



Patient Participation Group

Charlbury Patient Participation Group Newsletter Issue No. 15 Winter 2022

Welcome to the winter newsletter of Charlbury Patient Participation Group.

As we approach the end of the winter months and our hopes turn to longer, milder days we cast our minds back to where we were 12 months ago. The practice had held the Pfizer vaccination clinics in Carterton and was preparing for the vaccination programme which came to dominate the work of CMC for next 9 months. By the end of 2021, CMC had delivered approximately 11,000 Covid-19 vaccinations and 2,200 flu vaccinations. This is a remarkable achievement involving the hard work of all the staff at CMC and Dr Bayliss who came back from retirement to help in this endeavour. Inevitably the vaccination programme affected the delivery of some services at the practice, but now we can report that services have returned to pre-covid normality.

Charlbury Medical Centre is part of the Rural West Primary Care Network. The PCN has recently appointed a support manager, Sarah Townsend. Sarah's role involves:

- providing administrative support to the Clinical Director, Dr Vivienne Austin and the PCN board and being a point of contact for the PCN.
- Managing the claims and payment for the Additional Roles Re-imburement Scheme roles (Age UK social prescribers, MIND wellbeing worker, Physio) and recruitment of new roles identified by the PCN board.
- Identify and distribute any funding from NHS England to practices.
- Monitor PCN progress against NHS England targets and report to Practice Managers
- Vaccines - Stock control and ordering

Sarah has worked for 20 years in the NHS, most of the time in pharmacy. Sarah works for 12 hours per week, based at the Burford surgery, in her new role which will expand and evolve over time. She is very keen to hear from and work with patient participation groups in the Rural West. We have held one meeting with her when we discussed issues of concern to us: the difficulty in using the CMC website; the quality of information on the website; the appointment system; keeping patients informed and up to date with changes in the practice and the difficulty for some patients in using telephone consultations.

In this edition we write about:

- Keeping warm
- Inhalers: their environmental impact
- How pharmacies can help
- Mobile Breast Cancer Screening Unit
- Bowel cancer screening

Keeping Warm

The Warm Home Discount Scheme

We hear much about this scheme at the moment which is being extended to support more people. Eligibility may change so please check to make sure you are receiving all the help you are entitled to.

You could get £140 off your electricity bill for winter 2021 to 2022 under the Warm Home Discount Scheme. The money is not paid to you - it's a one-off discount on your electricity bill, between October and March.

You may be able to get the discount on your gas bill instead if your supplier provides you with both gas and electricity. Contact your supplier to find out.

The discount will not affect the Cold Weather Payment or Winter Fuel Payment

There are 2 ways to qualify for the Warm Home Discount Scheme:

- In receipt of the Guarantee Credit element of Pension Credit
- Have a low income and meet the energy supplier's criteria for the scheme

Applying for the Warm Home Discount Scheme depends on how you qualify for the discount.

If you receive the guarantee element of Pension Credit on a specific date (which is usually in July) you should receive a letter from DWP. If you qualify the discount is applied automatically the following winter. You do not need to pay the money back.

If you qualify on the grounds of low income, and receive certain income related benefits, you should contact your energy supplier for more details about how to apply.

There is more information from AgeUk at:

<https://www.ageuk.org.uk/information-advice/money-legal/benefits-entitlements/warm-home-discount/> Telephone: **0345 450 1276**

and the government website:

<https://www.gov.uk/the-warm-home-discount-scheme>

West Oxfordshire District Council also has information about grants available and where to go for help if you have a low income and are particularly vulnerable to the cold.

Visit: <https://www.westoxon.gov.uk/environment/climate-action/energy-efficiency-advice-and-grants/> for more information or telephone:

The National Energy Foundation on: **0800 038 6030**

West Oxfordshire District Council: **Main switchboard: 01993 861000**

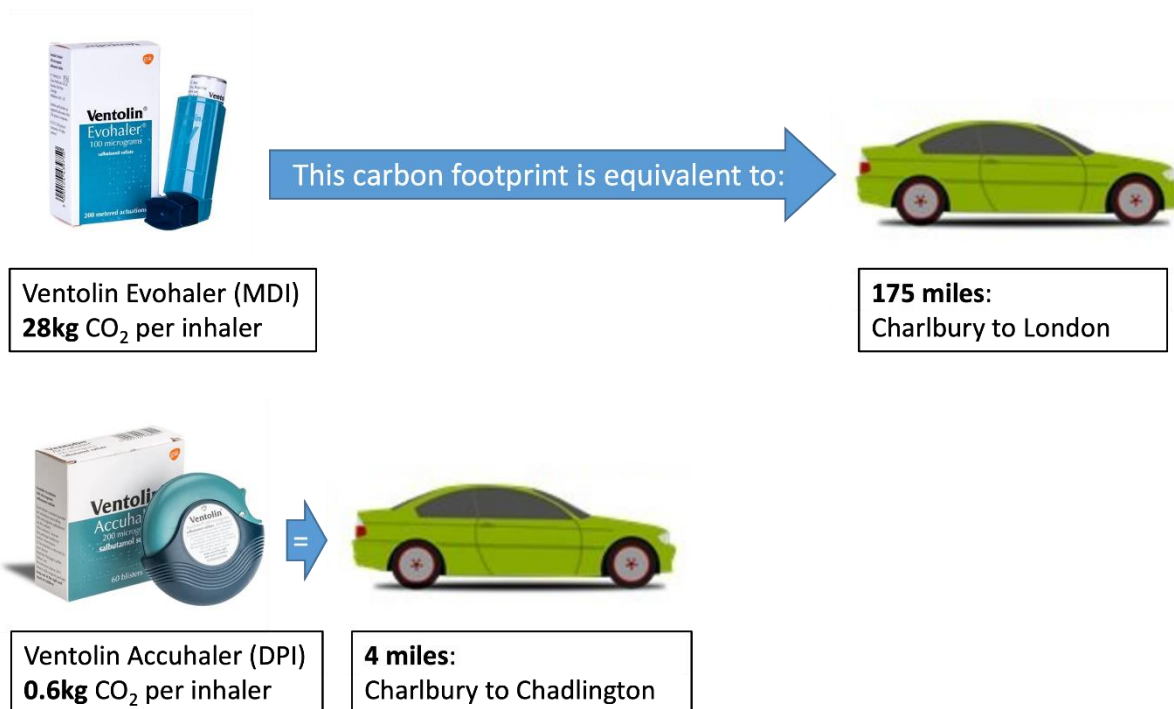
Inhalers used for the treatment of asthma

We are fortunate that Dr Frances Mortimer has agreed to be a link between CPPG and the Charlbury Town Council of which she is a member. She is also co-founder and medical director of the Oxford based Centre for Sustainable Healthcare. This organisation combines research with practical action to improve patient care at lower environmental and social cost. She is currently liaising with Charlbury Medical Centre and Averose Pharmacy on more environmentally friendly use and disposal of inhalers.

Inhalers account for almost 4% of the greenhouse gas emissions of the NHS because the propellant gases used in 'puffer' inhalers are very strong greenhouse gases. One Ventolin inhaler has the same carbon footprint as driving 175 miles, while a Dry Powder Inhaler (which does not contain propellant gases) has the same carbon footprint as driving just 4 miles.

Patients using inhalers should keep using them carefully as prescribed to control their disease. They could discuss the more environmentally friendly inhalers that are available and appropriate for their condition at their next asthma review. Inhalers should be returned to pharmacy for environmentally-safe disposal.

Environmental Impact of Inhalers



The most commonly used type of inhaler in the UK is the Metered Dose Inhaler (MDI, or "puffer" type). The main ingredient is HFC gas which helps propel the medicine into the lungs.

HFCs are powerful greenhouse gases, and because of this inhalers account for almost 4% of the NHS's total greenhouse gas emissions.

Other inhalers that don't rely on HFCs have a much lower carbon footprint. For example, Dry Powder Inhalers (DPIs) rely on a strong breath to deliver the medicine to the lungs, and as such have just a fraction of the greenhouse gas emissions.

Swapping 1 in 10 MDIs for DPIs could:

- reduce annual drug costs by £8.2 million
- reduce annual greenhouse gas emissions by 58,000 tonnes of CO₂ – the same as 180,000 return car journeys from London to Edinburgh.

Inhaler options

Patients should not compromise their disease control or cut down on medications to reduce their carbon footprint.

However, they can:

- discuss the more environmentally friendly inhalers that are available and appropriate for them to use at their next asthma review
- ensure they are using their inhaler properly
- keep track of doses taken and doses left
- return used inhalers to a pharmacy

Disposal

Most inhalers are sent to landfill or for incineration, where the gases contained within them may escape and contribute to global heating. Returning inhalers to a pharmacy ensures that any harmful greenhouse gases within them are safely destroyed.

Our local pharmacy Averose will dispose of the inhaler safely and correctly.

You can find out more at <https://greeninhaler.org>

Help and advice from a pharmacy

During this time of huge pressure on GP practices, please remember that there are other sources of help.

All pharmacies provide the following services:

- **advice on treating minor health concerns and healthy living**
- dispensing of NHS prescriptions
- access to the repeat prescription service (with agreement from your GP)
- an emergency supply of medicine, subject to the decision of the pharmacist (you may need to pay for an emergency supply)
- non-prescription medicines like paracetamol
- disposal of unwanted or out-of-date medicines

Pharmacies can give treatment advice about a range of common conditions and minor injuries, such as:

- cystitis
- aches and pains
- sore throat
- coughs
- colds
- flu
- earache
- skin rashes
- teething
- red eye

A private consultation is available at most pharmacies. Contact our local pharmacy Averose: telephone **01608 810 315**

Breast cancer screening

About 1 in 8 women in the UK are diagnosed with breast cancer during her lifetime. If it's detected early, treatment is more successful and there's a good chance of recovery.

Breast screening aims to find breast cancers early. It uses an X-ray test called a mammogram that can spot cancers when they're too small to see or feel.

In Oxfordshire, screening takes place in three locations:

- at the Oxford Breast Imaging Centre (OBIC), in the Surgery and Diagnostics Centre at the Churchill Hospital
- at two Breast Mobile Screening Units, which move between sites around Oxfordshire.

It's hoped that the mobile screening unit will visit Charlbury in early spring 2022, although delays may occur due to covid related staff absences.

In addition, the department provides an assessment clinic at OBIC for women whose mammograms showed a possible abnormality. At the assessment clinic, further tests are carried out, which can include further mammography, ultrasound imaging and core biopsies.

As the likelihood of getting breast cancer increases with age, all women aged from 50 to their 71st birthday who are registered with a GP are automatically invited for breast cancer screening every 3 years.

In the meantime, if you're worried about breast cancer symptoms, such as a lump or an area of thickened tissue in a breast, or you notice that your breasts look or feel different from what's normal for you, do not wait to be offered screening. See a GP.

Why is breast screening offered?

Most experts agree that regular breast screening is beneficial in identifying breast cancer early. The earlier the condition is found, the better the chances of surviving it.

The main risk is that breast screening sometimes picks up cancers that may not have caused any symptoms or become life threatening. You may end up having unnecessary extra tests and treatment.

When will I be offered breast screening?

All women aged between 50 and their 71st birthday are eligible for screening. Women will receive their first screening appointment before their 53rd birthday.

If you're 71 or over, you'll stop receiving screening invitations.

However you can still have screening once you're 71 or over if you want to, and can arrange an appointment by contacting the local screening unit.

You may be eligible for breast screening before the age of 50 if you have a very high risk of developing breast cancer

.

What happens during breast screening?

Breast screening involves having an X-ray (mammogram) at a special clinic or mobile breast screening unit. This is done by qualified, female radiographers.

Breast screening results

After your breasts have been X-rayed, the mammogram will be checked for any abnormalities.

The results of the mammogram will be sent to you and your GP three weeks after your appointment. After screening, about 1 in 25 women will be called back for further assessment.

Being called back does not mean you definitely have cancer. The first mammogram may have been unclear. About 1 in 4 women who are called back for further assessment are diagnosed with breast cancer.

For more information go to:

<https://www.ouh.nhs.uk/services/departments/radiology/churchill-radiology/breast-screening/>

or telephone: **01865 235 621**

<https://www.nhs.uk/conditions/breast-cancer-screening/>

Breast cancer in men

Breast cancer is often thought of as something that only affects women, but men can get it in rare cases. It grows in the small amount of breast tissue men have behind their nipples.

It usually happens in men over 60, but can very occasionally affect younger men.

The main symptom of breast cancer in men is a lump in the breast. The nipple or skin may also be affected.

See a GP if you have a breast lump or any other symptoms that worry you.

It's very unlikely you have cancer, but it's best to get your symptoms checked.

Most lumps and swellings are not a sign of cancer. They're usually caused by something fairly harmless, such as enlarged male breast tissue, a fatty lump, or a fluid-filled bump (cyst).

A GP can check the lump and refer for tests and scans for breast cancer if needed.

There are other symptoms which may indicate breast cancer in men. See:

<https://www.nhs.uk/conditions/breast-cancer-in-men/symptoms/>

See your GP if you think you may have [symptoms of breast cancer](#). They will examine you and ask about the symptoms.

Your GP can refer you to a specialist breast clinic for the scans and tests if needed where you may have an ultra sound scan, a mammogram, or biopsy.

<https://www.nhs.uk/conditions/breast-cancer-in-men/>

NHS Bowel Cancer Screening

NHS bowel cancer screening checks if you could have bowel cancer. It's available to everyone aged 60 or over. The programme is expanding to include 56 year olds in 2021.

[Bowel cancer affects the colon and rectum](#). It usually begins in clumps of cells called polyps on the inner lining of the bowel. Although some polyps go away, others slowly develop into cancer.

Bowel cancer is the fourth most common cancer in the UK and more than 16,000 people die from it every year. But it can be successfully treated if spotted early: [most people diagnosed at the earliest stage survive](#)

You use a home test kit, called a faecal immunochemical test (FIT), to collect one small sample of poo and send it to a lab. This is checked for tiny amounts of blood.

NHS England's Bowel Cancer Screening Programme (NHS BCSP) offers bowel cancer screening every two years to people aged between 60 and 74. A kit is sent in the post for people to use at home and then return.

The test looks for blood in poo (faeces), which can be a sign of polyps or bowel cancer.

If the test finds anything unusual, you might be asked to have further tests to confirm or rule out cancer.

Always see a GP if you have symptoms of bowel cancer at any age, even if you have recently completed a NHS bowel cancer screening test kit – do not wait to have a screening test.

How to get a home test kit

Everyone aged 60 to 74 who is registered with a GP and lives in England is automatically sent a bowel cancer screening kit every 2 years. The programme is expanding to include 56 year olds in 2021.

If you're 75 or over, you can ask for a kit every 2 years by phoning the free bowel cancer screening helpline on 0800 707 60 60.

No screening test is 100% reliable. There's a chance a cancer could be missed, meaning you might be falsely reassured.

So, if you're worried about a family history of bowel cancer or have any symptoms, speak to a GP for advice.

Information about symptoms which may be bowel cancer can be found here:
<https://www.nhs.uk/conditions/bowel-cancer/symptoms/>