

Last month I wrote about our planned computer system upgrade but for those that missed this, our **'go live' date** remains **June 18th**. As previously said, whilst we will have access to our current system for the week prior to this date, nothing added to the patient record in that week will be transferred over. In addition to patient records we will also be switching our patient appointment system and we anticipate that we may need to restrict advance booking as we approach the swap over dates. We are currently being advised to book for only 2 weeks after 18th June prior to change over, but will then be back to normal after that date. Our current plan is also to offer an **'urgent problem on the day only' service for the 6 working days up to and including changeover day** and we are finalising plans for ensuring prescriptions are issued around that time. You do not need to do anything yourself, but you may find that your medication is doubled up around this period. Finally a reminder that those patients who have taken up on-line access will need to obtain new registration details once the change has occurred. Posters and further information will be posted in the surgery soon and I hope that you will be able to bear with us if some activities aren't quite as efficient as you are normally used to during our change over period.

Other news is that we have recently been notified of some **cases of Measles** in the Nottinghamshire area. Also there is currently a significant **outbreak of Mumps** amongst the Nottingham student population. Both of these very infectious diseases are easily prevented by immunisation and this is normally covered by the routine childhood immunisation schedule. If you or your children may have missed any of these scheduled vaccinations it would be particularly worth booking in for a booster dose at this time

Next, I have had a recent email from the Greater Nottingham Commissioning Partnership (an umbrella organisation covering all our local Clinical Commissioning Groups or CCGs). This advises that locally there should be **no prescribing of easily available over the counter items** including probiotics, treatments for viral self-limiting illnesses such as cough remedies and nasal decongestants. Similarly medication for cradle cap, infant colic, dandruff, ear wax, excessive sweating, simple migraines (Migrave), insects bites and stings (non-infected), nappy rash, teething / toothache, travel sickness and warts/verruca's should all be obtained over the counter from a local pharmacy. Requests for such medication from the surgery will be refused.

Finally, like many of you will have done, I watched this week's Panorama programme about the **'crisis' in GP appointments**. The situation in Plymouth was mainly discussed but I am well aware of similar problems in some Nottingham practices. Key themes to emerge were a shortage of frontline clinical staff (not just GPs) and a lack of resources to deliver care plus the increasing complexity of our patients who are living longer and with more medical problems than ever before. This might of course be deemed a success for the health service but all these problems need careful management, much of this complex care has moved out of the hospital to GP services (a good thing!) but more resources are badly needed to do this effectively. At the surgery we do try very hard to deliver as good a service as we possibly can, but are well aware of the difficulty sometimes in getting in to see us. What I would ask is that if your problem is 'important but not urgent' then a routine appointment should be made. If it is 'important but more urgent' then we do have our duty co-ordinator and treatment room service every morning. We are also working with your Patient Participation Group representatives to improve services where we can.

Phil Rayner

