



STAY CONNECTED

THE OFFICIAL NEWSLETTER OF

designated
medical

Hello and welcome to the August edition of our newsletter.

We hope you are enjoying the summer and finding some time to relax and enjoy the outdoors with your family and friends.

This month we discuss the opportunities that exist outside the NHS for those looking for alternative healthcare careers. Originally written for Independent Practitioner Today, Jane Braithwaite looks at data that came from the BMA report earlier this summer. It said: 'Thousands of exhausted doctors in the UK have told the BMA they are considering leaving the NHS in the next year, as many continue to battle stress and burnout without adequate respite from the exhaustion caused by the demands of the pandemic.' Responses came from over 4,000 doctors.

We also look at some of the reasons why doctors and nurses are flocking to Instagram, finding new ways to reach and connect with their patients. If it's something you've been considering as part of your marketing we encourage you to read the full article on our insights blog.

If there is anything we can help you with to lighten the load across PA, Accountancy, Marketing, HR & Recruitment, then please don't hesitate to reach out.

Best wishes

Designated Medical Team

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CLIENT SPOTLIGHT: DR RACHEL BYNG-MADDICK

CONSULTANT RHEUMATOLOGIST

MB BS BSC PHD MRCP (RHEUM) .

Dr Rachel Byng-Maddick is an honorary consultant Rheumatologist who treats private patients at 77 Wimpole Street and The Lister Hospital, she also works from Guy's and St Thomas' Hospital and the Cromwell hospital as an NHS consultant.

Dr Byng-Maddick has a specialist interest in rheumatoid arthritis, psoriatic arthritis, ankylosing spondylitis, gout, osteoarthritis, osteoporosis, soft tissue rheumatology and chronic pain syndrome including fibromyalgia.

She qualified in medicine from Imperial College London in 2004, with a distinction in clinical practice. She completed her specialist training in rheumatology and general internal medicine in 2017, which included working at University College London Hospital and Imperial College Healthcare NHS Trust. During this time, she completed a PhD at University College London.

As well as her busy schedule at 77 Wimpole Street and Guy's and St Thomas, Dr Byng-Maddick has an active teaching role at King's College London, as the post and undergraduate lead for education. She regularly lectures to undergraduate and postgraduate students. She also supervises and mentors junior doctors at all stages of their training within the Guy's and St Thomas' Hospital.

In 2011, Dr Byng-Maddick was awarded a clinical research fellowship by Arthritis Research UK. Following this, she completed her PhD at University College London in the study of infection during treatment for rheumatoid arthritis. She continues to recruit patients to take part in clinical trials of emerging and novel therapies for inflammatory arthritis at Guy's and St Thomas' Hospital. She has also published numerous peer-reviewed papers and book chapters on her area of research and expertise.

Dr Byng-Maddick's special interest areas are:

- inflammatory arthritis (including rheumatoid arthritis, psoriatic arthritis, ankylosing spondylitis, and seronegative spondyloarthropathies)
- crystal arthritis (including gout)
- osteoarthritis
- connective tissue disease
- osteoporosis
- soft tissue rheumatology
- chronic pain syndrome including Fibromyalgia.

Please feel free to contact Rachel to discuss her practice in more detail. She would welcome the opportunity to work with other consultants in the Designated Medical community and to support your patients when appropriate.

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OPPORTUNITIES EXIST OUTSIDE THE NHS

Article written by Jane Braithwaite and
originally posted on Independent Practitioner Today

The last year has been a struggle for everyone in some respect, but for those working in the NHS the pressure of dealing with Covid-19 has been immense.

We all vividly remember the battle to provide everyone in the health service with adequate PPE, so they felt some level of protection, closely followed by harrowing images of faces battered and bruised by long periods of wearing masks.

Those working in primary care had to adapt to deliver a Covid-safe environment for patients and transform the provision of most services using technology to provide virtual consultations.

As vaccines became available, GP practices and hospitals have worked something close to a miracle to ensure they can be administered throughout the population rapidly.

We have recently seen a new campaign entitled 'If I die, it will be your fault', launched by the Institute of General Practice Management to call for an end to abuse from patients following their latest report, which concludes that most GP receptionists face unprecedented levels of abuse at work. And now the same NHS staff face the challenge of dealing with long waiting lists of patients whose treatment has been delayed by Covid.



Worrying report

A report earlier this summer from the BMA delivers a stark and worrying insight into how doctors are feeling right now, and the evidence is clear that many of them are unhappy and are considering leaving the NHS in the next year.

It said: 'Thousands of exhausted doctors in the UK have told the BMA they are considering leaving the NHS in the next year, as many continue to battle stress and burnout without adequate respite from the exhaustion caused by the demands of the pandemic.'

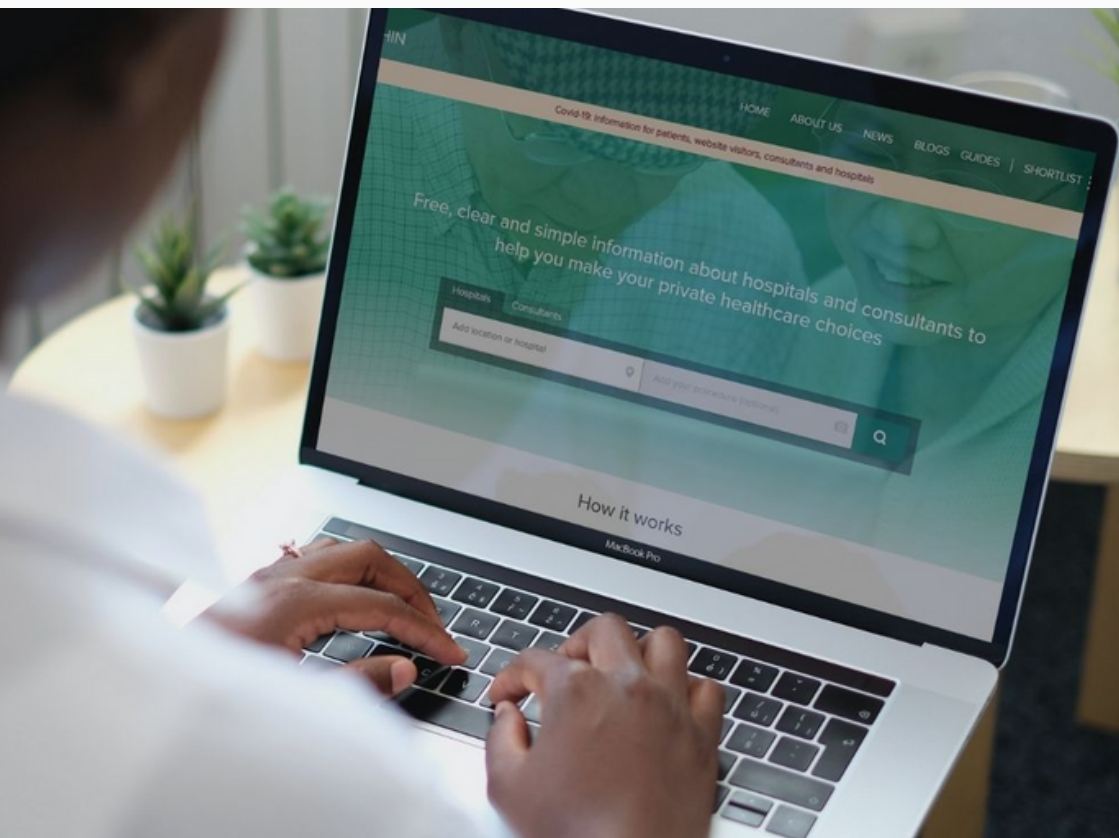
Responses came from over 4,000 doctors and 31% of them stated they are more likely to take early retirement, which has more than doubled since the survey was done 12 months ago. Half of the respondents said they are more likely to work fewer hours and 25% more likely to take a career break.

The survey also suggests a strong desire by many to continue to work, but in a different environment. Twenty per cent of respondents are more likely to leave the NHS for another career, with 17% considering working in another country and 14% more likely to work as a locum.

[Read more>](#)



COMPLETING YOUR PHIN PROFILE – A STEP BY STEP GUIDE



Last month we posted an article in relation to PHIN, and the importance of having a profile and keeping it up to date. We sat down with Jonathan Evans Communications and External Affairs Manager, Private Healthcare Information Network (PHIN), to ask him why private practitioners should be part of their network.

For those of you who may not be familiar with PHIN, it is an independent, government-mandated source of information about private healthcare. The principle behind the network is to 'empower patients to make better-informed choices when choosing private treatment.'

If you have not yet read our first article 'Is your PHIN profile accurate' we recommend doing so before continuing with this article.

When we posted the article we received many messages about the set-up process so thought it would be worth creating a follow up to take you through it step-by-step.

The CMA Order 2014 requires private healthcare facilities in the UK to submit private activity data to PHIN. Consultants are invited to review and verify the data submitted by facilities about their practice via the PHIN Consultant Portal.

Following some helpful feedback from consultants, PHIN has made some changes to the Portal, making the login journey easier. To access the new Portal you will need to activate your account, even if you have logged in before. An email will be sent to your GMC registered email address inviting you to activate your Portal account.

[To read more and follow the step by step guide>](#)

Our team at Designated Medical are available to support you with delivering the PHIN criteria. Please don't hesitate to get in contact with your Medical PA or Designated team to find out more:
abi@designatedgroup.com

HOW DOCTORS ARE USING INSTAGRAM TO REACH NEW PATIENTS.

You've probably heard of celebrity doctors such as Dr Ranj (@dranj - 250,000 followers) and Dr Philippa Kaye (@drphilippakaye - 12.6k followers) using their Instagram accounts to build their own profiles. They're also raising awareness around various health and wellbeing issues, but the number of medical professionals across private practice and the NHS is rising significantly. No doubt this will have been in part due to medical professionals sharing heart-warming content during the height of the pandemic. The shareability of medical-related content had never been higher and many doctors found their voice online.

The creative content platform has over 1 billion monthly active users according to Statista. Finding content that's relevant to you can be easier than on any other social platform through features like hashtags, the ability to follow hashtag specific streams, as well as smart content that is shown to you via the explore section.

Doctors and medical professionals on Instagram have given access to the healthcare industry like never before, patients are able to get to know the person behind the scrubs and they are liking what they see.



What should a private practitioner be sharing on Instagram and how much is too much?

How you build your brand on Instagram should sit comfortably with the rest of your marketing materials. You should consider your Instagram feed an extension of your website. So if you use specific brand colours and fonts within your marketing, reflect these within the content that you share on your feed.

Some of the most popular features on Instagram at the moment are Reels and Stories. This content doesn't have to be so perfect and is also where you can have a bit of fun with your audience. You can film it yourself on your phone, use a range of editing tools and techniques from within the platform to communicate what you're doing or how you're feeling.

Patient testimonials

There are more ways than before-and-afters to show off the success of your practice. With Instagram Stories and IGTV, it's easy to feature patient testimonials. You could facilitate a live discussion or feature a pre-recording of the patient talking about the experience. It could also be as simple as a video or image of the progress. **Read more>**



If you would like to discuss any of the content in this newsletter please contact Michelle Elliott who would be more than happy to discuss any ideas you may have: michelle.elliott@designatedgroup.com