# **Shirland Medical**

Queens Park Health, Dart Street, London, W10 4LD

Tel: 020 8969 2626

www.shirland.medical@nhs.net

# **OUR STATEMENT OF PURPOSE**

# The Primary Health Team

#### **General Practitioners**

#### Partners:

Dr Edward Farrell MBBCh, MRCGP (2012), Adv Dip PCMH Dr Samantha Sanghera MBChB, BSc Med Sci, MRCS, MRCGP (2015)

#### Salaried GP's:

Dr Sarnicki MBBS (1978)

Dr Neera Dholakia MBChB, MRCGP (2010) BSc Psychology, Adv Dip PCMH

Dr Louise Colley MB ChB 2012

Dr Carolyn Perera BSc. MBBS MRCGP DRCOG FRACGP

#### **Practice Nurses:**

Theresa Onwuezobe - RGN Malgorzata Melnyk – RGN

#### **Health Care Assistants:**

Antigona Hoxha
Danella McGillivary

#### **Practice Manager:**

**Andrew White** 

#### **Associate Practice Manager:**

Salma Moussati

## **Practice Secretary:**

Allison Eddy

# **Reception/Administration:**

Anna Vigliani Andres Rodriguez Emma O'Connell

# The Practice

Shirland Medical currently has 4721 patients.

# Our Aims and Objectives

The practice aims to deliver the highest standard of care by providing patients with access to suitable consultations that will support an appropriate diagnosis from which we will agree with you appropriate treatment and care plans. Our purpose is to provide our patients with personal health

care of high quality and to seek continuous improvement on the health status of the practice population overall. We aim to achieve this by developing and maintaining a happy sound practice which is responsive to people's needs and expectations and which reflects whenever possible the latest advances in Primary Health Care

In order to achieve this, the following objectives have been set:

- To provide high quality primary care treatment to our patient population, to include consultations, examinations and treatment of medical conditions
- > To show our patients courtesy and respect at all times irrespective of ethnic origin, religious belief, personal attributes or the nature of their health problem
- To focus on good health and wellbeing to our patients and the prevention of disease by promoting healthy living
- To understand and meet the needs of our patients, involve them in decision-making about their treatments and encourage them to participate fully
- To involve other professionals in the care of our patients where it is in the patients' best interests; i.e. referring for specialist care and advice
- > To ensure that all members of the team have the right skills and training to carry out their duties competently
- > To create an educational environment, where staff promote learning amongst themselves
- ➤ To encourage our patients to get involved in the practice through regular feedback, including the Patient Participation Group (PPG) and feedback though a suggestion box and patient survey.

Our practice strives towards a partnership between patients and health professionals based on the following key facets:

#### **Mutual Respect**

The Practice endeavours to treat all of our patients with dignity respect and honesty. Everyone at Shirland Medical is committed to deliver an excellent service. We ask all patients to highlight any discrepancies and to offer the same commitment in return.

## **Appointments**

Appointments can be booked by telephone, online or in person. We currently offer a telephone first appointment system with a face to face appointment booked by the GP where necessary. We offer a mix of telephone and face to face appointments. We also have access to our out of hours hub at St Charles Hospital.

## **Our Services**

The services provided by Shirland Medical include:

- Routine medical checks and general medical services
- > NHS relevant prescriptions and medications and private prescriptions
- Foreign travel advice and immunisations
- Private medical reports and reviews
- Smoking cessation
- > Chronic disease management
- Respiratory Clinic Including COPD/Asthma
- Diabetes monitoring
- Family planning and contraceptive services
- > Seasonal flu vaccinations
- Phlebotomy
- Cervical screening
- Antenatal care
- Paediatric baby check
- Childhood immunisations
- > First contact physiotherapist
- > In house pharmacist for medication gueries and minor illnesses and medication reviews

#### **Home Visits**

Home visits are available on request for patients who are housebound, terminally ill or too ill to come to the surgery. We currently have access to the home visiting service provided by our GP Federation.

# **Repeat Prescriptions**

Repeat prescriptions can be ordered via the practice online services or can be requested in writing or over the phone for patients who are over 65 housebound or Palliative.

The practice aims to process prescription requests within 48 hours which are sent via ETP to patients preferred pharmacy.

#### **Medical records**

Patients have online access to their medical record via System Online where they can access:

Medical history

Test results

Vaccination status

#### **Out of hours**

Our out of hours' service is provided by LCW UCC and is available by contacting 111 between 18.30 – 08.00

# **Non-NHS Services**

The Practice has a set tariff for non-NHS services which is sent to the patient before any work is undertaken

#### **Disabled Access**

Our building offers full wheelchair access. We also have a parking space which is reserved for patients displaying a disabled sticker.

#### **Continuity of Care**

Building and maintaining a strong relationship between doctors, health professionals, and patients is essential to the way we work. To ensure this the Practice holds:

- Weekly clinical meetings where patient cases are discussed
- Monthly MDT meetings with other allied professionals including: palliative care, district nurses, health visitors and my care my way staff.
- Weekly my care my way clinics for who are clinically vulnerable multiple comorbidities.
- Frailty including: geriatrician, GP, MCMW, pharmacist district nurses, social worker or CIS
- Paediatric hub including; paediatric consultant and GP's

#### **Infection Control**

# **Shirland Medical**

# Infection Control Statement

This practice is committed to the control of infection within our practice and in relation to the clinical procedures carried out within it. This statement has been produced in line with the Health and Social Care Act 2008 and details the practice's compliance with guidelines on infection control and cleanliness

## Infection Control Lead duties

- Increase awareness of Infection Control issues amongst staff and clients
- Help motivate colleagues to improve practice
- Improve local implementation of Infection Control policies
- Ensure that practice based Infection Control audits are undertaken
- Assist in the education of colleagues
- Help identify any Infection Control problems within the practice and work to resolve these, where necessary in conjunction with the local Infection Control Team
- Act as a role model within the practice
- Disseminate key Infection Control messages to their colleagues within the practice

# We take additional measures to ensure we maintain the highest standards:

- Encourage staff and patients to raise any issues or report any incidents relating to cleanliness and infection control. We can discuss these and identify improvements we can make to avoid any future problems.
- Carry out an annual infection control audit to make sure our infection control procedures are working.
- Significant events related to infection control are recorded, discussed and learned from
- Provide annual staff updates and training on cleanliness and infection control

- Review our policies and procedures to make sure they are adequate and meet national guidance.
- Maintain the premises and equipment to a high standard within the available financial resources and ensure that all reasonable steps are taken to reduce or remove all infection risk.
- Use washable or disposable materials for items such as couch rolls, modesty curtains, floor coverings, towels etc., and ensure that these are laundered, cleaned or changed frequently to minimise risk of infection.
- Make Alcohol Hand Rub Gel available throughout the building

## **General Information**

# **Access to Medical Records**

The Data Protection Act gives every living person (or authorised representative) the right to apply for access to their health records.

# **Online Access to Medical Records**

As of 31st October 2023 most patients will have automatic access to their online medical record and won't need to do anything. The doctors may discuss results with the patient before they are available to view online.

## Making a Subject Access Request (SAR)

A request for medical health records held at Shirland Medical must be made in writing (emails accepted) to the data controller who is: Andrew White. This form can also be obtained from reception.

## Confidentiality

All patient information is considered to be confidential and we comply fully with the Data Protection Act. All employees have access to this information in relation to their role and have signed a confidentiality agreement. Confidential patient data will be shared within the health care team at the Practice and with other health care professionals to whom a patient is referred. Those individuals have a professional and contractual duty of confidentiality.

Confidential and identifiable information relating to patients will not be disclosed to other individuals without their explicit consent, unless it is a matter of life and death or there is a serious risk to the health and safety of the patients or it is overwhelmingly in the public interest to do so. In these circumstances the minimum identifiable information that is essential to serve a legal purpose may be revealed to another individual who has a legal requirement to access the data for the given purpose.

That individual will also have a professional and/or contractual duty of confidentiality. Data will otherwise be anonymised if possible, before disclosure if this would serve the purpose for which data is required.

#### **Zero Tolerance**

The Practice supports the government's 'Zero Tolerance' campaign for Health Service Staff. This states that GPs and their staff have a right to care for others without fear of being attacked or abused. To successfully provide these services a mutual respect between all the staff and patients has to be in place.

Our Practice staff aim to be polite, helpful, and sensitive to all patients' individual needs and circumstances. They would respectfully remind patients that very often staff could be confronted with a multitude of varying and sometimes difficult tasks and situations, all at the same time. The staff understand that ill patients do not always act in a reasonable manner and will take this into consideration when trying to deal with a misunderstanding or complaint.

However, aggressive behaviour, be it violent or abusive, will not be tolerated and may result in you being removed from the Practice list and, in extreme cases, the Police being contacted.

In order for the practice to maintain good relations with their patients the practice would like to ask all its patients to read and take note of the occasional types of behaviour that would be found unacceptable:

- Using bad language or swearing at practice staff
- Any physical violence towards any member of the Primary Health Care Team or other patients, such as pushing or shoving
- Verbal abuse towards the staff in any form including verbally insulting the staff
- Racial abuse and sexual harassment will not be tolerated within this practice
- Persistent or unrealistic demands that cause stress to staff will not be accepted. Requests will be met wherever possible and explanations given when they cannot
- Causing damage/stealing from the Practice's premises, staff or patients
- Obtaining drugs and/or medical services fraudulently
- We ask you to treat your GPs and their staff courteously at all times.
- Any display of violent temper
- Shouting, raised voices, sarcasm, finger pointing
- Not engaging with staff in a positive way; being pushy or trying to intimidate staff
- Hostile or aggressive behaviour
- Threats, swearing, spitting
- Any mention or display of any object that could be used as a weapon

## Complaints

Most problems can be sorted out quickly and easily with the person concerned, often at the time they arise, and this may be the approach we try first. If this cannot be resolved at the time the patient is asked to put their complaint in writing and addressed to the complaint manager so that the complaint can be investigated further.

On receipt of a written complaint an acknowledgement letter/email is sent within 3 working days.

Investigation is then carried out with all the issues raised with the members of staff involved. A response is then drafted and reviewed by clinical partners and administration managers if appropriate before being sent to the patient. If the patient is not happy with the response they are invited to further discuss any issues not resolved. Failing this the practice provides details of the Patient Advice and Liaison Service and The Parliamentary and Health Service Ombudsman.