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Name: .....

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I am a UK taxpayer and wish the Group to treat all my subscriptions/ donations paid since 6th April 2005 and all future subscriptions/donations as Gift Aid.

*giftaid it*

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**HOW TO PAY £3 PER FAMILY**

**1 BANK STANDING ORDER:**

This is our **preferred** method – please complete all of the sections on this page; then send the whole page to the Membership Secretary.

**2 DIRECT PAYMENTS:**

Please complete the sections above and send with your remittance, cheques **payable to the Red House Patients Group**, to the Membership Secretary.

**NEW STANDING ORDER MANDATE**

YOUR BANK: .....

BRANCH: .....

ADDRESS of BANK: .....

.....

.....

NAME OF ACCOUNT TO BE DEBITED .

.....

.....

ACCOUNT NUMBER SORT CODE

Please pay to **Barclays Bank plc, Radlett Branch**, Sort Code **20-91-79**, for the credit of the **RED HOUSE PATIENTS GROUP**, **A/C No. 50874264**,

on the ..... day of  
.....(month),  
20 ..... (year),  
the sum of £ .....  
(..... )

(Amount in words)

and continue to make a similar payment on the same day EACH YEAR until further notice in writing and charge such payments to the debit of my account.

PLEASE SIGN .....

DATE:.....

**Christine O'Donoghue**  
**Membership Secretary RHPG,**  
**Oak Cottage,**  
**Watling Street,**  
**RADLETT,**  
**Hertfordshire. WD7 7HL**  
**Email: cm.odonoghue1@gmail.com**

# THE RED HOUSE RAG

## THE NEWSLETTER OF THE RED HOUSE PATIENTS GROUP ISSUE 7 - AUTUMN 2011



The Committee hopes that as many people as possible will attend the **AGM on October 26th**  
(see inside for details)

### AUTOBIOGRAPHY OF DR. AMANDA CARY

Dr. Cary is a sessional GP at the Red House and Gateways surgeries. She is married with four children

'I am a Northerner, having lived in Cheshire, Yorkshire, Lancashire and Edinburgh in my formative years.

I attended Leeds Medical School in the 70s. A cold and windy city for much of the year, but it only bothered me when the 2 bar electric heater in my bedroom wasn't kicking out enough heat to stop the icicles forming when I was studying! We didn't have the luxury of central heating in rented accommodation in those days. Next came hospital jobs in Scarborough and Bradford, both offering plenty of hands on experience in medical and surgical emergencies with stunning scenery at Scarborough and great curries in Bradford!



I moved to the West Midlands to do my general practice vocational training scheme- an excellent set up providing experience in psychiatry, paediatrics, obstetrics, gynaecology and general medicine. It was there that I felt my interests especially lay in women's and children's health, so I took the relevant diploma exams before I joined a practice in Dudley. Although I thoroughly enjoyed my time in Dudley and explored the beautiful nearby countryside, it was time for a change.

Next stop was South Africa! I started locuming in the Eastern suburbs of Johannesburg, and took a basic course in Afrikaans so that I could communicate with local patients who were not bilingual. After a year or so I found a lovely practice where I felt at home, and was offered a permanent post. The medicine out there was of an extremely high standard, and GPs were trained to do anaesthetics and what I considered to be major surgical procedures! I was happy to assist and this was accepted. After seven fulfilling years out there, and taking time to visit many parts of this amazing country and meet many of its warm-hearted, hospitable people, a decision to return to England was made. I had 2 young children and local violence was escalating.

## AUTOBIOGRAPHY CONT....

In 1992 I found work in a practice in Hemel Hempstead and settled in Watford. General practice didn't seem the same, so I had a change of direction and joined the Benefits Agency Medical Services in 1995.

I was trained in all components of the medical assessment of disability caused by illness, developmental problems or injury.

One of the most interesting areas was Industrial Injuries which included assessing illness or injury sustained by soldiers on active service. Unfortunately, the Government sold off the Medical Services to private investors, and it just wasn't the same working for an American oil- drilling company! Besides I was missing general practice. So I joined a very helpful practice in Croxley who patiently showed me how to switch on a computer, and then the complex procedures involving patient records.... Then I was lucky enough to find The Red House who offered me a place in their team, and I have been happy to work here for the past ten years. The Practice has grown considerably since then, but I still think it retains that 'family' feel and hope it continues to deliver an individualised service to patients. Certainly the range of services has improved and increased over this time.

My hobbies over the years have included squash, tennis, badminton, skiing, walking, windsurfing, classical music and reading a good book. With the onset of motherhood most of these have been happily supplanted with my children's activities, but in the odd spare moment, it is bliss to curl up somewhere quietly and have a good read!

## A FOND FAREWELL

On Thursday, 31st March there was a party at Park Street Surgery to say farewell to Sue Pugsley, who had been a receptionist there for 25 years. She moved to Oxford a few years ago and has been commuting each week since then. So, having reached a suitable age, she decided to retire. Sixty patients plus staff representatives crowded into our small waiting room and porch. It wasn't long before there was quite a buzz of happy chatter. The amazing finger buffet and soft drinks offered a wonderful variety of refreshments. All around the room there were cards full of good wishes and touching messages. On a nearby table there were even more, amidst lovely flowers and intriguing packages! Dr. Sweeney made a short speech, outlining just a few of Sue's qualities. He spoke of her calmness, professionalism and incredible efficiency.

She always received patients with a warm smile and listened with empathy. In so many ways, she was the ideal receptionist who will be sorely missed. Dr. Sweeney then presented her with a cheque including contributions from various sources Sue has since written to thank everyone for their warmth and generosity, saying she was overwhelmed by the kindness of so many people. She is now looking forward to spending more time with her husband David, and finding new interests in her already attractive garden in a pretty village.

*Barbara Funnell*



## CHAIRMAN'S REPORT - SEPTEMBER 2011

*Date for your diary*  
*Annual general meeting 26th October 2011*

Please see below for agenda and details of the AGM.

Ken Spooner, Practice Manager, will give an update on the new Commissioning Group and other Practice matters.

Dr. Colin Johnston, Medical Director of West Herts Hospital Trust, will talk about the effects on the Trust of new Government proposals.

If you want to find out about how this will affect you and your families, then come along and ask any questions you may have.

A programme of talks will be arranged to start in February 2012. These will be advertised later. Please keep a look out on the Surgery boards, in the Library and on the notice boards outside the Radlett Centre. Members will be advised.

### Notice of Annual General Meeting

The 8th Annual general meeting of the Red House Patients Group will be held at the Vision Hall, Christ Church, Watling Street on Wednesday, October 26th at 7.45pm

### Agenda

- 1 To appoint a Chairman for the Meeting
- 2 Minutes of the 2010 AGM
- 3 Chairman's Report
- 4 Treasurer's Report
- 5 Election of Officers
- 6 Election of Committee
- 7 Election of Auditor
- 8 Any Other Business

Members are reminded that all resolutions for discussion at the AGM and nominations for Officers and the Committee, with names of the proposed and seconder must be notified to the Chairman in writing no later than Wednesday October 5th.



## NEW PRESCRIPTION FOR THE NHS

by Dr. Michael Ingram

Every Government, when it takes power, seems to feel duty bound to reform the NHS but the current proposals by the coalition Government really do seem to herald one of the biggest changes that the NHS has faced.

The initial concept was to move the responsibility of commissioning and “buying” healthcare away from the putatively abolished PCTs and Regional Health Authorities, to groups of General Practices on the assumption that their understanding of the way that systems worked, and their involvement in every part of patient care, and their accessibility to the public would make them ideal for the task. This appealed to us at the Red House, as having already successfully commissioned new services designed for patients such as physiotherapy, weight management, sexual health and dermatology, we felt that this model was one we could develop.

Our bid was successful and we became the only potential consortium covering just one practice. Though the last few months have seen an unwinding of the ideals and purpose behind the reforms, one key element is the representation of our patients at both board level and through every part of the process. With decisions about how and what healthcare to commission it is going to be increasingly important to have representation and information from those using local health services. It will only be through such participation that we can try and ensure that services that are perceived as important to patients are given appropriate priority in any future plans. To this end the involvement of all who are interested through the present Red House Patients Group is an excellent start to building this representative group.

The elephant in the NHS room is the decreasing amount of money available for healthcare. The next few years are going to see an inevitable decline in health spending and increasing restrictions in the availability of treatments. Coping with this is a fearsome task and we are doing our best to anticipate and mitigate the effects of this. Good husbandry is one approach and this includes making sure that the medicines that we prescribe, or the referrals and tests we arrange are appropriate, and necessary. In addition we are looking to ensure that we do not waste money on expensive medications unless they are superior to established drugs, or are effective innovative developments. With new treatments coming onto the market we want to ensure that we have the resources to embrace these, and careful housekeeping on prescribing can free up money for better treatments.

We will rely on patient representation to work with us in trying to manage the diminishing resources that we face, and in particular to highlight areas which are important to patients and where continuing or increasing investment is necessary. For that reason it is essential that such representation reflects the make up of the patients we serve and is not dominated by one particular group.

Of course, this idealistic democratic aspiration of how we manage health care in Radlett is looking naïve as the Government imposes ever increasing central control, adds new structures and removes local independence. New bodies will constrain and control and, we fear, stifle innovation. Perhaps there is a window of opportunity to set up the first stages of a model of healthcare that reflects our wishes as a community. What is certain is that the freedom to do so will not last long and any achievements have to be made before the avalanche of new bureaucratic NHS structures bury us in Radlett!

If you are interested in being involved as a patient contact Practice Manager, Ken Spooner 01923 855606 or Chairman of RHPG, Gill Balen 01923 856144

## ANNELIE BENADE

Physiotherapist working at the Gateways Surgery.

I was born in the Drakensberg town of Harrismith, South Africa-- as most of you can hear from my still too present accent. During my school years I was a very keen tennis and hockey player, and most weekends were spent at either tennis or hockey tournaments.



As the eldest of four daughters I think I was always destined for a lifetime of helping others. The choice of becoming either an ER doctor or physiotherapist was made easy by my desire to one day have a family and enough quality time together.

I graduated from the University of the Free State in 1994 after completing my four year B.Sc Physiotherapy degree. During this time I was chairman of the student physiotherapy society and sat on the student medical board. These were happy times filled with lots of fun and many gruelling hours behind the books.

For the last 15 years I have been very happily married to my husband, Christo. We have two beautiful daughters, Carli (12) and Une (9), of whom we are immensely proud.

I started my career in private practice, working for a group that provided outpatient as well as inhouse physiotherapy services for the Mediclinic private hospital group.

Some of my most rewarding years were the two I spent at the Pelonomi Hospital, a third world hospital in Botshabelo, where I was met with an overwhelming need for help amidst great poverty. I was confronted with so many people in need, deprived from all the daily luxuries that I took for granted, and I had to do a lot of soul-searching during this time.

The last 11 years prior coming to England I worked in private practice with a special interest in musculoskeletal conditions.

I have found my time in Britain a life changing experience. After the initial cultural and weather shock subsided, we are now used to the health and safety rules; football madness; and endless discussions of the weather, and find ourselves active participants!

If I have learned one thing in my years as a physiotherapist, it is that all people, regardless of age, gender, race or social standing, are very vulnerable when ill or in pain.

We as health professionals must at all times be aware of the privilege we are afforded to be able to have a positive impact on the patient's quality of life.

And, as for the question I get asked so often: "No, I do not have any aches or pains in my fingers and wrists, but ask me again when I'm 70---I might still be doing what I like best---being a physiotherapist!"

## SURGERY OPENING TIMES

SURGERY	MONDAY	TUESDAY
<b>RED HOUSE</b>  <b>COMMUNTER SURGERY</b>	7.30am - 1.30pm 2.00pm - 6.00pm Pre-booked only 6.00pm - 8.30pm	8.30am - 1.30pm 2.00pm - 6.00pm
<b>GATEWAYS</b>	7.30am - 6.00pm	7.30am - 6.00pm
<b>PARK STREET</b>	9.00am - 1.00pm 3.30pm - 6.00pm	9.00am - 1.00pm 3.30pm - 6.00pm
<b>CLINICS</b>		
<b>SMOKING CESSATION</b> <b>RED HOUSE</b>	5pm - 7pm	
<b>TRAVEL</b> <b>RED HOUSE</b>	5pm - 7pm	
<b>PHLEBOTOMY</b> <b>RED HOUSE</b>		9.00am - 11.45am
<b>GATEWAYS</b>	7.30am - 8.45am	7.30am - 8.45am 9.30am - 11.30am
<b>PARK STREET</b>	11am - 12noon	
<b>WELL WOMAN</b>	RUN AT RED HOUSE AND GATEWAY SURGERIES.	

You can now book appointments, order your prescription, send a message to your doctor using our website [www.theredhousegroup.com](http://www.theredhousegroup.com)

**Emergency number Herts Urgent Care (HUC)**  
telephone number **03000 333 333**

## SURGERY OPENING TIMES

WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
7.30am - 1.30pm 2.00pm - 6.00pm  7am start	7.30am - 1.30pm 2.00pm - 6.00pm  7am start	8.30am - 1.30pm 2.00pm - 6.00pm	<b>PRE-BOOKED ONLY</b> <b>8.00am - 11.00am</b>
8.30am - 6.00pm	8.30am - 6.00pm	8.30am - 6.00pm	
9.00am - 1.00pm 3.30pm - 6.00pm	9.00am - 1.00pm 3.30pm - 6.00pm	9.00am - 1.00pm 3.30pm - 6.00pm	
7.30am - 8.45am 2.00pm - 3.25pm	7.30am - 8.45am 2.00pm - 3.25pm		
	11.20pm - 12.20pm		
	PLEASE CONTACT SURGERY FOR DETAILS		

### CONTACT NUMBERS

**Red House**  
**Gateways**  
**Park Street**

Tel Number 01923 855606  
Tel Number 01923 857146  
Tel Number 01727 876076

Fax No 01923 853577  
Fax No 01923 857145  
Fax No 01727 874322

## UPDATE ON THE NHS BOWEL CANCER SCREENING PROGRAMME IN WEST HERTS

**Dr Alistair King - Clinical Director, West Herts Bowel Cancer Screening Centre June 2011**

The West Herts Bowel Cancer Screening Centre has now been running for just over 3 years. The Centre opened in March 2008 as part of the NHS Bowel Cancer Screening Programme. Initially screening was offered to all West Herts residents registered with a GP aged 60-69 years. Every 2 years these residents are sent by post an invitation to participate followed by a test kit that detects minute traces of blood in the stool. The test is performed at home and then sent back through the post for analysis. 98% of participants will be sent an 'all clear' letter, however 2% will have an abnormal test and are automatically booked into our screening centre at Hemel Hempstead General Hospital. There they are assessed by a specialist nurse with a view to a further test using a camera that examines the lining of the bowel (colonoscopy).



In 2010 the centre completed its first 2 year cycle meaning that everyone aged 60-69 had at that stage received at least one invitation to take part. By now many people will have also been through their second cycle of screening. Completion of the first cycle allowed the centre to 'age expand' as part of the National Programme, and since October 2010 we have not just been inviting 60-69 year olds but also residents up to their 75th birthday. This has led to an increase in the size of the bowel cancer screening team and an increase in the number of screening colonoscopies performed, now up to 14 per week.

Since the start of the programme in West Herts 106,052 screening invitations have been sent out and 62,862 kits have been returned. The screening centre has performed 1108 screening colonoscopies, and detected 103 cancers. In general these cancers are picked up at an early stage before the patient develops any symptoms. These patients are more likely to be cured following treatment, and we know that screening reduces the likelihood of dying from bowel cancer by 16%. In addition 543 patients have had benign growths (polyps) removed from the bowel, and in 99 these polyps were considered 'high risk' due to their size or number. Removing these polyps may prevent these people getting bowel cancer in the future.

Currently only 58% of people invited to take part in the screening programme actually take part. The screening team at West Herts would like more people to take up the offer of screening so that more lives can be saved. If you are aged 60-74 years you should automatically be receiving kits through the post every 2 years. Anyone aged 75 and over can also take part in the programme but will need to request a kit by calling 0800 707 6060.

## REPEAT PRESCRIPTIONS?

**WHAT YOU NEED TO KNOW! by Graham Phillips**

You are doubtless aware that people are generally living longer, and that lots of things that used to happen only in a hospital can now be provided by your GP. If you thought about it long enough you'd probably consider that the number of NHS prescriptions is rising inexorably, but the actual figures might surprise you:

Most so-called 'long term conditions', from asthma to high blood pressure and from skin diseases to erectile dysfunction are controlled by medication. In fact the NHS spends around an eye-watering £10 billion of tax-payer's money on medication each year, and on average GPs provide 17 prescriptions for every man, woman and child in the country. The majority of the prescriptions (around 80%) are 'repeats' which aim to help control long-term conditions like those referred to above. And yet, the repeat prescription process can be a nightmare.

**Just think about it:**

You battle your way to the surgery and hand in your repeat request (avoiding both the rain and the parking wardens as you go)

A few days later you repeat the journey to collect your prescription which (with luck) is ready on the expected day. Then, green piece of paper in hand, you set off to the local pharmacy.

The queue to hand in your prescription is short, but the pharmacy may be swamped, so the staff will probably ask you to pop back in a while. Assuming all goes to plan, you collect your medicines with a cheery smile at the pharmacy staff. 'Job done' for another month or two. If there's a query, or not all the medicine is in stock, you have to 'pop back' yet again for the remainder.

ALL VERY FRUSTRATING! And that's assuming you don't get soaked or (worse) get a parking ticket along the way.

Realising this, and to reduce the all-round irritation, many pharmacies will offer a 'Repeat prescription Service'. You can leave your repeat request with the pharmacy and simply 'phone when you need to re-order your regular repeat medicines; or order the repeat yourself from the surgery but authorise the pharmacy to collect it on your behalf.

**Just think.....all that 'backwards and forwards' between your GP and the pharmacy can be replaced with a single trip to the pharmacy where, with a little planning your medicines will be ready and waiting.**

**Smiles all round! Why not give it a try?**

## FLU AND YOU

If you get a letter from the Red House inviting you to attend for a 'flu jab - make sure you go. The letter usually means you are either an older person or in an "at risk" group for whom a dose of 'flu might be more unpleasant than it is anyway. Getting the jab means turning up at the surgery on any of the designated days, a short wait in a very fast-moving queue, rolling up your sleeve, a quick, painless "jab" - and that's it! If you happen to be seeing your GP about something else during this period, he or she might offer you the vaccination at the same time. One way or another, make sure you have it - it may save you an unpleasant few days later in the year.

*Jacky Toff*

## SENSATIONAL SERVICE AT THE RED HOUSE!



### Did you know that as a patient at the Red House you are extremely fortunate because:

- you can always see a doctor promptly, even if it isn't your own GP
- working people can make use of the early morning commuter clinics at the Red House and Gateways so you don't need to take time off work
- if you have a computer, you can book (or cancel) most appointments or arrange repeat prescriptions on-line
- you can make non-urgent appointments well in advance to fit in with your other commitments
- you don't have to go to Watford or St. Albans for a blood test. A phlebotomist comes to each of the Red House surgeries several times a week
- you can take your blood pressure at the surgery at any time during surgery hours
- the (optional) check-in screen saves you time when the surgery is busy
- there are dermatology, weight management, well woman, sexual health, travel and smoking cessation clinics.

There is also the active Red House Patients Group which welcomes new members who want to help make the Red House services even better.



## SUBSCRIPTION REMINDER

**Please note: as the Group's year runs from 1st October to 30th September, subscriptions for the current year became due on 1st October 2011**

**Our Annual Subscription is £3.00**, although higher amounts are always welcome. In the interests of efficiency and simplicity, for us and for you, we ask you to consider making regular annual payments by **Standing Order**.

Whether you pay by standing order or cheque, the Group can benefit from HM Revenue & Customs' Gift Aid scheme. Please sign and date the relevant declaration. **See the notes below about Gift Aid.**

### GIFT AID

Please sign and date in the relevant section overleaf to enable the Group to claim back the tax on your subscriptions/donations.

### Notes on Gift Aid:

Under the Gift Aid scheme, Charities can recover the basic rate tax paid by members. For example, your donation of £10 would be matched with a further £2.50 from Central Government. To contribute under Gift Aid you must be liable to UK Income tax in the appropriate Tax Year with taxable income (above the nil-rate band) at least equal to your donation to the Group.

You can cancel this declaration at any time by notifying the Group [see back page].

**If**, in the future, your circumstances change and you no longer fulfil condition (b) above, you should cancel your declaration.

**If** you pay tax at the higher rate you can also claim further tax relief in respect of charitable donations on your Self Assessment tax return.

### EXISTING MEMBERS

**To ensure our records are up-to-date please complete the Gift Aid declaration and return to the Membership Secretary.**

### DATA PROTECTION

Any information you give to us will be held securely and in accordance with the rules on data protection. We will treat personal details as private & confidential & safeguard them. We will not disclose them to anyone unconnected with the Red House Patients' Group unless you have consented to their release.

*Thank you for your help and support. Please notify the Membership Secretary if you change your name or address. Details overleaf.*

