

Your PCN Staff

Clinical Director - Dr Faris Al-Ramadani

PCN Manager - Jo Hamilton

Health and Wellbeing Team

Clinical Pharmacists - Hitesh Tara, Mina Hunjan, Kavitha Cherian

Pharmacy Technician - Kulwinder Dhadli

Social Prescribing Link Workers - Amanda Jerman, Elicia Sidhu, Mandy Brophy

Health & Wellbeing Coaches - Ludmila Enticott, Carrie Elkington

Care Coordinators - Joanna Kennerley, Liz Kelland



Kineton Surgery
St Wulfstan Surgery
Fenny Compton Surgery
Southam Surgery
Harbury Surgery

Health and Wellbeing Team, details are below.

Our team have been working hard and have provided some case studies for you to read. We feel these really reflect the excellent work our staff are providing by helping our patients to improve their health & wellbeing.

PCN Projects

- Blood Pressure monitoring at home service
- Health and Wellbeing Support
- Supporting Health inequalities
- Trainee Counselling Service
- Online CBT support with Silvercloud

To find out more visit www.wepcn.co.uk.

**What's
new?**



Warwickshire East
Primary Care Network



Clinical Director Update

Many thanks for reading this latest PCN update, and I hope you all get a chance to enjoy some good Summer weather!

The PCN has been working hard to continue to deliver new and innovative services to patients. We have had a really good uptake of users for our online wellbeing portal, Silver Cloud. Patients can still self-register for lots of modules that they can undertake online by visiting <https://wepcn.silvercloudhealth.com/signup/> We are also having great success with our new Psychological therapy trainee service which has been a hit with patients.

Our Social Prescribing team continue to help some of our most vulnerable, lonely and isolated patients, whilst our Care Co-ordinators continue to roll out our Blood Pressure Monitoring @ Home programme. They are also looking at establishing a new monthly event for our patients who maybe experiencing loneliness, or who just want to socialise a bit more called Nosh & Natter, an evolution of a project initially started at St Wulfstan Surgery. This project will give patients the chance to regularly meet over lunch to socialise and help build new and supportive networks.

Our Health & Wellbeing team are doing great work, and are soon to launch a new Weight Management service, which will take a more holistic approach to weight management and may also include new digital exercise tools, so watch this space.

And our Clinical Pharmacists continue to work to improve the safety of our prescribing - they have been doing great work on helping our Network meet the targets set by NHS England.

Please also feel free to visit our website wepcn.co.uk for more details and links to our social media accounts.

Wishing you all a very pleasant Summer!

Best Wishes,
Faris



Health & Wellbeing Team

We have a new member of staff who has joined us a Health Coach

Hello, my name is Carrie Elkington, Health and Wellbeing Coach, my background is Holistic Health and Wellbeing in the UK, I have also worked overseas.

Warwickshire East PCN have made me feel very welcome, thank you.

I am very much looking forward to working with the Wellbeing team to include clinical pharmacists, social prescribers, care coordinators, first contact practitioner and Ludmila our existing Health Coach.

I am looking forward to learning EXI, (exercise prescription) for patients with its intention to marry alongside weight management and feel joyful about engaging with patients on a one to one basis, and supporting them from where they are now, to where they would like to be with their health/wellbeing.

I am encouraged for the future of East Warwickshire Primary Care Network.



Health Coaching News + Case Study

We've been keeping busy with referrals for Health Coaching with many patients looking for help with weight management, anxiety, depression, chronic pain, chronic fatigue, high blood pressure and other health problems. The referrals have been increasing in numbers and we are pleased to say we now have two coaches working for the East PCN. Carrie Elkington is the new Health Coach who started with us in April and she will be seeing her first patients in June.

Health Coaching has been valued by patients across the PCN and we have many success stories to share. This month, we've prepared a case study to briefly describe some practical aspects of the work we do. Our case study is from a patient registered with Kineton Surgery. She was referred whilst dealing with much stress from an ongoing divorce process, difficulties to sleep and lack of energy aggravated by long-covid.

This patient completed 6 coaching sessions with Ludmila over a period of 6 months (first session on 22nd November 2021 and last session on 23rd May 2022). From the first session, she implemented sleep hygiene techniques and engaged with the understanding of how crucial a good night of sleep was for her, especially under the difficult circumstances she found herself. She was very receptive to the explanations around the mechanisms interlinking psychological stress, sleep and physical symptoms and she understood how lack of good sleep was impacting her health. She realised she could make a number of changes to improve her chances to sleep better and she observed the positive impact her actions had on her energy levels. The coach talked about exercise and the importance of pacing, especially when mental stress meant an extra drain on energy reserves. They also discussed the relationship between sleep and immune function and the patient was inspired to learn how lifestyle interventions impact health systemically. Despite her ongoing challenges with stress and life circumstances, which are likely to continue for the time being, she felt much improvement in her ability to remain strong and resilient. The discussions from the sessions and the practical experience gained with the lifestyle changes gave the patient something positive to focus and work on whilst facing a situation outside her control. She gained confidence in working with her body to improve her ability to withstand challenges without a decline in health. The Patient Self-Reported Scores on the ONS4 Score questionnaire from before and after her block of coaching sessions are provided below:

ONS4 Score - Validated Questionnaire for Evaluation of Patient Self-Measured Outcomes

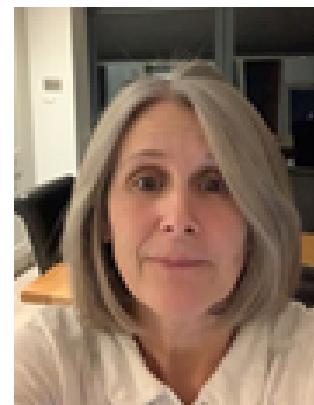
<u>Questions</u>	<u>Score at beginning of program</u>	<u>Score at end of program</u>
1. How is your overall life satisfaction?	6	8
2. Do you have a feeling of worthwhile?	7	9
3. How happy did you feel yesterday?	6	8
4. How anxious did you feel yesterday?	4	3

There are many more inspiring stories unfolding through the process of health coaching. Referrals are welcome from all health professionals as well as self-referrals from patients themselves. As always, the main criteria for referral to coaching sessions is patient interest in getting involved with the improvement of their health through lifestyle changes they can implement independently with the guidance of a Health Coach.



Social Prescribing Team

Meet our newest member of the team



Hello..... My name is Mandy Brophy and I am really pleased to be a part of the Warwickshire East PCN.

I joined as a Social Prescribing Link Worker in February and work with an already well established team.

For many years I worked for a high street bank and then joined ACE (Adoption Central England) where I supported social workers and prospective adopters through the adoption process.

I wanted to put my all of my customer service skills and knowledge I have learnt over the years to support people in the community. Which is exactly what this job involves. I hope to grow our service by working closely with the local communities and continue to support patients with their own health and wellbeing.

Case Study from our lead Social Prescriber

History:

The patient was referred to Social Prescribing, following a structured medication review with one of the Clinical Pharmacists. She was feeling socially isolated and this was having a huge impact on her mental health. In addition, the patient has very poor mobility due to a chronic long term condition and this has led to her becoming severely overweight, eating unhealthily and finding herself in a vicious cycle. The patient quoted, she felt like a prisoner in her own home and could not see a way forward.

The patient moved to the area approximately two years ago, following the breakdown of her long term relationship and to be near her family. This has not turned out the way she had hoped and with the added pressures of Covid, she has found herself lonely and extremely isolated.

What we did:

I called the patient and she was happy to talk, we agreed on a home visit to enable the patient to feel more comfortable. During the visit we discussed at length the barriers and challenges she was facing and the impact of this. In addition, she is only in receipt of benefits, as her condition makes it impossible to work. With her limited income and complete loss of confidence, she could not see a way forward and felt completely stuck.

Through talking to the patient and listening carefully, we identified what was most important to her. The patient explained she could only walk a few steps, without experiencing extreme pain and breathlessness and need to stop and sit frequently. On a few occasions her neighbour had offered to take her out, but she could not get out of the car to walk and felt she was becoming a nuisance.

Previously, the patients had a second hand mobility scooter, but this no longer worked and it was unrepairable. We agreed I would apply to Warwickshire Health Charity to see if they would award a grant. The patient sent me links of what scooters she felt would be appropriate, based on use, her weight and storage. I then obtained two quotes from local suppliers ready to submit with the application. I agreed with the patient we would try another charity, if the application was a success.

Approximately three weeks later, much quicker than I had anticipated the email was received and the application was successful. The local supplier contacted the patient and arranged delivery and the scooter was delivered to the patient promptly in time for the May bank holiday and this is the result.

Patient feedback:

I have been around the whole of my estate which was good and I have been into town several times. There is a lovely walk through a grassy area before you get to the underpass, with a couple of benches etc, it's really pretty. It has been so nice just feeling free of the bungalow and enjoying being able to look. I can't thank you enough and I'm looking forward to the summer.

Outcome:

The patient has improved mental and physical wellbeing, she no longer feels socially isolated and her confidence has grown. The next steps are for the patient to join the Health and Wellbeing Coaches in group work, when this is available and to join an arts and craft club.



Clinical Pharmacy Team

Meet our new Pharmacy Technician

Hi everyone! My name is Kulwinder. I have come from a community pharmacy and hospital pharmacy background and I joined East PCN on 3rd May. I am so happy that I made the decision to work for this PCN, and that I have been accepted into this lovely, friendly team! Everyone has been very supportive and willing to help me with everything so I can settle in smoothly, and I'm greatly enjoying my new role. I have started working on Direct Enhanced Service (bp) and I really enjoy the project and am thoroughly looking forward to working on many more.



Pharmacist Mina

- I'm now into the supervision phase of my Independent Prescribing course which is due to finish in August.
- I continue to support Care Home and housebound patients and have built up some good relationships.
- **Case Study:** I was reviewing a patient taking Apixaban who also suffered with knee inflammation. Possible hospital admission was avoided as it turned out he was only taking his Apixaban once a day which does not confer full stroke protection, but also taking high doses of turmeric (to help with knee pain) and milk thistle (for 'liver cleansing') which, he bought over the counter. Turmeric in high doses can have an anti-platelet effect which can pre-dispose to increased bleeding in patients on direct acting anticoagulants (DOACs) and milk thistle can interfere with the hepatic clearance of DOACs resulting in increased anticoagulation. These issues were discussed between GP, myself and the patient. A shared care decision was reached where the patient understood that effective stroke prevention is achieved when he takes his Apixaban dose twice a day and that the OTC supplements were interacting with Apixaban to adversely increase bleeding risk, so he stopped these.
- My case studies visiting housebound frail patients have highlighted patient safety and well-being concerns. One example is: Dr Viswa and I were reviewing a patient in the community where we found excess medicines hoarded in cupboards and particularly worrying, many controlled drug patch boxes. We were able to sort through the medicines and ensure the patient was on the correct doses. We also made a plan to visit monthly to ensure that medications were not over ordered again. Through shared care decision making, we were able to encourage the patient to reduce her morphine dose, which was in excess of 180mg daily, to a safer level. There is a tapering plan in place. In this instance we also asked for health and well-being support from Ludmila for this patient. This has been so helpful in supporting this weaning process and much appreciated by the patient. A great example of the ARRS team working together in a multidisciplinary way to ensure patient health, safety and well-being.

Pharmacist Hitesh

- I have passed my independent prescribing course, just awaiting formal accreditation and annotation on the register.
- Case study - We avoided a repeated hospital admission, patient recently went in with INR >6, discharged on new warfarin dose and various medications were stopped. Home visit, post discharge review, patient consuming heavy amounts of grapefruit causing her INR to raise, this was not picked up in hospital, so I intervened and explained. I also added previously stopped medications back on. The patient required glyceryl trinitrate sublingual spray, this improves blood flow to the heart as the patient has Coronary Heart Disease and takes paracetamol for pain. Later we upped this to maximum dose and stopped her morphine as a trial. So as a result of this we avoided hospital admission.



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