

# WELLINGTON ROAD FAMILY PRACTICE

## PATIENT NEWSLETTER SPRING / SUMMER 2022



### **Easter Opening Arrangements**

Practice staff and you our patients have gone through two difficult and stressful years, trying to manage COVID and the vaccination programme while trying to keep up with all the other health concerns that you need to share with us. Let's hope that as 2022 progresses, we encounter no new COVID variants and that life can return gradually to something like the reality of life before COVID. The doctors, nurses, clinical and support staff at Wellington Road Family Practice would like to wish all of our patients and your families a very happy Easter.

**We will be closed on Friday 15<sup>th</sup> April and Monday 18<sup>th</sup> April. We will close at 1.30pm on Thursday 14<sup>th</sup> April so please ensure that you collect prescriptions, by the end of the day on Wednesday 13<sup>th</sup> April, and order medication by Monday 11<sup>th</sup> April if needed before Easter. Please telephone 111, if you need a doctor over the Easter holidays.**

### **Top Rated GP Practice Again!!**

Wellington Road Family Practice was rated the top GP Practice in South Gloucestershire for 2021; this is the fifth consecutive year that we have achieved this rating. Every year a GP Practice survey is carried out and once again Wellington Road Family Practice scored higher than average in every area that was surveyed. 98% of our patients who responded to the survey, described their overall experience as good with the national average being 83% and the helpfulness of reception staff was rated at 100%. In this annual survey GP Practices are judged on access to the GP service, making an appointment, experience of the most recent appointment and your health as a result and your overall experience. To have achieved this result after such a demanding 20 months and for a fifth year, is outstanding and a huge boost to the morale of everyone connected with the Practice. So a massive thank you to all our patients who responded to the survey. The full results of the survey can be found at <https://www.gp-patient.co.uk/> .

## **STAFF UPDATE**

### **Dr Davies**

Dr Davies left on 7<sup>th</sup> April 22 to start her maternity leave. Dr Davies's patients until we find a replacement GP, will be under the care of Dr Taylor.

### **Dr Taylor – Monday morning, Tuesday all day and Thursday morning**

Dr Taylor used to work Thursday mornings only. However, with Dr Davies going on maternity leave and due to us having difficulty recruiting a GP, which is a national problem, Dr Taylor has kindly agreed to work more sessions with us. From 12<sup>th</sup> April Dr Taylor will work Tuesday all day and Thursday morning and from 3<sup>rd</sup> May 22, Dr Taylor will work an additional session which will be Monday mornings.

### **Dr Anderson Wednesdays all day**

We are delighted to have the help and support from a new doctor for a few weeks whilst we continue to recruit. Dr Claire Anderson will be working all day Wednesdays from 6<sup>th</sup> April until 13<sup>th</sup> July 22.

### **Dr Hunt - Alternate Thursdays from 5<sup>th</sup> May 22**

Dr Hunt has sadly decided that she no longer wishes to work as a GP, but instead would like to work in area that she has a particular interest in which is contraception. We are pleased to say that Dr Hunt is not leaving us for good and will still be very much part of the team. Dr Hunt will be holding a contraception clinic every other Thursday afternoon from 5<sup>th</sup> May 22. This will be a pre-bookable clinic.

### **Dr Nabti – Thursday all day and Friday morning**

We are so pleased to inform you that a familiar face will be returning to the team. Dr Habiba Nabti was with us last in 2020 and has been offered a permanent contract to start on the 1<sup>st</sup> May 2022.

### **Dr Bird – Monday and Friday**

There will be no changes to Dr Birds sessions.

### **Dr Dallard – Tuesday and Wednesday**

There will be no changes to Dr Dallards sessions.

## **Registered GP's**

We are hoping that sometime in May we will be able to reallocate Dr Hunts registered patients to a new named GP. When this is done, we will inform all patients affected. Patients can still see any GP of their choice, but we do try to encourage seeing your own registered GP where possible to offer continuity of care.

## **Nursing team**

Jayne has reduced her hours at the practice working as a health care assistant to take on a new and exciting role in the community looking after our frail and housebound patients. Jayne will be working with us on Thursday mornings only. We have Becky who also works as a receptionist who is a trained phlebotomist who does a regular blood clinic on Monday mornings. We will be looking to find a replacement to fill Jaynes vacant hours.

We have a nurse who will be on long term sick leave from 11<sup>th</sup> April 22. As you know we are a small practice with a small team. We will have a nurse here on Monday afternoons, Tuesday mornings and Friday mornings over the coming weeks. Jayne is here on Thursday mornings so will be able to help with some treatment room duties. We will be recruiting a nurse to help us out Wednesdays until our nurse returns from sick leave. Please bear with us during this difficult time, as we may not be able to book an appointment for you as soon as we would normally. We will have staff taking annual leave, so again will need to find short term cover to assist us when needed.

## **Physician Associate at Wellington Road – Sophia Chappell - works Monday to Friday**

Physician Associate is a new health care professional role. Physician associates while not doctors, will work to the medical model, with the attitude, skills and knowledge base to deliver holistic care and treatment within the practice team under clearly defined supervision.

The main difference between a doctor and a physician associate, is that the physician associate works under the guidance and supervision of a doctor whereas a doctor has full responsibility for a clinical situation. Both doctors and physician associates are fully qualified medical professionals.

The day to day tasks to be undertaken by a physician association include:

- Taking patient medical histories
- Undertaking physical examinations
- Diagnosing illnesses
- Seeing patients with long term health conditions
- Performing diagnostic and treatment procedures
- Analysing test results and
- Providing health promotion and disease prevention advice.

## **Clinical Pharmacist at Wellington Road – Cristiana Cimpoeru - works Tuesday and Friday**

Clinical Pharmacists are specialists that work closely with the rest of the practice staff to ensure medicines are prescribed safely. They are able to give you expert advice on your medicines and medical conditions. Examples of what they may be able to help you with include:

- If you have difficulty obtaining a supply of your regular medication or experience side effects they can work with you to find a solution such as changing your medicine or reducing the dosage.
- If you are taking a number of medicines, they can undertake medicines reviews with you to make sure you understand what they are all for, check they are working for you and ensure any required monitoring (e.g. blood tests) are carried out.
- If your medicines have been changed while you were in hospital or at an outpatient clinic, they can help explain these changes and ensure you get the maximum benefit from them.
- They may be able to arrange for medicines to be prescribed to treat common illnesses but will always refer to a GP if there is a need.

## **First Contact Practitioner Physiotherapist - Anthony Cavillini - Tuesday and Wednesday afternoon**

A First Contact Practitioner Physiotherapy is a very experienced physiotherapist with the advanced skills necessary to assess, diagnose and recommend treatment or make a referral on to musculoskeletal specialties without needing to contact a GP.

Musculoskeletal disorders are injuries or disorders of the muscles, nerves, joints, cartilages, ligaments, tendons and bones which most frequently occur in the lower back, knees, shoulders and neck. The most common causes of those injuries or disorders include, lifting, carrying and putting down, falls and repetitive movement or strain.

This role is about seeing and assessing someone with a new musculoskeletal problem that hasn't been examined before. If longer term therapeutic input with community physiotherapy or seeing a rheumatology consultant is required, this can be referred on. The service is for adults only and is not available for long term neurological, rheumatological and inflammatory conditions. Musculoskeletal health is influenced by metabolic health. High blood pressure, obesity and diabetes can have significant impact on bone, joint and soft tissue health.

While complementing the medical approach to these problems, a first contact practitioner will aim to encourage an active self-management approach which involves looking at changes in lifestyle which may include

- changes in diet,
- more and regular exercise

- better sleep and
- where appropriate a particular exercise programme to improve mobility and balance aimed at reducing the risk of falls.

To access this service please contact the surgery for an appointment

## **Receptionist – Wendy Fivian**

Some of you may have noticed a new face or a different voice. This is Wendy our newest recruit to the reception team. Wendy joins, Carol, Claire and Becky. Wendy has many years' experience working in much larger GP Practices. Wendy is enjoying and adjusting to the changes of working within a smaller practice team and getting to know our patients.

## **Emails relating to queries, questions or issues**

We are receiving an increasing number of emails to our generic email account [bnssg.wellingtonroad@nhs.net](mailto:bnssg.wellingtonroad@nhs.net) in relation to queries, questions or issues. The generic email account is and has always been purely for other health care professionals wanting to send us information, or for patients who need to request a repeat prescription who are unable to do it by using their NHS App, patient access online, or asking their nominated pharmacy to request it on their behalf. With immediate effect, we will no longer be able to accept emails in relation to queries, questions or issues. This is not a safe or appropriate way of communicating with us. It is only monitored several times throughout the day, someone could easily delete the email, and there is the possibility that the email may not get saved into your medical record. Any emails received will be responded to, by asking the patient to either use e-consult or by ringing the practice. We apologise for any inconvenience this may cause.

## **Spring Covid Boosters**

The programme for Spring Boosters has been announced and the following groups will be eligible for a booster 3 months (92 days) after their last one in autumn 2021. This is providing the patient has not tested positive in the 28 days preceding their vaccination appointment. The vaccination that we are using for the boosters is Moderna.

Over 75s, Care home residents and immunosuppressed patients over 12.

We will be starting the clinics again in April. Invitations will be sent out to patients as they become eligible. Please DO NOT phone us to make a booking until you get the invitation.

## **Cholesterol**

Cholesterol is a waxy substance found in our blood. We all need cholesterol to have a healthy life but too much cholesterol can cause health problems. The liver is the organ in the body which makes cholesterol but foods such as cheese, butter, eggs and red meat also contain it.

Cholesterol is transported around our bodies by the blood. There are two types of cholesterol, good and bad; the bad can be deposited in our arteries and in effect cause the blood vessels to harden and narrow; the good carries any excess cholesterol away from our arteries and back to the liver which eliminates it from our bodies.

High cholesterol is a risk factor for diseases of the heart and circulation. It has no visible symptoms which makes it a hidden health hazard. Cholesterol can be checked with a blood test because anyone can develop high cholesterol.

Reducing your cholesterol level can be achieved by medication usually statins which block the liver's cholesterol production. However many people manage to achieve lower cholesterol by making lifestyle changes such as cutting or ceasing smoking, taking up or increasing moderate exercise and changing eating habits by eliminating foods containing saturated fats and reducing alcohol intake. For more information the British Heart Foundation website may be useful [www.bhf.org.uk](http://www.bhf.org.uk) as is the NHS website, [www.nhs.uk/conditions/high-cholesterol](http://www.nhs.uk/conditions/high-cholesterol) .

## **Chronic Obstructive Pulmonary Disease (COPD)**

Chronic Obstructive Pulmonary Disease (COPD) describes a group of lung conditions that make it difficult empty air out of the lungs because the airways have become narrowed. Two of the more well-known lung conditions are chronic bronchitis and emphysema. In bronchitis, inflammation narrows the airways; in emphysema tiny air sacs (alveoli) break down. Both conditions make it harder to move air in and out of the lungs impairing the intake of oxygen and expulsion of carbon dioxide. COPD usually develops because of long term damage from breathing in a harmful substance, most frequently cigarette or other tobacco smoke as well as air pollution or jobs where people have been exposed to dust, fumes and chemicals.

COPD symptoms include:

- Shortness of breath when doing things like housework or walking,
- Having a long term cough,
- Wheezing in cold weather,
- Producing more phlegm (sputum) than usual.

Chest x-rays and blood tests as well as using a machine (spirometer) to measure lung capacity will help to make a COPD diagnosis. Other tests may be used such as blood oxygen and peak flow.

While there is no cure for COPD, there are good treatments which can help slow the progression and control the condition. If you smoke the most important thing to do is to STOP. Inhalers and tablets can make breathing easier and some people may be offered pulmonary rehabilitation. Nebulisers and long term oxygen therapy can be used where the condition does not respond to tablets, inhalers or rehab exercises.

COPD can affect many aspects of life but there are a number of ways to manage your life as well as possible:

1. If you've not stopped smoking then please STOP.
2. Take prescribed medications as these can help prevent flare-ups.
3. Try to take regular exercise however gentle but take advice from your clinician about whatever exercise you want to do.
4. Maintain a healthy weight and if you are overweight try to diet in a way that will slowly achieve weight reduction.
5. Take the annual flu jab and in the current pandemic take every COVID jab offered and take the pneumonia jab when offered.
6. Watch what you breathe; avoid dusty places, fumes, strong smelling products, hairspray and smoke.
7. When offered reviews of your condition, take up any appointments offered.
8. If your phlegm (sputum) changes from its normal colour (yellowish) to green, please report to your GP as you may need an antibiotic.

For more information go to [www.nhs.uk/conditions/chronic-obstructive-pulmonary-disease](http://www.nhs.uk/conditions/chronic-obstructive-pulmonary-disease) or the British Lung Foundation website [www.blf.org.uk](http://www.blf.org.uk)

## Eating Disorders

An eating disorder is a mental health condition where the control of food is used to cope with feeling and various other situations. Eating too much or too little or worrying about weight or body shape can be considered as unhealthy behaviour. Anyone can develop an eating disorder, any age, gender ethnicity or background but it would be true to say teenage girls tend to be the most affected. More than 1.6 million people in the UK are living with an eating disorder.

The most common eating disorders are:

- Anorexia nervosa which is about control of weight by not eating enough food, over-exercising or both,
- Bulimia which is losing control of how much you eat and then taking drastic action not to put on weight,
- Binge eating disorder which is eating large volumes of food until feeling uncomfortably full.

Another common diagnosis is 'Other Specified Feeding or Eating Disorder (OFSED) where symptoms do not fit expected symptoms.

Symptoms of eating disorder include

- A lot of time worrying about weight and body shape,
- Avoiding socialising where food is involved,
- Eating very little food,
- Making oneself sick or taking laxatives,
- Over-exercising,
- Strict habits or routines around food and
- Mood changes.

Physical signs can include dizziness and tiredness, limb pain or tingling, racing heart or feeling faint, digestion problems and changes in puberty development. Warning signs can be dramatic weight loss, lying about food intake, eating a lot of food then disappearing to the toilet, avoiding eating with others or eating very slowly, even wearing baggy clothes to hide weight loss.

Getting help should begin with contact with your GP who may wish to refer to an eating disorder specialist team. It can be really difficult to persuade someone who has or appears to have an eating disorder, to seek help. Recovery from an eating disorder is very possible but can take quite a long time. Treatment will depend on the type of eating disorder and the symptoms presented, but usually involves a talking therapy and regular health checks to monitor physical health and for some disorders some guided self-help.

More information can be obtained from [www.beateatingdisorders.org.uk](http://www.beateatingdisorders.org.uk) and [www.rethink.org](http://www.rethink.org) .

## **G.P. Data for Planning and Research Collection**

NHS Digital is developing a new system to collect patient data held by GP practices across England. This process is called the General Practice Data for Planning and Research data collection. The NHS uses GP data every day to decide where to provide new clinics and GP practices and to inform Government.

NHS Digital will use patient data to:

- Promote long term safety and effectiveness of care,
- Plan how to deliver better health and care services,
- Prevent spread of infectious diseases and
- Identify new treatments and medicines.
- 

The NHS will be looking closely at:

- Researching the long term impact of COVID on the population,
- Health care inequalities,
- Developing treatments for serious illnesses.
- 

Key points for patients to be aware of, are that:

- Data will be held securely in a trusted research environment by NHS Digital,

- Data will be pseudonymised, i.e. all demographic information will be replaced by a unique identifier which allows the records for the same patient from different systems to be linked together without the patient being in any way identifiable; this part of the process will happen before data is transferred to NHS Digital,
- Any data NHS Digital collects, will only be used for health and care purposes; patient data will not be sold,
- Research organisations will be able to apply to access data needed for their research; they will be checked by the Data Access Request Service and the Independent Group Advising on Release of Data, who will assess if applicants should have legal access and can handle the data safely and appropriately,
- The new system which was originally due to start in July and then September, now has no start date and
- Patients will have the right and the ability to opt out of sharing their data.
- 

NHS Digital will be running a new communication campaign to provide more detailed information for patients about how this new system is proposed to work.

## Hay Fever

Hay fever, which is a seasonal form of allergic rhinitis, is an inflammation in the nose which happens when the immune system overreacts to allergens in the air. Hay fever is usually worse between late March and September, particularly if the weather is warm, humid and/or windy. This is when the pollen count is highest.

It is the tiny almost invisible pollen of wind pollinating plants that are the predominant cause of hay fever. Pollens of insect pollinated plants tend to be too big to remain airborne, so pose relatively little risk. Plants commonly responsible for hay fever include trees such as pine, birch, willow and horse chestnut, various grasses and weeds such as ragweed, nettle and sorrel.

Hay fever symptoms which can last many weeks, include:

- Sneezing and coughing,
- Blocked or runny nose,
- Itchy, red and/or watery eyes,
- Itchy nose mouth throat and ears,
- Headache and/or earache,
- Tiredness.

While there is no cure for hay fever, there are things to do to ease symptoms when the pollen count is high;

- Put vaseline around your nostrils to trap pollen,
- Wear wraparound sunglasses,
- Shower and change clothes if you have been outside and stay indoors as much as you can,

- Keep windows and doors closed as much as possible,
- Look for pollen filters for use in the car and for vacuum cleaners,
- Avoid walking on or cutting grass,
- Don't keep fresh flowers in the house,
- Don't dry clothes outside because they can trap pollen,
- Avoid smoking.

Speaking with a pharmacist would be helpful as a pharmacist can offer advice and support and suggest the best treatments to try to manage the effects of hay fever such as antihistamine drops, tablets or nasal sprays. Histamine is normally released when your body detects something harmful. However for people living with allergies, the body mistakes something harmless like pollen thinking it is harmful and so, produces histamine. Antihistamines help to stop this or reduce its severity. There are several types of antihistamine, some which can make you drowsy and others which don't have that effect. You may have to try different antihistamines to find out what works best for you. For more information go to [www.allergyuk.org](http://www.allergyuk.org) or go to the NHS website [www.nhs.uk/conditions/hay-fever](http://www.nhs.uk/conditions/hay-fever)

## **Improvements in Local Stroke Services**

Major changes have been approved for local stroke services. The changes are aimed at reducing the number of stroke deaths in our area and achieving better recovery and independence for people rehabilitating from a stroke. The changes have been developed by senior clinicians, health and social care staff and people with lived experience of stroke.

The changes include:

- Emergency stroke care with the establishment of a single Hyper-Acute Stroke Unit at Southmead Hospital offering 24 hour treatment for everyone living in the South Gloucestershire, Bristol and North Somerset,
- Ongoing hospital treatment with the establishment of an Acute Stroke Unit at Southmead enabling most people to receive ongoing care in a dedicated unit where all staff are stroke care specialists,
- Inpatient rehabilitation through creating two Sub-Acute rehabilitation units and
- Enhancements to be made to community rehabilitation to deliver improved and more effective support in peoples' homes.

The intention is to implement these new services by November 2022.

## **Insect Bites and Stings**

With spring and summer approaching, it is worth a thought about what to do if you experience an insect bite or sting. Insect bites or stings usually cause a red and swollen lump to appear on the skin which may be itchy and painful. These symptoms normally improve within a few hours or a couple of days but should certainly pass within a week. If a more severe allergic

reaction occurs such as breathing difficulties, dizziness swollen mouth or tongue, this needs immediate medical intervention and treatment.

So if bitten or stung:

- Remove the sting or tick carefully if still in the skin making sure to remove it totally,
- Wash the affected area with soap and water,
- Use a cold compress or ice on the swelling,
- Avoid scratching and any traditional home-based remedies like vinegar or bicarbonate of soda as these are unlikely to help.

If the swelling or itchiness continues for a few days you can always consult a pharmacist; it is best to seek medical advice if:

- You are worried about a bite or sting, NHS 111 or your GP can advise,
- Symptoms don't improve or they get worse,
- You've been bitten or stung around the mouth or throat or near to the eyes,
- The area around the bite or sting enlarges in redness or swelling and/or there is increasing pain or pus discharge,
- You experience symptoms of a more widespread infection such as flu like symptoms.

The time to get emergency help via 999 is if you have a severe symptomatic reaction such as:

- Wheezing or breathing difficulties,
- A swollen face or mouth,
- Nausea or vomiting,
- A fast heart rate,
- Dizziness or feeling or actually fainting,
- Difficulty swallowing,
- Lost consciousness.

You can reduce the risk of bites and stings by:

- Remaining calm and slowly moving away if you encounter wasps, bees or hornets, don't wave your arms around trying to swat them,
- Keep exposed skin covered,
- Don't walk barefoot outside,
- Apply an effective insect repellent to exposed skin,
- Avoid using products with strong perfumes as they can attract insects
- Take care around flowering plants.

And a word if going abroad, research if you need to take extra precautions.

## **Let's Talk Cancer?**

Throughout the pandemic there have been many ways in which our health may have suffered. One issue of national concern has been the reduction in cancer detection rates.

Cancer has not gone away just because COVID has been at the front of the news. If you are called as part of the national screening programme for

such as bowel, breast or cervical screening then please make sure you take up the opportunity to be screened; and please don't forget if you have been having your PSA checked for prostate issues then please continue to have the blood tests that your GP has suggested.

Screening is vitally important for the early asymptomatic detection of cancers. The NHS advice is that if you experience breast, bowel, bladder, mouth or skin changes, problems with or after eating that persist, neurological, fatigue issues that persist, bleeding or bruising, coughing or hoarseness which persists, swelling or lumps or unreasonable weight loss, you would be well advised to contact your surgery to discuss the symptoms with your GP.

### **NHS Continuing Health Care (CHC)**

Some people with long term complex health issues, may be able to have the care they need, paid for through NHS continuing health care which can be offered whether the person with those care needs is living at home or in a care or nursing home.

To be eligible for NHS continuing health care, the person needing the care must have significant difficulty with things like breathing, eating and drinking, mobility, memory or thinking. It isn't about a person's diagnosis, it is about her/his functional abilities, meaning that the care she/he needs, has to constantly address health needs.

A continuing health care assessment should be considered when a person with complex needs is preparing for hospital discharge or is going into a nursing home or has needs at home or in a care situation which are rapidly growing. However the person with the care needs, her/his carer or another family member can ask for an assessment at any time from the Clinical Commissioning Group (health) or from the local authority social care department. If a person's needs are rapidly changing, a fast track assessment can be requested.

The continuing health care assessment considers the following issues: breathing, nutrition, skin condition, continence, mobility, communication, cognition, behaviour, medication and drug therapies, emotional and psychological needs, levels of consciousness and any other care issues. These are assessed as one of the following; priority, severe, high, moderate, low and no needs. Ideally two people should be involved in the assessment, a health care professional and social care professional. The person with care needs and her/his carer or family member should be as fully involved in the assessment process as possible.

Before a full continuing health care assessment, a doctor or nurse may run through an initial checklist the results of which would determine whether a full CHC assessment is appropriate.

All decisions have to be fully recorded and written up and should be shared with the person with the care needs and her/his carer or family member. If a claim for continuing health care is unsuccessful, the decision can be appealed. If after appeal the claim for CHC is still unsuccessful, the local Clinical Commissioning Group can be asked to undertake an independent review.

If you need help or advice with a continuing health care assessment, you can contact Beacon CHC which is a not for profit organisation that can give independent advice and help on NHS continuing health care. Their helpline is 0345 548 0300 or go to their website [www.beaconchc.co.uk](http://www.beaconchc.co.uk)

## Scam Alert

COVID Vaccination is free. Beware of fraudsters who will purport to arrange a vaccination for you then ask for bank details for you to make a payment! **This is a total fraud;** do not give your bank details to anyone.

If you receive an email or text saying that you have not filled in your 2021 census form correctly or you have missed an answer to a question and if you don't respond you could be fined £1,000, **do not click** on the link you are asked to use, **ignore it** and report it to the National Census office using a telephone number on their website [www.census.gov.uk](http://www.census.gov.uk) 0800 141 2021.

There are also some fraud alerts to do with travel and holidays with fake websites, adverts, emails, social media posts, texts and phone calls for holidays, flights and accommodation, none of which exist. Please be careful and if in doubt contact Action Fraud on 0300 123 2040.

A number of people have received fake emails purporting to come from the NHS, claiming to provide digital passports that prove that you have been fully vaccinated against COVID-19. These emails are totally fake and the links in them lead you to what look like genuine websites where your personal and financial information can be stolen. So please **BEWARE**

## Social Prescribing

Social prescribing is a national NHS England programme and locally is a service available to all GP surgeries in South Gloucestershire. It is a means of enabling GP's, nurses and other primary care professionals to refer patients to a range of local non-clinical services. Part of the thinking behind social prescribing is that a person's health can be significantly determined by social, economic and environmental issues. Social prescribing aims to address a person's needs holistically, as well as helping that person to take greater control of their own health.

Social prescribing is designed to support people with a variety of social, emotional and practical needs aiming to improve mental and physical well-being. Evidence from a local study demonstrated reduced levels of anxiety and improved general health and quality of life.

Wellington Road now has a social prescriber supporting the Practice.

Referrals to the service will be for:

- People age 18 and over;
- People who are socially isolated;
- People with poor self-care, hygiene, nutrition, fitness;
- People experiencing family related problems;
- People who have experienced bereavement;
- People who are or have been experiencing abuse and trauma and
- Anyone who could benefit from additional support to enhance the positive outcome of their clinical prescriptions and enhance the daily wellbeing of the patient for the long term.

## **The Power of Positive Thinking**

Is your cup half full or half empty?

Whatever your answer, that answer is likely to represent your view of the world. If your glass is half full you are likely to have a more positive viewpoint. Negative attitudes and feelings can lead to stress, anxiety and depression which upsets the body's hormone balance and can damage the immune system. Chronic stress can have an impact on lifespan.

There are several ways that positive thinking can improve your health if you can retrain yourself to try to think more positively.

Positive thinking can

- Improve the immune system,
- Decrease blood pressure,
- Increase resilience particularly improving the immune system and healing after any medical setback,
- Contribute to longevity,
- Increase pain tolerance,
- Increase self-esteem and confidence,
- Lead to a happier and more enjoyable life.