bookable via our admin team. Face to face appointments are held at Hampden Park Health Centre.

[Emotional Wellbeing Service](#) - The Emotional Wellbeing Service is run by Southdown Mental Health. Paul Vango, one of their Mental Health Support Coordinators, offers support to our patients either via telephone consultation or face to face.

Our staff are trained to offer these services when appropriate, please allow them to help you see the right person first. We know that often the right person is the GP and our admin team are doing their best to accommodate everyone's needs with the resources they have available to them. Thank you for your patience and understanding during this challenging time, please continue to treat our admin team with the courtesy and respect they deserve.

Self-Referral Services - In addition to services that our receptionists can signpost you to there are also a number of services you can self refer to on our website, including MSK, Health in Mind, Smoking Cessation and Check In and Chat Volunteer Responders and other health information.

Covid Vaccination - Spring Booster

The campaign for the Covid Spring Booster 2024 is now underway, this is only for patients who fulfil the criteria below.

Eligibility Criteria for the Spring Covid Vaccination

- Adults aged 75 years and over
- Residents in care homes for older adults
- Individuals aged over 6 months and over who are immunosuppressed ([as defined in tables 3 or 4 in the Green Book](#))

Appointments are now available at both the Hampden Park Health Centre and the Sovereign Practice in Eastbourne.

These can be booked online at the following website: [Book, cancel or change a COVID-19 vaccination appointment - NHS \(www.nhs.uk\)](#)

Telephone Booking

South Downs Health and Care (SDHC) will be manning a telephone helpline between 09:30 – 13:00 Monday to Friday, for those people with vaccine queries and for those who are unable to book their appointments via the National Booking Service. This helpline has a voicemail facility, so please to leave a message and they will aim to respond to you the next working day. The number is: 01323 402530.

Walk-in Clinic Attendance

Specific walk-in only clinics will be run on designated days for people who cannot book an appointment. These will be advertised on the [SDHC website](#), and on social media sites.



Update on new Shingles Vaccination Programme

From 1st September 2023, patients become eligible for the Shingles vaccination (the new vaccine is called Shingrix) as they turn either 65 years old or 70 years old and they remain eligible until the day before their 80th birthday. The vaccination course for this age cohort is two doses given six months apart. As patients turn either 65 or 70 years old we are inviting them in and will also invite them back for their 2nd dose.

Patients who are currently 66, 67, 68 or 69 years old will need to wait until they turn 70 years old before becoming eligible.

Anyone who has previously had one dose of the older Shingles vaccine (Zostavax) in previous years do not need to have any more doses of the new Shingrix vaccine.

The other group of eligible patients are those aged 50+ who are immunosuppressed due to

either a medical condition or medication, this cohort of patients will also have two doses but theirs will be given eight weeks apart. We will also be inviting this group of people in but they may have been told by their Doctor or Consultant to book an appointment.

Child Immunisations

We would strongly encourage all parents to attend appointments for their child's immunisations. We run a regular clinic on a Tuesday morning, but if this isn't convenient for you, we can arrange appointments outside of the clinic times to ensure all children are given the valuable and potentially life-saving opportunity of being fully vaccinated.

If there are any vaccinations that you are concerned about we would encourage you to book either a face to face or telephone consultation with one of our expert vaccination nurses to discuss your concerns, who will be happy to help you make an informed decision.



Looking after Long-Term Conditions by Dr Paul Frisby

In January, the Health Service Journal reported that funding for General Practice had dropped to the lowest levels for 8 years. Although more money has been put into the NHS, this hasn't kept up with inflation and most of the new money has gone to hospital-based services.

Despite getting just 8% of the total NHS budget, NHS England says that General Practice delivers 300 million appointments a year compared to 23 million A&E attendances. The media tends to draw attention to the exploding demand for same day GP appointments and long waiting times in A&E as these are easy to measure and make a good story, but in truth urgent on-the-day care is only a small part of what your GP Practice does. Most of our work is dedicated to managing long-term conditions (LTC's).

You will always see plenty of children and families at the Practice, but it will be no surprise to learn that at Arlington Road we look after many older people too. You might be surprised to learn that one in three of our patients are aged over 65 (over 65's at Arlington Road 33%, UK national average 18%). The UK population is not expected to reach a similar balance until 2050, so we are doing pretty well!). With increasing age can come long-term conditions like high blood pressure, and with them usually a bunch of medications that need prescribing safely and then monitoring. Managing these issues proactively helps people to live well.

Since the 1990's a lot of the management of LTC's has moved from hospital clinics into General Practice. In 2004 the NHS set up a 'voluntary' contract with GP's called the Quality and Outcomes Framework (QOF) to support this (I say 'voluntary' because there is no option not to do it if you want to look after your patients well). I spoke to the Patient Participation Group recently about how busy and successful Arlington Road is at looking after LTC's, and they thought that you might all like to hear about it. Since 2004 Arlington Road have consistently met the very highest targets for good care of long term conditions. Because of our demographics (the groups that we look after) our LTC workload is about double the average for a practice of our size (11,500 people).

Let's start with Hypertension. 2,500 of our patients are on regular treatment for high blood pressure which involves eating well, reducing salt, exercising when able, checking BP at home and at appointments, and usually taking several tablets which often need monitoring with an annual blood test. If you take all 6000 practices in England, we are in the top 300 for numbers of people with treated hypertension (that's called the 95th centile).

We are also in that top 300 practices for stroke care, treatment of



thyroid problems, dementia care, and for cancer survivors. The people of Eastbourne are a strong and resilient lot, and a statistic that we are really proud of is that we look after over 750 cancer survivors, about double the average for a practice our size. Many of these people benefit from ongoing surveillance and care to make sure that they are staying well. We are enthusiastic about cancer screening, and in the last three years (even though there's been a pandemic on!) our nurses have ensured that 93% of eligible women had screening for cervical cancer (the national target is 80%).

There is a national drive to check people's pulses to identify people with Atrial Fibrillation (AF), an irregular heartrate that can cause strokes if not treated with daily blood-thinning medications. Arlington Road looks after nearly 600 people with AF, and that puts us at the 99th centile (one of the top 60 practices in the whole country). Despite those big numbers we have ensured that each person is on the best treatment for them. We are also in that top 1% nationally for osteoporosis and for kidney problems.

QOF also sets standards for the management and annual review of heart problems, asthma, COPD, mental health, and diabetes. Arlington Road meets the highest standards in all of these domains. We are really keen on promoting health and wellbeing and preventing avoidable disease. Last year we treated 2,700 people with cholesterol-lowering medications, and the statistics suggest that this will prevent 300-500 heart attacks and strokes over the next 10 years. Our patients have very low smoking rates, high rates of screening, and high rates of vaccination against disease. You are great people and we enjoy supporting you to live healthy lives.

Dr Paul Frisby, Senior Partner.

If you are a person who likes numbers then the latest comparative QOF data for Arlington Road and for all GP practices in England can be found at www.qpcontract.co.uk/browse/G81050/23

Locally Commissioned Services (LCS) Update

You may recall our communication back in January explaining that we had to cancel a number of services/clinics, due to funding cuts.

Now that we have begun the new financial year, we have been able to re-start these clinics, however the funding we will receive this year has been greatly reduced compared to the previous financial year.

So whilst we have recommenced clinics for microsuction, ear syringing, dermatology, joint injections, diabetes and 24 hour blood pressure monitoring, unfortunately it will be necessary for us to review, later in the year, whether we can continue to offer all of the services.

New Patient Registration now available online

As we move forward in the digital age and life becomes increasingly busy we know that many people prefer to do everything they can online at a time that is convenient to them. We are continuing to develop our digital front door at www.arlingtonroadsurgery.nhs.uk and our latest move forward is the ability to register as a new patient with the Practice without needing to attend the Surgery.



Prospective patients can now visit our [Join the Practice](#) page check that their address falls within our catchment area and apply to register online. The form will be received by the Practice and once the registration has been processed the patient will receive an SMS message confirming their registration and informing them who their new GP is.

Continued on next page

For patients who do not have access to the internet, registration packs will still be available to collect from reception but we would encourage all those who do have access to register online to streamline the process and reduce the amount of paper involved.

Portable, Personal Listeners for the Hard of Hearing Funded by the Patient Participation Group (PPG)

Hello my name is Pauline and I am Vice Chairman of the [Arlington Road PPG \(Patient Participation Group\)](#).

I wanted to share with you the role the PPG played regarding a very worthwhile and important initiative to be introduced shortly in the Surgery. I will give some background information regarding how this transpired.

Diane (member of the PPG) and I volunteered to show two representatives from Healthwatch around the public areas of the Surgery to carry out an extensive Healthwatch Patient Accessibility Survey. One of the questions asked was whether there was an hearing loop installed, our reply being “no”.

We gave feedback regarding this visit, and our comments back to Mike Leigh, the Business Manager and by our next meeting the Healthwatch Patient Accessibility Survey had been received, the majority of the report being very positive.

However the question of no hearing loop was ‘flagged’ up. A discussion ensued and the PPG agreed that they would like to be able to help patients who are hard of hearing, in some way (money remaining from previous fund raising raffle for second pair of baby scales) if a viable solution could be found. The Business Manager said that he would contact Mark Dimmock, Director for East Sussex Hearing, a registered charity, who is the lead on hearing issues to carry out a survey and report back at the next PPG meeting. The ESH Centre is private but works with the NHS.

In the Business Manager’s report at the next PPG meeting the East Sussex Hearing Report was discussed which was very thorough with various options and suggestions. The functionality of portable, personal listeners and headphones were recommendations that were well received. The PPG are therefore going to fund two portable, personal listeners and headphones and the training of Surgery staff regarding deaf awareness.

As the lead for the PPG on this project I attended a meeting with the Business Manager, Mark Dimmock and one of his colleagues to watch a demonstration of the hearing assistive equipment in action. The personal listener is the size and look of a TV remote control unit. It can be used with headphones or simply link the patient into the loop setting of their hearing device. The inbuilt microphone picks up the speech of the member of staff and user. The unit has the benefit of low audio spillage for confidentiality. It is highly portable and unobtrusive. I found the clarity when listening through one of the personal listeners incredible, and I believe will provide a supportive aid to patients who are hard of hearing. This made me aware that patients do not always understand all the information relayed by their Doctor because of their hearing difficulties.

I hope to be able to give an update in a future Newsletter.



Trainee Doctor Rotation

The beginning of April saw two of our trainee doctors, Dr Joyce Chan and Dr Imene Attouchi complete their current rotation with us, we wish them well in their next placement.

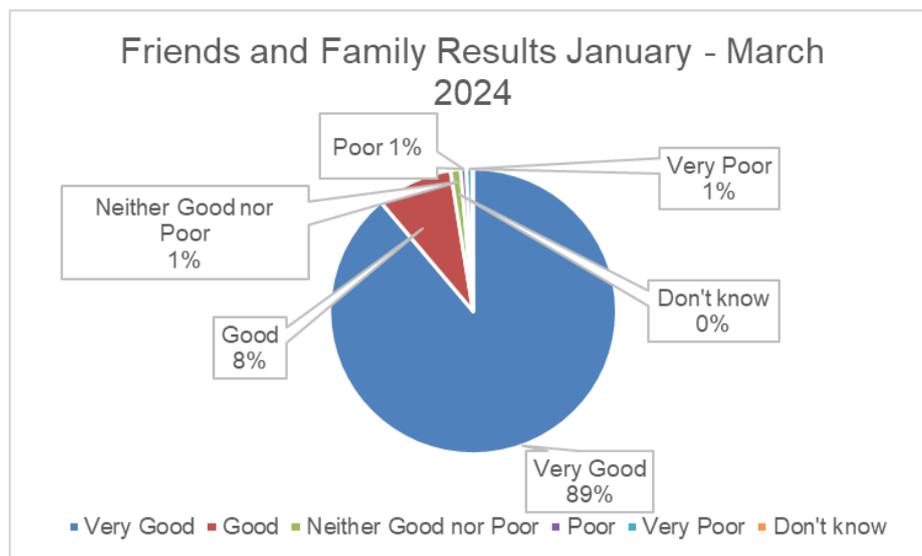
Dr Emmanuel Salami, Dr Gigi Mary and Dr Bishoy Soliman have joined us for the following four months, we welcome them to the team.

Friends and Family Test

Thank you to everyone who has completed a Friends and Family Test (FFT) Survey recently. Patients who are signed up to receive appointment reminders will receive an SMS following their appointment giving them the opportunity to complete the survey. Alternatively, this can be completed online via our [website](#), or we have paper copies of the survey at reception which can be posted in our Friends and Family Box in Waiting Area A.

The FFT is a valuable tool to enable us to see when we are getting things right and equally highlights areas where improvement is needed. We read all of your comments every month and take your suggestions seriously. The high percentage of positive comments are greatly uplifting for the team.

Our results for the first quarter of 2024 are as follows:-



To give you an idea of how representative the survey is, it was completed voluntarily by 1070 patients in 3 months. You can complete the survey at any time via our [website](#), patients who have opted for appointment reminders, will receive a text message after their appointment giving them the opportunity to complete the survey.

Remember to Update your Contact Details

Please remember to inform us if you change your name, address, email address or telephone number, this can be done quickly and simply online on our website. [This link will take you straight to the form.](#)

Getting through to the Practice by telephone

A couple of the common comments we get from patients is 'it's so hard to get through in the mornings' or 'how have all your appointments gone for the day already'?

We pride ourselves in being one of the best practices in terms of how many staff we have answering the phones first thing in the morning and how many of our calls we get through in the first half to three quarters of an hour of the day.

We take an all hands to the pump approach at 08.30 when our phone lines open and all of our admin staff, no matter what their role will be for the rest of the day, take to the phones to answer the incoming calls as quickly and efficiently as possible. Our telephone analytics are monitored throughout the day and if wait times are longer than acceptable then extra staff will dip in to reduce the queue back to a manageable level.

We look at our telephone data regularly to audit how well we are handling our calls and thought it might interest our patients just how many calls we handle and how quickly we get through those calls first thing in the morning.

Monday mornings are naturally our busiest morning and the data below is taken from our 2024 First Quarter Audit on a Monday morning in mid-February.

Time sessions	No. of Answered Calls	Max time in queue hh:mm:ss	Average time in queue hh:mm:ss	Max no. of calls in queue	Average answer time hh:mm:ss	Average talk time hh:mm:ss	Total talk time hh:mm:ss
08:30-08:59	91	00:15:49	00:06:52	37	00:07:26	00:02:15	03:25:15
09:00-12:59	122	00:06:28	00:01:00	8	00:00:57	00:02:58	06:02:36
13:00-13:59	1	00:00:04	00:00:04	1	00:00:04	00:02:39	00:02:39
14:00-15:59	59	00:05:53	00:00:49	7	00:00:47	00:01:59	01:57:12
16:00-18:00	27	00:04:48	00:00:50	4	00:00:45	00:02:22	01:04:09
08:30-18:00	303	00:15:49	00:02:52	37	00:02:51	00:02:30	12:40:45

You can see from the above data that **in the first half an hour of the surgery telephone lines opening we have dealt with 91 calls. This is approximately a third of the day's calls, answered in the first 30 minutes.** The maximum time any caller spent waiting in the queue during this half hour was 15 minutes 49 seconds, this averages out to a 6 minute 52 second wait, however many of the callers will have been answered in a much shorter time than this. Beyond the first half hour of the day, you can see the average wait time is below 1 minute.

On average most of our calls take between 2-3 minutes, and you can see our total talk time for that first half an hour amounts to 3 hours, 25 minutes and 15 seconds.

Across the 8.5 hour day (excluding the lunch hour) our admin team are talking to patients, on incoming calls alone, for 12 hours, 38 minutes and 6 seconds.

Our cloud based telephony system has enabled us to adjust the capacity of calls the system can handle to try to ensure that nobody hears the engaged tone when calling the surgery, but instead able to join the queue and be told what position in the queue they are, this has taken away the frustration of having to keep dialling the surgery until you finally get through. We have recently increased our queue capacity further to accommodate the first half an hour of the day, when our previous queue capacity was slightly too low.

This year we are taking our queue handling one step further and we are having some additional software installed that will enable patients to not only get through straightaway and hear their queue position but will also offer them the opportunity to request a call back. This is an automated system which holds the callers place in the queue, without them having to stay on the phone, and the system calls the patients back when they are at the front of the queue and connects them directly to our admin team. We are due to have the system installed in early June and are sure our patients will benefit from the improved access.

Centenary Year - 100 years of Arlington Road Medical Practice!

Although the exact date of the commencement of the Practice is unknown, we do know that the Practice was started by Dr Ethel Downing in the mid 1920's just around the corner at 6 Old Orchard Road, moving to our present site in 1946.

To mark our centenary we'd love to hear from patients who would like to share stories, photos and anything they would like to reflect on over the years as patients of Arlington Road. We know we have looked after several generations of some families and many of you remember back to the days of Dr Clarke who was the nephew of the founding GP Dr Downing.

If you have anecdotes you would like to share, please send these to the Practice for the attention of Helen, member of the Patient Participation Group. Please make it clear whether you are happy for your story to be shared publically or whether you would just like it shared amongst the Practice team.

Shirley Moth our Practice Manager takes a keen interest in history and is enjoying researching the practice back to its roots.



Benefits of Exercise by local Orthopaedic Surgeon

Professor Scarlett McNally, Consultant Orthopaedic Surgeon, was recently interviewed by the van Tulkeken twins on Radio 4 about the health benefits of Exercise. This 29 minute interview gives an insight into the benefits of exercise, not only from a healthcare professional point of view but also when the healthcare professional becomes the patient and needs the same advice as everyone else.

Professor McNally mentions the encouragement she received from both her GP and Hospital Consultant and has asked us to share this with you all as a fellow patient at Arlington Road Medical Practice.

You can listen on <https://podcasts.apple.com/ie/podcast/s3-ep-1-the-miracle-cure/id1625865924?i=1000644306649> or on BBC sounds, Spotify etc. where you can search for "A Thorough Examination. Series 3 episode 1: Miracle cure":
<https://www.bbc.co.uk/sounds/brand/m0017tcz>

Professor McNally has also asked us to promote the "KIDICAL MASS" cycle ride - all ages welcome - Sunday 19th May 2024

There will be a cycle ride from Gildredge park (by the toilets) starting with a puppet show at 1.30pm. All ages welcome. We will cycle with marshals to the seafront and back to the park around 3pm. This is part of the Eastbourne water festival, showing how easy it should be to cycle around Eastbourne. This is good for health, pollution and congestion. Just turn up with your bikes, grandchildren, etc! (Helmets on kids please, no kids' balance bikes or scooters).

Wear something blue and decorate your bike if you like! Or wave at us to show your support! The ride is organised by Bespoke Cycle Group.

