

Newsletter

Issue 7: Spring 2015

WELCOME TO OUR SEVENTH NEWSLETTER!

“They promised us hands-off management – now they’re trying to micro-manage us!”
- Chiswick Health Centre Doctor

There are massive changes afoot in the National Health Service – including those which will have serious effects on the provision of health care to you and our community.

A message from the Chairman of the Friends of Chiswick Health Centre (FCHC):

It’s been some while since our last newsletter, but we haven’t been idle. Since last writing to you, I have undertaken a number of additional roles in an effort to increase our influence with local government and the health service: I am now Vice Chairman of Hounslow Community Network (the government-funded charity which helps all other charities in the borough), Chairman of its Integrated Health & Social Care Forum (of which more later) and a member of the Integrated Care Sub-Group (ditto re later).

“THE IMPOSSIBLE DREAM”

The Government wants to achieve four things with the forthcoming changes to the National Health Service:

- They want doctors to see more patients
- They want doctors to spend more time with each patient
- They want doctors to do a better job of looking after each patient
- They want doctors to cost less

If the government had an unlimited budget, it’s possible – although, I believe, unlikely – that they could achieve the first three out of four objectives. But without dramatic changes, it is even less likely they’ll achieve all four.

DRAMATIC CHANGES AHEAD

One of the government’s plans to achieve better care at a lower cost involves trying to integrate health and social care – and Hounslow has been selected as one of eight areas in the country to help pioneer the project. If it works, it should provide more ‘joined up thinking’ (and doing), which can only be of benefit to us all. Not only should health and social care function more seamlessly, but there could also be significant potential cost savings as well.

Another strand in the strategy is to help reduce costs by removing the stresses experienced in some of the more expensive areas of health care, such as the Accident & Emergency wards of our local hospitals, particularly those due to Winter pressures.

“Prevention is better than cure”, and so Hounslow’s Public Health Department will be launching a number of important initiatives to help alleviate A&E winter pressures by better co-ordination of social care for 60,000 residents of the borough with long term health conditions (the initial targets of the Integrated Health & Social Care project).

The Third Sector (charities and not-for-profit organizations) will also have an important role to play, both in prevention and in the provision of health and social services at a reduced cost. There are, for

example, a number of charitable organisations that provide home visits and 'meals on wheels' type services which could be extended to the wider community. If volunteers can help bring people to hospital, that would free up expensive ambulances (and highly-trained, but expensive Paramedics) for emergency services which are under intense pressure – so cutting down waiting times whilst also cutting costs.

These – and a host of other initiatives – are something we are helping Hounslow's Social Services and Public Health Departments with, while also helping the Clinical Commissioning Group ('CCG' – the part of the National Health which holds the purse strings for health care in the borough).

IS THERE AN ELECTION IN THE AIR?

With the forthcoming General Election approaching, all three of the main political parties are making great claims for 'improvements' they will bring to the NHS if only we will elect them.

One much-publicised improvement is the provision of local GP services on a '24/7' basis, with doctors theoretically available around the clock, including weekends. How this will be achieved in practice – particularly with a shortage of doctors and budgets already strained to breaking point – remains to be seen, but it looks likely to involve greater sharing of services between practices, which in our case means between the CHC and Holly Road practice across the street.

GREATER CO-ORDINATION NEEDED

One of the things I believe the FCHC needs to achieve next is to help the doctors of each practice develop their 'virtual patient groups' further in a way which will allow them to co-ordinate initiatives better in future. One idea we hope to discuss with them is to combine all four databases with that of the FCHC – while, of course, coding them so each doctor and/or practice can still access their own members individually.

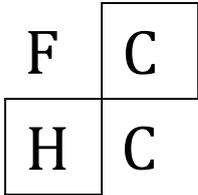
THE FUTURE

There are significant changes afoot for our doctors and the National Health Service as a whole which could have serious negative effects on the CHC and its ability to provide us with healthcare.

I therefore believe it essential that we build our membership now, so we're able to support the people who look after us in our local health centre and to respond forcefully in the future when needed - particularly now that the system is changing, government budgets are tight and some cuts to service will inevitably have to be made somewhere.

I would, therefore, be grateful if you would ask all your family, friends and neighbours to join the FCHC now - which is open to everyone and completely free of charge - by sending them this link to our website: www.fchc.co.uk

For those without access to the internet you will find a membership form below (they are also available from a leaflet rack on the left-hand wall as you enter the Health Centre's reception). If you know of anyone who would like to join us, please feel free to give him/her the form.



Friends of Chiswick Health Centre

www.fchc.co.uk

MEMBERSHIP FORM

PLEASE PRINT

NAME:

ADDRESS:

Email: (PLEASE PRINT)

Donation (voluntary): £_____

**PLEASE LEAVE IN THE COMMENTS BOX AT
COMMUNITY RECEPTION IN CHC OR SEND TO 20
WOLSELEY GARDENS, LONDON W4 3LP**