



**HERSTMONCEUX INTEGRATIVE  
HEALTH CENTRE (HIHC)  
Newsletter No. 9 Winter 2020**



***The holly and the ivy  
When they are both full grown  
Of all trees that are in the wood  
The holly bears the crown***

In my garden I can already see the first signs of spring, not long after I have planted my last tulip bulbs. I have primrose and camellia flowers, and some holly berries for the birds. We are all thinking about Christmas and whether it will be sensible to see our families within the new guidelines from the government. Many of you will miss singing Christmas carols with your community this year but we can still sing carols and Christmas songs at home or together over Zoom. It seems strange that despite the slow pace of life in Lockdown 1, this year has flown by. Now we are in Lockdown 2 but it feels very different as the schools and more workplaces are still open. I hope we are all collectively taking this seriously and doing our best to safely socially distance.

While Wealden area remains one of the lowest Covid-19 incidence areas in the country, the rate is creeping up and we are seeing more positive results coming through from the labs. I hope this second lockdown will slow this down again.

News items are concentrating on the hopes for a successful Covid-19 vaccine. The vaccine research

labs have done an amazing job to develop effective vaccines so quickly, and the fact that there are several vaccines from different countries is encouraging. However it is early days; there is further safety testing to be done, and after that a huge logistical challenge to get the vaccine to the places and the people who need it. Our practice team is keeping a close eye on all the plans. It is likely that our most elderly patients and healthcare professionals will be offered the vaccine first. Because of the complicated storage conditions for the vaccines we do not know yet if we will be delivering the Covid-19 vaccines from our practice or the Village Hall, or whether we will cooperate with other local practices to use a central site. We will keep you informed as we find out more. In any case, only a few people are likely to have been vaccinated before Christmas, so we will all have to be patient and continue to follow the rules about what family members we can meet up with.

In the meantime, I would encourage anyone eligible to get a flu vaccine. Thank you to all of you who have already attended for this; you are protecting the health of yourselves and other members of your community. We have had several messages thanking our team for the efficiency of the flu clinics. I would like to thank all of our staff who have planned the sessions and worked at weekends in the clinics. We expect we will soon have supplies to vaccinate the 50-64 year old age group and will let you know as soon as we can arrange flu clinics for this group.

Let us hope for a peaceful Christmas and New Year, and that 2021 will see good news for the control of the Covid-19 pandemic.

**Best wishes to you all, Dr Katy Dodge.**



## CONTENTS

	Page no.
Staffing Update/Ear syringing	2
Musculoskeletal Services	3
Community Cardiology Service	4
New Website/Staff in the Spotlight	5
Herstmonceux Active	5
Digital Update	6
Christine Rossetti poem	7
Herstmonceux Community Land Trust	7
Did Not Attends	8
Life, Health & Leadership Course	8
Friends & Family Survey	9
Pam Ayers Christmas Poem	10
Vitality Villages Update	11
Chocolate Recipe	11
Seasonal Spice Soup recipe	12
Help while self-isolating/shielding	12
Who pays for your GPs & Practice	13

## STAFFING UPDATE

At Herstmonceux Surgery we continue to strive to ensure you have the best access to the most appropriate resource for your health needs.

As part of the NHS Primary Care Network service, we now have access to two new roles:

- Three Thursdays out of four we have a First Contact Practitioner (FCP), Anne-Marie. She is a trained physiotherapist and will see any of our registered patients for any physio needs - whether it be a new episode or something that has been going on some time. Please contact the surgery and ask to have an appointment with the first contact practitioner. (See [article on MSK Services, next page](#))
- As well as the FCP, we now also have access to two Social Prescribers. At the moment our named Social Prescriber is working remotely but a 2nd has been recruited for the Primary Care Network and will be based at the surgery on Fridays once their training has been completed. The Social Prescriber is there for non-medical needs and they will be able to direct you to further support in the community such as support groups, help with benefits etc. You do not have to be referred to

the Social Prescriber so please contact the surgery so that we can pass your details to them and they will contact you. Luke Greenwood will be based at the surgery on Fridays starting in December.

Referrals can come from any staff member associated with the surgery; e.g. reception, GP, frailty nurse. Lastly any patient over 50 or their carer is eligible.

## Management Team

There have also been changes within the management team and Mel Ingham has been promoted to Deputy Practice Manager. She has been instrumental in supporting the surgery through recent changes and is also the guru with any technical issues. Mel has increased her hours so she can support me in continuing to run the surgery in the best way, supporting both the clinical and the administration team.

***Nicola Hone, Practice Manager.***

## EAR SYRINGING

Unfortunately, the Ceilidh which was planned to raise funds for the microsuction unit had to be cancelled. However, the equipment was still purchased and delivered just before lockdown. Guidance then was that, during lockdown, we were unable to conduct ear microsuction so we had to put on hold training for Nurse Lizzie which resulted in a delay for our patients waiting for the procedure.

Lizzie is well underway with her training now and has been conducting supervised procedures. We do have a waiting list for the service so, if you have been advised you need to have ear microsuction, please contact the surgery and ask to go on the list. Thank you to everyone who has contributed enabling us to purchase the ear microsuction unit. It really does improve access for so many people.

## Musculoskeletal Services

Sussex Musculoskeletal (MSK) Partnership East is a unique local, not for profit, partnership bringing together primary care, specialist musculoskeletal (muscles, joints & bones) care, community, mental health and well-being experts to deliver the whole musculoskeletal service in East Sussex. We also care for rheumatology patients and those with chronic pain.

By bringing different specialisms together we can ensure that patients receive prompt and appropriate care that focuses on their individual needs and situations. Services are provided from community clinics across East Sussex where we bring together a network of local clinicians and support organisations to provide seamless, all-round care for our patients. Our clinicians include consultants, surgeons, physicians, physiotherapists, advanced practitioners and first contact practitioners.

### How do patients access our service?

Patients are referred to the service by their GP or another health practitioner and are assessed by our clinical team to determine the best care pathway for their individual needs and situation. Appointments and administration are managed by our team of patient care advisors who are responsible for keeping patients informed and supported while in our care.

### Patient Experience

Our vision is that 'Patients will be central to their SMSKPE journey by informing continuous improvement and evaluation of all clinical services' and our mission is to ensure our clinical services are highly valued by our patients, providing outstanding care by considering the patient voice in every decision that directly impacts patient care.

We have a 'Working Together Group' that consists of patients who have been through the SMSKPE system and wanted to get involved in helping us to

achieve our vision. They work hard to help us evaluate our processes and any new service provisions; a member of the group attends all our clinical improvement forums with the service providers in order that a patient voice is present throughout. Please contact us if you would be interested in offering your time to help improve MSK services.

### What's New!

We are excited to announce that we have made great progress with the integration of first contact practitioners (FCPs) across our region.

The FCP is a new clinical role evolving across the UK. It involves placing senior physiotherapists directly into GP Practices and to treat patients that come into the clinic with musculoskeletal problems. SMSKPE's clinical director has been working in collaboration with our existing MSK physiotherapy providers to develop this, and our FCPs are now embedded within many of our primary care networks (PCNs).

Patients contacting their GP surgery with a musculoskeletal problem may now find that they will be offered an appointment with an FCP instead of another clinician. **At Herstmonceux Health Centre your FCP is Anne-Marie; she is with the surgery three out of four Thursday mornings. (see introduction above).**

Following this initial assessment, Anne-Marie can refer a patient directly for further care/treatment and investigations if necessary.

Across East Sussex, by SMSKPE implementing an integrated approach with the Horder Centre and East Sussex Hospital Trusts, it will ensure that a patient's treatment can begin closer to home, is timelier and there will be consistency with their care across the whole MSK pathway.

**Rachel Slack, Patient Experience Lead,  
Sussex MSK Partnership East**

## National Recognition for The Community Cardiology Service



We are delighted to announce that The Community Cardiology Service has been shortlisted by the Health Services Journal (HSJ) for a prestigious national award –Community Provider of the Year. It was selected from hundreds of nominations by a judging panel of influential people in the healthcare community including Sir Bruce Keogh, former medical director of the NHS.

The Community Cardiology Service, which is based at HHHC, investigates patients who have a suspected heart condition. Usually this would mean having tests carried out in hospital, but the local service runs clinics in the community so that patients can be diagnosed and treated more quickly and closer to where they live.

During the Coronavirus pandemic, the service went a step further and brought heartcare right into patients' homes. Like GPs, the doctors conducted most of their consultations by telephone and video, but they still needed to carry out tests to monitor patients' heart activity. The safest way for these monitors to be fitted was for the service's Cardiographers to visit patients at home. This not only prevented long delays to diagnosis and treatment, but also reassured patients that they were being cared for.

During lockdown the Cardiographers made around 200 home calls. Wearing full PPE, they made a first visit to fit the monitor and then returned a few days later to collect it.

Patients were very positive about the home-visiting service and 100% of the responses from feedback questionnaires said that it was convenient and safe for them to have the heart monitor fitted at home.

One patient commented: "I was very pleased to have my heart monitor fitted at home, this was very helpful and safe. Thank you."

All patients agreed that it was reassuring to have a trained Cardiographer to fit the monitor and explain how it works.

"The fitting of the monitor by two very kind nurses went well, they explained everything to me and I have had no problems."

The Cardiographers have been welcomed into patients' homes and have often been told that they are the first people that the patient has seen face-to-face since lockdown began in March.

Lead Cardiographer Debbie McIvor said: "Patients find it reassuring when we arrive dressed in PPE and welcome us into their homes. Many of them have not seen or spoken directly to another person for weeks and they genuinely appreciate a trained health professional showing them how the monitor works and what it tells us about their heart health. I feel our service is much more than simply fitting a monitor."

Dr Matt Jackson, Cardiac GP, said: "Everyone has worked so hard to make sure that we kept the service up and running during this really challenging time and I'm extremely proud that our efforts have been recognised. We'll find out next March whether we win the title but being shortlisted is already a huge achievement!"



**The mobile heart monitor fitting team: Amy McIvor (left) and Debbie McIvor (Right)**

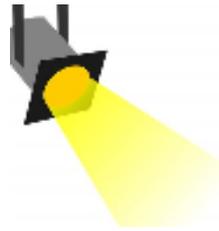
## NEW WEBSITE

As some of you have already noticed, we have updated our website. We wanted to make it easier for you to use, and also to start to offer a broad range of items related to health: from information about your medicines to lively online debates that you might be interested in. You will see that, although we are very proud of it, our website design is by no means perfect, it is a work in progress! We are changing bits of it, and adding new areas, depending on the feedback we get. Some areas are what we hope for in the future - there is a section called 'Gardening Club', because we know there are many green fingered people out there, and it is well established that gardening is good for you. If anyone would be so kind as to email us photos of their gardens - we can post them on the 'Gardening Club' page and see what develops from there.

Look out for seasonal decoration and even some 'healthy' Christmas stocking suggestions which will appear on the website in December.

Look out for seasonal decoration and even some 'healthy' Christmas stocking suggestions which will appear on the website in December.

## STAFF IN THE SPOTLIGHT



### Introducing: Bea Simmons Summariser at HIHC

**Most important self-care habit:** All year round sea swimming (no wet suit)

**Favourite music to dance in the kitchen to:** Kate Bush or Run DMC

**Favourite place in the UK:** The Peak District

**You may not know about me:** I have supported Nottingham Forest FC since I was a little girl living in Leicester and have a model of the mighty Stuart Pearce on the dashboard of my car!

**What you enjoy about working at HIHC:** Great team; throughout the lockdown we have never shut our doors. Even with no PPE the team carried on working as normal and the Clinical staff still saw patients.

### A NEW YOU ... FOR FREE!

All ages and abilities are welcome to join our qualified instructor and like-minded participants to develop your fitness levels. Drop in for a friendly chat with our instructor, Andrea, about health, fitness and wellbeing; and progress into beginner and intermediate 1 hour exercise classes in a fun, supportive and relaxed environment.

Also, come and have a chat about you and your community with your local village agent from Action in Rural Sussex, who will join us on our Friday morning session fortnightly.

**Where...**

Hellingly Community Hub,  
The Drive,  
Hellingly,  
BN27 4EP

James West Community Centre,  
Brunel Drive,  
Hailsham,  
BN27 3FY

**To Book Contact Us...**  
Emails: andreaattilone@gmail.com  
Steve@pro-eco.co.uk  
Call on: 07980 643827

Social media: Meszaros Andrea  
 andream\_fitness

In partnership with Active Sussex, Action in Rural Sussex and Sport England.

### A NEW YOU ... FOR FREE!



	Time	Venue	Cost?
Monday	5-6pm	Hellingly Community Hub	Free
Tuesday	5-6pm	Hellingly Community Hub	Free
	6:30-7:30pm	James West Centre	Donation
Thursday	6-7pm	Hellingly Community Hub	Free
Friday	10-12am	James West Centre	Free
	6:30-7:30pm	Hellingly Community Hub	Donation
Saturday	9-10am	James West Centre	Donation



The latest Covid-19 government measures are in place.

In partnership with Active Sussex, Action in Rural Sussex and Sport England.

**The above sessions are currently being carried out on Zoom. Ring 07980 643827 for further information.**

**The Thursday and Friday sessions are popular with the Herstmonceux 'team'.**

## HIHC Digital Updates



**Engage** allows you to contact us securely & safely about non-emergency conditions or admin queries.

To register please visit our website [www.hmxihc.co.uk](http://www.hmxihc.co.uk) and click on the Online Consultations link. Messages received by us by 11am will be responded to on the same day.

### **livi** Video GP access

Available Mon - Fri 7am - 10pm  
Sat - Sun & Bank Holidays 8am - 4pm

**LIVI** is a service we provide, in partnership with SDHC – our local GP Federation. LIVI gives you access to an NHS GP by video for medical advice, prescriptions and referrals. Download the LIVI app on your smartphone or tablet or visit <https://www.livi.co.uk/> for further information.

### Online Appointments

As you're aware, at the start of the pandemic we disabled the facility to book appointments



online. This was to allow us to triage patients with potential Covid-19. We will be bringing this facility back shortly.

To sign up for online access please download the NHS app onto your smartphone or tablet. Further details are available at

<https://www.nhsapp.service.nhs.uk/login>



### Electronic Prescription Service (EPS)

EPS is an electronic system which allows our clinicians to send your prescriptions electronically to a pharmacy of your choice - known as your "nominated pharmacy".

#### ***What does this mean for you?***

If you collect your repeat prescriptions from us, you will not have to visit us to pick up a paper prescription. Instead, we will send it electronically to the place you choose, saving you time.

#### ***Is EPS reliable, secure and confidential?***

Yes. Your electronic prescription will be seen by the same people in GP practices, pharmacies and NHS prescription payment and fraud agencies that see your paper prescription now.

#### ***How do I nominate a pharmacy?***

Decide which pharmacy you want your prescriptions to go to, this can be near your home or place or work, whichever is most convenient to you. Then just either let our admin team know and we'll update your records accordingly.

#### ***What if I don't want to nominate a pharmacy?***

The prescription will still be sent electronically, however the system will print a barcoded paper copy, known as a token, for you to present at your chosen pharmacy – this then allows the pharmacy to 'draw down' the electronic prescription, from the system, using the barcode

### Social Media

Find us on facebook @hmxihc

Tweet us @herstmonceuxDrs

Instagram us @hmxihc



## But Give Me Holly, Bold and Jolly

by Christina Rossetti (1830-1894)



A rose has thorns as well as honey,  
I'll not have her for love or money;

An iris grows so straight and fine  
That she shall be no friend of mine;

Snowdrops like the snow would chill me;  
Nightshade would caress and kill me;

Crocus like a spear would fright me;  
Dragon's-mouth might bark or bite me;

Convolvulus but blooms to die;  
A wind-flower suggests a sigh;

Love-lies-bleeding makes me sad;  
And poppy-juice would drive me mad:

**But give me holly, bold and jolly,  
Honest, prickly, shining holly;  
Pluck me holly leaf and berry  
For the day when I make merry.**

*Source: The Poetical Works of Christina Georgina Rossetti,  
with a Memoir and Notes by William Michael Rossetti (1904),  
page 441.*

## Herstmonceux Community Land Trust News update on homes at Strawberry Field, Windmill Hill.

Herstmonceux CLT is a Community Benefit Society established to acquire and own community assets for the benefit of the community of Herstmonceux. It is currently working on a project to **build homes for anyone with a local connection who finds difficulty in securing local accommodation.**

If you wish to register an interest in the homes, please contact Alan McInnes on 01323 833306 or Chris Cogdell on 01323 832847.

The CLT and its professional team have been busy over recent months although the nature of the tasks and the COVID-19 restrictions led us to delay this update to await developments.

The main activities have been the completion of an archaeological survey which entailed the digging of 9 by 30 metre trenches around the site in Strawberry Fields, Windmill Hill. Other than the indication of a drainage ditch, not one artifact of archaeological interest was found.

We have installed over 20 dormice habitat boxes on the site boundary and in the adjoining Allfree Wood and these will be monitored for 3 years. With this task done we can progress the removal of non-indigenous leylandii trees along the public footpath and southern boundaries to the site. This will take place over the next few months with the canopy being removed first, followed by the lower trunk and roots in the spring. Both boundaries will eventually be replanted.

The CLT will publish more detail in the coming weeks and we plan to start on site in spring of 2021 and completion in summer 2022.

We are always keen to expand the CLT membership so please get in touch if you would like to become a member and support us in this way. We would also like to extend membership of our CLT management committee, so if you feel that this is could be of interest to you and you would like to work with Herstmonceux CLT on this exciting project call Alan McInnes on 01323 833306.

If you wish to know more about Community Land Trust projects and Community Housing generally in East Sussex contact Tom Warder at Action in Rural Sussex, Community Housing Hub email [tom.warder@ruralsussex.org.uk](mailto:tom.warder@ruralsussex.org.uk)

Information on the Strawberry Field project may be viewed at [www.community21.org/herstmonceuxclt](http://www.community21.org/herstmonceuxclt)

Herstmonceux Integrative Health Centre													
2020													
excluding Cardiology, Flu Clinics, Bader Clinics & Nursing Home Visits, AAA													
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Percentage of DNA (inc multiple)	1.35%	1.24%	1.36%	0.45%	0.37%	0.41%	0.60%	0.33%	0.59%	0.47%			0.0717
DNA (inc multiple DNA)	65	60	66	22	18	20	29	16	29	23			348
Online bookings	4	2	4										10
Practice bookings	61	59	57	22	18	20	29	16	29	23			334
Male	26	19	30	7	9	10	15	11	18	11			156
Female	33	36	31	15	9	10	14	5	11	12			176

## DID NOT ATTENDS

The chart on the left shows the number of Did Not Attends by month and type since January 2020.

Please note that the number has fallen considerably since March, as telephone calls and video consultations are now the first point of contact.

## Life, Health & Leadership - Building a better, healthier NHS with Leaders with Disabilities

Date: Monday 7th December 2020, via Zoom

Session Time: 14:00 – 15:30

Join us and Dr Christine Rivers and Coach-Speaker-Author Rasheed Ogunlaru for inspiring and empowering masterclass and discussion.

An event targeted at people living with long term health conditions, mental health issues and disabilities\* and are considering or already undertaking leadership roles. Influenced by Disability History Month (18 November to 18 December) we want to help you think about your own history and what this means for your leadership future.

Have you wanted to take a leadership role but wondered how your health would cope with the demands? Are you currently in a leadership role managing your own boundaries to keep your health conditions at bay and wondering how this will impact your career? Would you like to spend some time reflecting on how your personal lived experience gives you the tools to help us build a culture of inclusion? If you answered yes to any of these questions this event is for you.

This event will consider our culture of ableism and how we as individuals and collectively can help unpick it. We will consider some of the evidence, national strategies and our personal stories to start a conversation around how we create a healthier NHS.

\* Are you wondering if your health conditions fit the inclusion criteria for this event? If it impacts the way you live and work, yes it does.

To book your place please check the What's On page on our practice website, or tap this into your search bar : <https://healtheducationyh.onlinesurveys.ac.uk/life-health-leadership-7-december-2020>

## AUGUST FRIENDS & FAMILY SURVEY

Many thanks as ever for your friends and family responses. We appreciate all feedback and would like to take this opportunity to respond to some of the specific comments.

Of 142 responses throughout August, 97% of the general feedback was excellent and patients would recommend us with comments such as: “change nothing, everything is good” and “with Covid restrictions I think the Centre as a whole is doing a great job in difficult circumstances and therefore inappropriate to make further comment”

Our team have worked extremely hard in very trying circumstances and these amazing comments really do boost us so thank you.

In addition, I would like to respond to the specific comments/suggestions received:

- **Combine 2 or three treatments in one visit to save appointment time and extra journey and time spent in surgery** – We have indeed been trying to do this and, where possible, we will undertake multiple treatments at one visit. If you think this may be preferable for you please do mention it to the receptionist.

- **Cooler temperature in the waiting room. Very hot while having to wear face coverings** – Throughout August we had some unprecedented weather and, with the addition of facemasks, this was difficult for all concerned. We did everything we could for patients and the team.

- **Please bring back or charge for ear syringing; personally I will pay for this service from nurses that are known and trusted** – Throughout COVID, NHS England have been providing guidance on what is and what isn't an essential service so that NHS services could focus on managing the COVID pandemic. Guidance was that ear syringing was not essential and, as we are an NHS service, we were unable to provide it. However, we will soon be delivering ear micro-suction for our patients where required.

- **Things that were requested were quicker; I have waited 4 weeks & am still waiting for a reply regarding a firearms/shotgun renewal form** – Please see the comment above – again renewal forms were not deemed as an essential service by NHS England.

- **Provide hand sanitiser / I think a hand sanitizer rather than hand washing would be easier for patients to use** – We did provide hand sanitiser but it was stolen from the waiting room within an hour so we now ask patients to wash their hands.

- **The hand dryer in the disabled toilet was not functioning. I don't know if this is deliberate to stop the circulation of the virus** - As we needed to keep doors open to limit touching of handles etc., the hand dryer was switched off as with the doors open the noise of the hand dryers was very intrusive to patients and to the reception team.

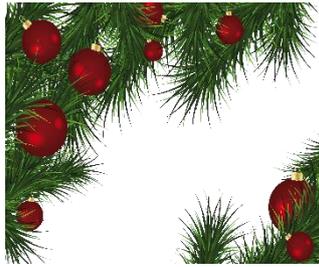
- **Get the IT systems working again** – We had a couple of power cuts in August as did other parts of Herstmonceux and these did interrupt the IT system. When the system did go down for some time, this was a Sussex Wide issue which unfortunately we had no control over. We did try to manage all expectations to the best of our ability but it proves very difficult dealing with any unplanned outage.

- **Restrict an area of the car park for patients (your primary function). The car park was nearly full and yet there were few people in the surgery!!** – The surgery has a large car park which is a bonus both to patients and staff as contractually we do not have to provide a car park. Running community services such as Cardiology, Podiatry, the memory assessment service and being a training practice does mean we have a lot of staff often on site. Staff have been asked to park as close to each other as possible to ensure maximum usage.

**Thank you again for all comments**

**Nicola Hone, Practice Manager**

## Goodwill To Men: Give Us Your Money



by Pam Ayres

It was Christmas Eve on a Friday, the shops was full of cheer,  
With tinsel in the windows and presents twice as dear.  
A thousand Father Christmases sat in their little huts,  
And folk was buying crackers and folk was buying nuts.

All up and down the country, before the light was snuffed,  
Turkeys they get murdered and cockerels they got stuffed,  
Christmas cakes got marzipanned and puddin's they got steamed  
Mothers they got desperate and tired kiddies screamed.

Hundredweight's of Christmas cards sent flying through the post,  
With first class postage stamps on those you had to flatter most.  
Within a million kitchens mince pies was being made,  
On everyone's radio 'White Christmas', it was played.



Out in the frozen countryside men crept round on their own,  
Hacking off the holly what other folks had grown,  
Mistletoe on willow trees was by a man wrenched clear,  
So he could kiss his neighbour's wife he'd fancied all the year.

And out upon the hillside where the Christmas trees had stood,  
All was completely barren but for little stumps of wood,  
The little trees that flourished all the year were there no more,  
But in a million houses dropped their needles on the floor.

And out of every cranny, cupboard, hiding place and nook,  
Little bikes and kiddies' trikes were secretively took,  
Yards of wrapping paper was rustled round about,  
And bikes were wheeled to bedrooms with the pedals sticking out.



Rolled up in Christmas paper the Action Men were tensed,  
All ready for the morning when their fighting life commenced,  
With tommy guns and daggers all clustered round about,  
'Peace on Earth - Goodwill to Men' the figures seemed to shout.

The church was standing empty, the pub was standing packed,  
There came a yell, 'Noel, Noel!' and glasses they got cracked.  
From up above the fireplace Christmas cards began to fall,  
And trodden on the floor, said: 'Merry Christmas, to you all.'





## VITALITY VILLAGE UPDATE

### December 2020

Vitality Villages Committee thanks everyone for their support and enthusiasm, despite the problems caused by Covid 19. We send our very best wishes to everyone for a peaceful Christmas and hope that we will all be able to meet up again early in 2021.

#### **Donations**

Vitality Villages is very grateful for the financial donations from Herstmonceux and Wartling Parish Councils which will provide funds for essential items for the organisation. In addition, we are delighted with a donation of seasoned oak from local residents. The wood will be used by the Men's Shed to build outdoor benches and many other items.

#### **Allotment**

If you are interested in having a small section of an allotment to try out your growing skills next year, please contact me to arrange a (socially distanced) visit so that you can have a look at the plot or maybe start preparation on the site.

**Janet McInnes - 01323 833306**

#### **Coffee Mornings and Vitality Villages Singers**

Hopefully, we will be able to restart these activities early in 2021.

Coffee Mornings - Sheila Charlton 01323 833673

Singers - Laura Heales 07940 275611

#### **Walking - Community Routes Programme**

The programme to improve the condition of the local footpath network is continuing and the details of the work on the next two footpaths is being finalised. One footpath is in Herstmonceux and starts from near to Herstmonceux Church and the

other is in Foul Mile, Cowbeech. It is hoped that some work can be undertaken in December after the end of the current lockdown.

**Steve Burke – 01323 833473**

#### **Men's Shed and Proposed Community Workshop**

Since July, Members had a productive return to the Men's Shed which operates from a workshop at Herstmonceux Castle. However, in line with the current Covid restrictions it is temporarily closed again until 3 December. The proposed Community Workshop for both men and women which will be held on Wednesday mornings has been postponed until the Covid rules change to allow more than six members to congregate.

Please contact Alan for more information about opening times or if you have any donations for the Men's Shed. **Alan McInnes - 01323 833306**



## CHOCOLATE RECIPE

50g Cocoa butter

25g Cocoa powder

25g honey

Place cocoa butter and honey in bain-marie (or in a glass bowl over a saucepan of simmering water). When they have melted, mix in the cocoa powder.

Pour the mixture into moulds or Tupperware and place in freezer – ta dah ..... delicious home-made chocolate.



## SEASONAL SPICE RECIPE

### Red Split Lentil, cauliflower and coriander soup, with pumpkin seeds



*Full of nutritious lentils, which are one of the richest dietary sources of fibre.*

**SERVES 4**

#### Ingredients

100g pumpkin seeds  
2 tsp rapeseed oil  
1 onion, finely sliced  
2 medium carrots, diced  
1½ tsp fresh ginger, finely grated  
3 cloves garlic, finely grated  
3 curry leaves  
1 head of cauliflower, cut into bite-size pieces

100 g red lentils  
1 tsp turmeric powder  
½ tsp ground cumin  
½ tsp ground coriander  
½ tsp chilli powder  
1 litre vegetable stock  
75 ml coconut milk, plus more to serve

To serve: Handful fresh coriander, one fresh red chilli and chapatis.

#### Method

1. Begin by toasting the pumpkin seeds in a large, dry frying pan set over a medium heat. When toasted, remove from pan, sprinkle with salt and set aside.
2. Heat a large saucepan or cast-iron pot over a medium heat and add the oil, onion and carrots. Cook for about 5 -10 minutes until the vegetable are tender. Add the ginger, garlic and curry leaves and cook for a further 2 -3 minutes until fragrant.
3. Add the cauliflower, lentils, turmeric, cumin, coriander, chilli powder and stock. Bring to the boil over a medium heat. Reduce heat to low, cover and simmer for 15 minutes or until the lentils and cauliflower are tender.
4. Add the coconut milk and blend with a hand blender until creamy and smooth.
5. Taste and adjust seasonings, then serve with an extra swirl of coconut milk, some fresh coriander, chopped red chilli and the toasted pumpkin seeds.

Chapatis on the side are also recommended to mop everything up.



The other day I held the door open for a clown...I thought it was a nice jester....

\*\*\*\*\*

Atheism is a non-prophet organisation.....

\*\*\*\*\*

I used to be addicted to soap, but I'm clean now....

## FUTURE NEWSLETTER ARTICLES

Please email to:

Lynn Bowman (Editor) at [plg.hmxihc@nhs.net](mailto:plg.hmxihc@nhs.net)

or

Lynda Primrose: [lyndaprimrose27@talktalk.net](mailto:lyndaprimrose27@talktalk.net)

## Do you need some help while self-isolating?

If you, or someone you know, needs a hand with collecting shopping or prescriptions, or just wants someone to talk to, our NHS Volunteer Responders are here to help.

Join the thousands of others throughout England who are already receiving support – even if it's just for a friendly chat.

Call **0808 196 3646** or visit [nhsvolunteerresponders.org.uk](http://nhsvolunteerresponders.org.uk)

Help is available if you have a medical condition which makes you vulnerable to COVID-19, especially if you are over 70. You also qualify if you are pregnant or have a disability.

Royal Voluntary Services is a registered charity 1013888 (England and Wales) & SC038924 (Sc)

## Who pays for your GPs and their Practice?

This is the first in a series of articles which we will run in the newsletter which may help to explain a bit more about how our NHS is funded and managed. This first one is about general practices – but what are general practices?

General practices are small to medium-sized businesses and are run and managed as a business. Usually it is the Practice Manager who has overall responsibility for managing the practice. In Herstonceux we are very lucky to have Nicola Hone as our Practice Manager.

The generalist services which general practices provide, are contracted by NHS Commissioners across a specific geographical or population area. The majority of General practices in England are run by a GP Partnership, usually involving two or more GPs, and have nurses and other clinical and non-clinical staff working together. In some cases they may be business partners, pooling resources such as buildings and staff, and together owning a stake in the practice business. GP Partners are jointly responsible for meeting the requirements set out in the contract for their practice and share the income it provides. At HHC both Dr John Simmons and Dr Katy Dodge are Partners.

The way general practices are contracted and funded is complex and very different from other parts of the health and care system. More will be explained in future articles. But fundamentally practices are paid on the basis of the number of patients on their list. This is obtained from the registered patient list held by NHS Digital on behalf of NHS England. In addition to this, GPs are paid for their performance under the Quality and Outcomes Framework (QOF).

### **What is a Salaried GP?**

Some GPs work as salaried employees of a practice without owning a share in the overall business (so they are not GP Partners). The British Medical Association (BMA) has a model salaried employment contract for these staff, and practices with a General Medical Services (GMS) contract are required to offer this contract or an equal

alternative to salaried GPs. Dr Sarah Anderson, Dr Andrew Sikorski and Dr Rachel Harrison are all salaried GPs.

### **Who commissions general practice?**

Responsibility for commissioning primary care services, including general practice, sits formally with NHS England. However, over time clinical commissioning groups (CCGs) have increasingly taken on full or partial delegation of these commissioning powers for primary care. This now means most CCGs have at least some responsibility for commissioning general practice in their local area, while keeping to national guidelines to ensure consistency.

### **What is in a GP contract?**

The core parts of a GP contract are:

- agree the geographical or population area the practice will cover
- require the practice to maintain a list of patients for the area and sets out who this list covers and under what circumstances a patient might be removed from it
- establish the essential medical services a general practice must provide to its patients
- set standards for premises and workforce and requirements for inspection and oversight
- set out expectations for public and patient involvement
- outline key policies including indemnity, complaints, liability, insurance, clinical governance and termination of the contract.

In addition to these core arrangements, a general practice contract also contains a number of optional agreements for services that a practice might enter into, usually in return for additional payment. These include the nationally negotiated Directed Enhanced Services (DES) that all commissioners of general practice must offer to their practices in their contract and the locally negotiated and set Locally Commissioned Services (LCS) that vary by area.

### **What services can practices be provided to contract?**

General practices are contracted to perform broadly five types of service for the NHS, although some are optional.

1. Essential services are mandatory for a practice to deliver to registered patients and temporary residents in its practice area. They include the identification and management of illnesses, providing health advice and referral to other services during core hours, which are 8.00am–6.30pm Monday to Friday, excluding bank holidays.

2. Out-of-hours services are those provided outside core working hours. A practice is assumed to provide these by default but can opt out. Where a practice opts out, as most practices do, commissioners have the responsibility for contracting a replacement service to cover the general practice area population.

3. Additional services include specific other clinical services that a practice is assumed to provide but can opt out of, for example, cervical screening services and minor surgery.

4. Enhanced services are nationally agreed services that holders of almost all GP contracts (GMS/PMS/APMS) can also provide if they choose to opt in. Services specified for 2020/21 include some vaccination programmes and a health check scheme for people with learning disabilities.

5. Locally commissioned services are locally set services that practices can also opt in to. Unlike other GP services, these might also be commissioned by non-NHS organisations such as local authority public health departments. Examples include services for people who are sleeping rough or mental health support programmes.

**Herstmonceux Integrative Health Centre is proud of its commitment to also providing holistic integrative care currently not in the GMS contract.**

#### ***What do GPs spend their money on?***

- Paying its workforce, including salaried GPs, nurses, health care assistants and administrative staff. These staff are paid directly by the GP practice and NOT by the NHS.
- Partners pay themselves from the money that remains after all other expenditure has been accounted for. They are also liable for any losses made by the practice.
- Office costs and IT.

- Clinical consumables.
- Building costs, including rent.
- Interest and depreciation.

#### ***How does the money flow?***

The funding a general practice receives depends on a complex mix of different income streams. Much of a practice's income comes from its core contract agreements – meeting mandatory requirements, running essential services and operating additional and out-of-hours services where they have been agreed. This is known as the global sum payment.

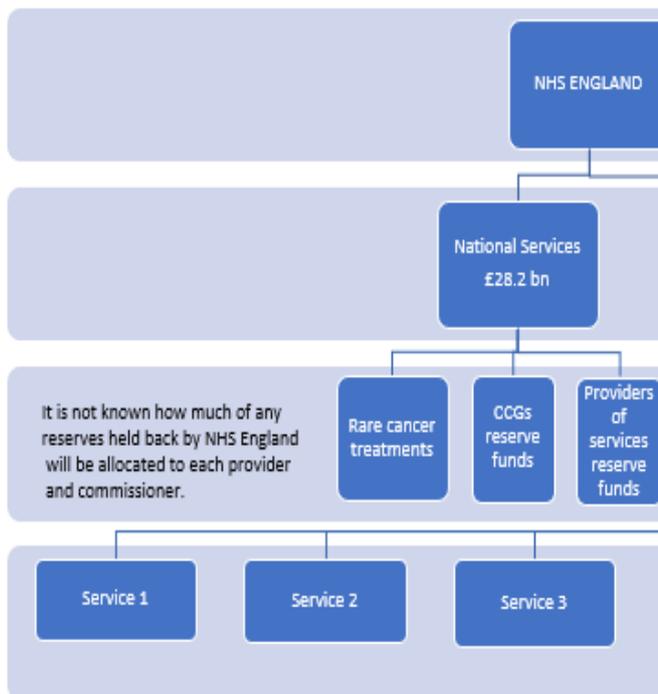
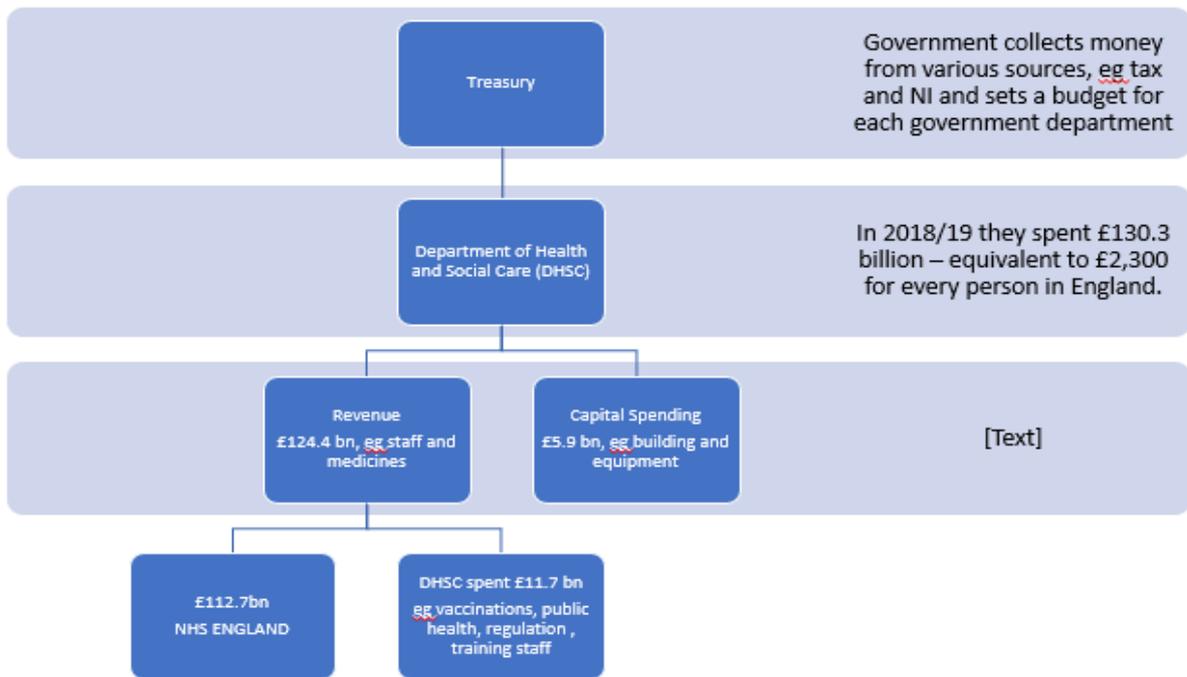
However, a sizeable amount of a typical practice's income comes from other NHS sources such as the Quality and Outcomes Framework scheme or payments for providing enhanced services. Practices may also top up their NHS funding with fees for limited private services, such as sick certifications and travel prescribing. Most practice income is paid to the general practice rather than individual GPs.

#### ***What does this all mean?***

GP partners are not just clinicians but also small business owners and employers. This comes with a number of challenges; for example, the need to manage and optimise complicated income streams and personal liability for financial risks. It also means partners have a strong vested interest in maintaining and developing their practice.

Historically, the major levers for setting national or local priorities and implementing service improvements across general practice have been contractual; for example, the Quality and Outcomes Framework, rather than based on national guidance. This is still the case, although rapid transformation in the services GPs are providing in response to Covid-19 is challenging this assumption.

**See funding flow charts on the next page.**



The government's spending plans can be changed up or down in-year, for example, be spent on capital.  
it is very hard for local areas to know at the start of the year on 1<sup>st</sup> April exactly how to plan and improve services.

