Acupuncture For NHS Staff During The Coronavirus Pandemic: A Unique Project

Peter Deadman, Soreh Levy and Cara Beckinsale

Abstract

In the early weeks of the COVID-19 lockdown in the UK, there was an explosion of community spirit, with all kinds of voluntary organisations springing up to help those in need. This was matched by an outpouring of affection for what may be Britain's greatest treasure – the free-at-point-of-delivery National Health Service (NHS), whose staff we applauded from our doorsteps every Thursday night. We understood what strain they were under and how we now all depended on NHS staff more than ever – not only the doctors but also the underpaid and overworked nurses, cleaners, porters and other frontline staff. Inspired by these two phenomena, a group of acupuncturists in Brighton and Hove in the South of England decided to offer acupuncture to NHS workers, which became the 'Acupuncture for NHS: Brighton & Hove' project (see www.acu4nhs. co.uk for more details). This article is an edited transcript of an interview between Peter Deadman (PD) and two founder practitioners of the project, Soreh Levy (SL) and Cara Beckinsale (CB).

Keywords

Acupuncture, COVID-19, coronavirus, pandemic, Chinese medicine, affordable acupuncture, multi-bed, community clinic.

PD: Tell us how this project unfolded.

SL: A call went out from Helpforce, an organisation that co-ordinates volunteering in the NHS, to see if acupuncture could be offered to NHS workers. Three hundred acupuncturists responded! Inevitably we had lots of meetings to discuss issues like marketing, safe practice, insurance and so on, and as a result many acupuncturists who were initially enthusiastic fell by the wayside. In the end the Brighton and Hove team was the only one that got an actual project underway. There were eight of us – six practitioners and two other acupuncturists offering IT and other background support. We all knew each other, either through our strong regional group [affiliated to the British Acupuncture Council] or through working together in a multi-bed team. The toughest thing was getting insurance cover as the British Acupuncture Council had suspended all acupuncturists' insurance in March and it took months of negotiations to get ourselves covered. **CB**: I am particularly interested in research and I thought, yes I'd like to help the NHS, but if I'm going to work for free – let's get something out of it for acupuncturists. So we collected patient data, using Acu-track - a research app specifically designed for acupuncturists to monitor treatment outcomes.

PD: When did you start talking about this project and what were the needs you identified ?

SL: That was in April. A friend of mine - a consultant working with NHS Trusts - told me there were high

levels of stress amongst NHS workers, especially frontline staff. There weren't high levels of COVID-19 in the area but staff were having to change their jobs and adapt to working online. And of course there was a lot of fear around the virus. Even the slightest extra pressure on the NHS was bound to cause problems because it's been so run down and underfunded for many years. Basically it wasn't ready for a pandemic. We were clapping the NHS alongside everybody else, but we wanted to do something more tangible.

CB: Acupuncturists are health workers too, and suddenly we weren't able to practise. We knew from our own experience that we had a lot to offer and felt we should step up to join with NHS staff and support them. I have two friends working in the field of mental health and they told me how bad things were and how much worse they expected them to become for staff as time went on.

PD: So what kind of patients come, what kind of problems do they have? And do they have to pay for treatment?

CB: For the first six weeks, whilst we had the generous use of two treatment rooms at no cost, we were able to offer free sessions. Now we now are paying a reduced room rent and in order to cover this and the cost of PPE,

all the treatments are low cost. And the offer was to all NHS staff not just frontline workers.

SL: When we created the Facebook page, it went viral. It was shared through various NHS Facebook pages and other social media. As soon as we opened we were fully booked

for several weeks. We had six practitioners and reception staff working in two clinic rooms.

PD: What kind of patients came?

SL: We had a complete mix. We had ICU doctors and

'I've had three treatments now and have benefited enormously physically, emotionally and mentally ... I am very grateful to all of you, especially my excellent practitioner.' nurses, A&E doctors, nurses, mental health nurses and quite a few general practitioners. The mental health workers (therapists, councillors and support staff) were the most stressed because they had to see all their patients online - some of

them were having to treat children as young as seven via Zoom. Some had had acupuncture before but the majority hadn't. They were incredibly grateful to have something offered to them.

PD: What range of problems did they come with?

SL: Well in our promotion we emphasised that acupuncture can be helpful for tension, pain, stress and anxiety and that's what most of them came with. Lots of stress, neck and shoulder pain, insomnia, depression and exhaustion.

CB: They knew we weren't offering treatment for longterm conditions that we see in private practice – like IBS, digestive disease, infertility and so on.

SL: The NHS patients were very grateful – we've had some lovely testimonials.

PD: I know you've been gathering data. Do you want to say something about that?

'I've become so passionate about the work the team do as it has helped me personally through this really stressful time.' CB: Acu-track is the research app we used. It offers a patient-reported outcomes tracking tool specifically for the acupuncture and TCM profession using MYMOP (Measure Yourself Medical

Outcome Profile). Patients fill in an initial form and then are reminded a fortnight later to fill it in again. Not everybody gets round to updating it every time but most people do a second one. We had input from the NHS that the ongoing issues after COVID are pain, mental health problems and diabetes so it made sense to focus on those. As of August 21st 2020, 86 per cent of 100 respondents reported overall improvement in their presenting condition (16 per cent very much improved, 44 per cent much improved, 26 per cent somewhat improved).

PD: Are you hoping that the positive data might lead on to a longer term arrangement to treat NHS staff?

SL: Yes as long as it can become paid work because treating for free isn't sustainable in the long term, however rewarding it is in other ways. We'd love it to carry on and we need to find a source of funding. NHS physiotherapists carry out 'dry needling' and so people aren't getting

'I am new to acupuncture but the problems I went for have seen incredible results [pain in shoulder, stress]. I would fully recommend the treatments they provide; it's a truly worthwhile investment in your health.'

a true experience of 'traditional acupuncture' and they're only able to receive it for a short period of time. We think that the more people are exposed to good acupuncture, the keener they will be to argue for its use within the NHS.

CB: When you talk to NHS staff they say 'this is bad enough but the knock-on effects of the virus are going to be horrendous, especially for our mental health.'

PD: Is there anything you feel you've learned as acupuncturists from working on this project.

SL: Because we are limited in the time we can spend in the room with patients because of COVID, I've been doing very simple treatments. We were joking at the beginning about how we would all just be doing Zusanli ST-36, Yintang M-HN-3 and a couple of ear points. We do more than that now but the treatments are still very simple, although we are getting great outcomes from the MYMOPs. And because of restrictions, we have to leave the patients alone for the twenty minutes the needles are in (with the practitioner still in reach) which I don't normally do in my own practice. But nobody seems to mind.

CB: I'm a Five Element trained practitioner and I've expanded my style of practice, adapting the treatment given by the practitioner who last saw the patient - and leaving the needles in, which we don't usually do in Five Element acupuncture. I find it a lot less tiring, as normally I'm with the patient for a whole hour.

PD: Do you consult with each other?

CB: With patients' consent, we share notes amongst the practitioners. It's all logged (data protected) on the computer ... you can see who treated them last time and what the treatment was. If I don't understand the treatment they gave, or think they might have missed something important, I'll talk to them about it. We discuss the best way forward. And we'll discuss different acupuncture points.

> SL: When two of us work in the same premises I really like it - having another person there – it's very supportive. We've been very lucky. We've treated lots of patients and had a lovely place to work in. It wouldn't have been that enjoyable for stressed NHS staff to get treatment

in their workplace - the hospital. But long term, when things settle down, it would be great to have acupuncture clinics in hospitals. Hopefully this project will have opened many eyes to the value of the treatment we offer and will lead to real co-operation and further integration with the NHS. And we are very appreciative of the *Journal of Chinese Medicine* funding all of our start-up costs which will really help us going forward over the next few months.

Postscript: Just before the JCM went to press, one of the NHS Trusts mentioned in this article announced that, based on the positive results from the project, they have allocated a budget for their staff to have further treatment. The authors are delighted with this outcome.

Soreh Levy graduated from the College of Integrated Chinese Medicine (CICM) and has been practising acupuncture in Brighton for 20 years. She set up the acupuncture charity 'Pathways To Health' and co-founded the first drop-in multi-bed acupuncture clinic in the country as part of her commitment to acupuncture being accessible for the whole community.

Cara Beckinsale is a traditional five element acupuncturist. She graduated from the Acupuncture Academy in 2015 with first class honours. Her main career focus is the integration of Western and Eastern medicines.

Peter Deadman is the founder of the *Journal of Chinese Medicine*.