

Members of the PPG and staff were pleased to attend a meeting at the Newick Surgery in October 24 where they saw various useful presentations from both within and outside the practice.

The PPG felt it was important to share this information with all patients of the practice.

Trudy Ong, a Clinical Pharmacist based in the Newick practice outlined the role of the Practice Pharmacist, which encompasses a wide range of medication-related activities, including:

- Medication reviews
- Reviewing patients on higher risk drugs, including ensuring that the appropriate tests are booked.
- Safety issues – MHRA alerts and drug recalls.
- Reviewing and actioning clinic letters and discharge summaries that include medication changes to ensure these are adhered to.
- Chronic condition reviews – for example hypertension.
- Polypharmacy (the simultaneous use of multiple drugs to treat a single ailment or condition) and frailty reviews.
- The pharmacy team can also take queries and telephone calls.
- Pharmacists have clinics in much the same way as doctors and nurses, with bookable appointments, and patients can request an appointment with a Pharmacist. Reception will

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also prompt and offer service this where appropriate.

Trudy also outlined the services provided by Community Pharmacies such as Boots, Kampsons etc.

Community Pharmacists can help with minor ailments, prescribe the OCP (Oral contraceptives), and undertake BP checks.



They also offer the Pharmacy First service. This is funded by NHSE and enables Pharmacists to treat 7 common conditions:- acute otitis media, impetigo, infected insect bites, shingles, sinusitis, sore throat, uncomplicated UTI.

To support this, Pharmacists can view patients' Summary Care Record, and send a summary of their consultation to the surgery.

Dr Rajan (Senior Partner) outlined the 4 main screening programmes available in England for adults:

These are Bowel, Breast, Abdominal Aortic Aneurysm (AAA) and Cervical.

The bowel screening programme is for 54-74 year olds (soon to be expanded down to people aged 50). A

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home test kit is sent, that looks for faecal haemoglobin. The test is good at identifying a



negative result, but does have a higher level of false positives. If the test is positive, the patient is then referred for a colonoscopy. Bowel can be treated successfully if found early and thus this is a very good test to complete albeit it is understood that some patients may find it slightly distasteful.

The breast screening programme is available for women over 50, they will receive their first invite between the ages of 50 and 53. They are then invited every 3 years until the age of 71. After this age, they can self refer for screening.



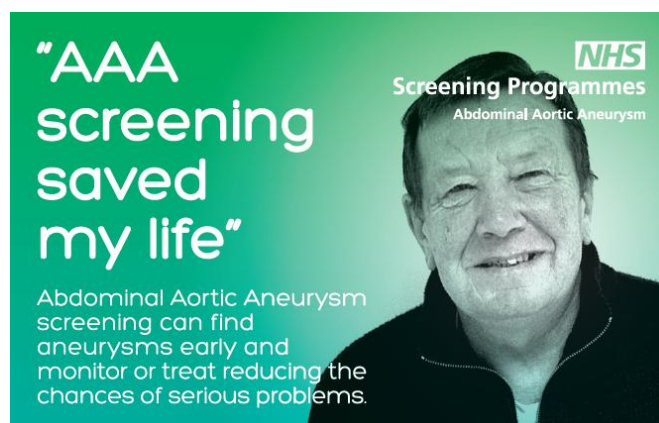
Trans individuals may not automatically be invited – so should see their GP for a referral. People who have been on feminising hormones for more than 2 years

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can also be screened, but again they will likely not be invited automatically.

AAA screening is for men aged 65 years. It is non-invasive and entails a simple ultrasound scan.



Cervical screening – women aged 25-64 are invited every 3 years. Other ages have different criteria for screening.



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We were grateful to Lorraine Turvey from One You East Sussex ([One You East Sussex | Free Health & Wellbeing Service](#)) who outlined their service, which is funded by Public Health England and commissioned locally by ESCC.

One You East Sussex offers several courses to help people live more healthily.

Eating healthily – a 12 week group-based course. This includes support from Health Coaches and is held in various venues – at Leisure Centres a pass to attend the centre is also included for the duration of the course.

Moving more – held at local leisure centres – free pass while in the programme.

Smoking less – 1:1 meetings with a health coach. An app is also available if you unable to attend the sessions. Stop smoking aids are provided for the duration of the course.

Drinking less – 1:1 with a health coach  
Man V Fat Football – this is a really popular, men-only, weekly session. There are 3 leagues across the county.

Nutritional advice is also included. There is access to the app for those that would like to do so.

NHS Health Checks – These are available every 5 years, for those over 40 and not on an anti-hypertensive, cholesterol-lowering medication, or are diabetic. The check includes BMI measurement, BP, cholesterol and glucose levels are checked and referred on if needed.

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The team do lots of outreach at events including taking their campervan ‘Colin’ which is kitted out to enable health checks to be undertaken inside. The team are always looking for more events to attend – and suggestions are happily received for new locations, such as village days, fetes, etc.

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We were also grateful to Kirstie Ingram a director of South Downs Health and Care GP Federation ([South Downs Health & Care \(sdhc.org.uk\)](#)) who explained their purpose and some of the work they do. Twenty Two general practices are part of the membership, which is a social enterprise (so profits go back to the membership/community). The Federation aims to support practices to deliver their services.

The Federation also has an innovative Out of Hours Care Home Service. This is a proactive outreach at the weekends to care homes, to offer GP advice and remote consultation for any residents they are concerned about. The aim is to decrease weekend admissions to A&E and contact with NHS 111, and to support end of life care requests to be complied with. There is the potential for this service to be extended to West Sussex.

Kirstie also outlined the Health and Wellbeing Hub that the Federation hosts – an online platform with lots of information to help people with their health and wellbeing. The hub hosts several podcasts on different aspects of wellbeing, health, and managing conditions.

We also had a presentation by Julie Acey our Practice Manager who explained about the Quality and Outcomes Framework (QOF), QOF is a voluntary annual reward and incentive programme for all GP

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practices in England, detailing practice achievement results. It is not about performance management but resourcing and rewarding good practice. The five domains are: Clinical, Public Health, Public Health – Additional Services, Public Health – Vaccination and Immunisation and Quality Improvement. Each domain consists of a set of achievement measures, known as indicators, against which practices score points according to their level of achievement. The 2023-24 QOF measured achievement against 76 indicators; practices scored points based on achievement against each indicator, up to a maximum of 635 points.

- Clinical: consists of 59 indicators across 21 clinical areas (e.g. chronic kidney disease, heart failure, hypertension) worth up to a maximum of 401 points.



- Public health: consists of five indicators (worth up to 85 points) across three clinical areas – blood pressure 45+, obesity 18+ and smoking 15+.

- Public health – additional services: consists of two indicators (worth up to 11 points) across one service area – cervical screening.
- Public health – vaccination and immunisation: consists of four indicators (worth up to 64 points) across one service area - vaccination and immunisation
- Quality improvement: consists of six indicators (worth up to 74 points) across two areas – optimising demand and capacity in general practice and workforce and wellbeing.

For accessibility purposes, all conditions/measures within public health, public health additional services and public health vaccination and immunisation are to be found under the one heading 'Public Health'.

The QOF gives an indication of the overall achievement of a practice through a points system. Practices aim to deliver high quality care across a range of areas for which they score points. The final payment is adjusted to take account of surgery workload, local demographics, and the prevalence of chronic conditions in the practice's local area.

NHS England has developed this online database to allow patients and the public easy access to the latest annual QOF data. NHS England is working to make information more relevant and accessible to patients and the public, regulators, health and social care professionals and policy makers, leading to improvements in knowledge and efficiency.

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