

CLMC Bulletin 471 – 13/07/21

Easing of COVID restrictions, including face coverings in health and social care settings

Ahead of the Prime Minister's [announcement](#) to end the COVID-19 restrictions in England on 19 July, including mandatory wearing of face coverings and social distancing, the [BMA urged Government not to 'throw progress away' and to keep some Covid-safe measures](#), such as the requirement to wear a mask in enclosed public spaces.

CLMC has received many correspondence of concern from practices with regard to the entire relaxation of the restrictions and the impact this will have on practices. There have been concerns voiced about the removal of the requirement to wear a face covering in a health or social care setting. CLMC have raised this for discussion at a regional (ICS) and local (ICP) level as we are sure that this concern is shared by many and a strong consistent message is important; it is a position that all elements in health and social care can be united in supporting for the safety of patients and staff and for the resilience of the NHS and social care settings. Unfortunately, the next meeting does not take place until 16 July which will be tight for receiving regional communications.

The BMA have issued this [press release](#) in relation to face coverings being worn. Until such times as a national BMA message and the outcome of the ICS/ICP discussion are received, CLMC advise that practices strongly consider the health and safety of their patients and staff in considering how they wish to deliver their services; this includes continuation of face coverings as an appropriate policy. The BMA survey, press release and concerns raised by both professionals together with the increased anxiety, confusion and concerns of many patients, clearly indicate the desire for social distancing and wearing of face coverings to continue in health care settings to protect patients and staff.

It is important that practices undertake a risk assessment and appropriate triage of patients on an individual basis to ensure they are not placed at risk/disadvantaged when they decline to wear a face covering. Whilst observing this important caveat and recognising the removal of the legal requirement to wear a face covering, given the information provided, CLMC is supportive of practices who consider it appropriate as responsible employers, providers of high quality safe care to patients and from a public liability perspective, to continue with the current service delivery arrangements to reduce the spread of Coronavirus for the time being.

The BMA expressed serious concern that the government has decided to ease all mitigations, despite the Chief Medical Officer speaking about the alarming rise in cases, doubling of hospitalisations and certainty of more deaths. GPC are also concerned that there is no update on what restrictions should be in place in healthcare settings after this date and the BMA is seeking information for members to use going forward. As a result, the BMA will be producing guidance to support those working in practices, community healthcare and hospital settings and will issue this as soon as possible. Read the BMA statement on the response [here](#)

Delay in roll-out of patient data sharing programme (GDPR)

Following extensive lobbying by the BMA and RCGP, Government announced a delay to the rollout of GDPR, with full rollout now expected on 1 September rather than 1 July. BMA is now engaged in discussions with NHS Digital and other stakeholders to ensure no additional burden is placed on GPs to facilitate the implementation of this programme, and that patients are properly informed about it. They have been lobbying MPs on this issue.

In view of the extension to date of the first extraction, we will keep you informed on all next steps that practices will need to take as we approach this deadline. Read the full BMA statement about the announcement to delay [here](#)

Preparing for CQC remote inspections

Practices may find the information on this [CQC myth buster page](#) helpful when considering preparation for CQC inspections. The page contains a list of all the searches that CQC could run as part of their remote inspection process. Practices may wish to take time to prioritising review/audit of these areas to ensure they are prepared when their CQC remote inspection is undertaken.

New guidance for health and social care providers on CQC's monitoring approach

The CQC has published [new guidance for health and social care providers on their monitoring approach](#).

The BMA is seriously concerned about CQC's new approach to monitoring practices and have raised this with them directly. Practices will understandably be anxious about the implications, not least when they are struggling with record demand and significant workload pressures. Whilst CQC has a legal responsibility to inspect health care providers and ensure the safety of services to patients, it has been doing this throughout the pandemic through its Emergency Support Framework. GPC have called for a continuation of this ESF approach which is much more proportionate and have misgivings about a move towards greater inspection numbers linked to a risk stratification approach that is new and not widely trialled.

COVID-19 booster vaccine and flu vaccine programmes

Following the [guidance](#) published by JCVI last week about the COVID-19 booster programme, and the subsequent guidance from [NHSE/I guidance on COVID-19 vaccinations](#), GPC remain seriously concerned that this may be interpreted as a cap on general practice involvement in the flu vaccination campaign this winter or that practices will be limited in their ability to provide this to their patients as they would normally do because of overly restrictive arrangements set by NHSEI.

GP practices are already preparing for this winter's flu campaign, as they do every year, and will be keen to continue to play a pivotal role in protecting their patients against COVID-19 with booster jabs alongside this. GP practices have shown, for many years through the annual flu programme and recently through the COVID vaccination programme, that general practice through its place in the community is best placed to provide effective and efficient vaccination programmes to the population of England. Many patients and members of the public expect such a service to be widely available from their local GP practice. GPC believe delivering the flu vaccination and COVID-19 booster vaccination programme concomitantly through general practice is the best way forward and that most practices will want and expect to deliver them.

As Phase 3 begins, practices must be able to administer COVID booster jabs during the same appointment as flu vaccines within their own practice buildings if they wish – which has not always been possible for COVID vaccines, with many practices who wanted to continue to provide COVID-19 vaccination to their patients being prevented by NHSE/I from doing so. GPC believe patients want to be vaccinated at their local practice as they are used to for their flu jabs each year. In addition, working at practice level can reduce the bureaucracy for staff, limiting the impact on other GP services that are also important. It is also vital that existing resources are retained for additional staff who support the programme.

If we are to 'learn to live with' COVID-19 in the long-term and vaccinations are to become routine, practices need to be trusted and empowered to build on their expertise, proven track record and knowledge of their communities to lead the way in ensuring the public is protected.

GPC are, therefore, calling on the Government and NHSE/I to support practices and PCNs in delivering Phase 3, not just through appropriate funding, but also through the ongoing workforce support provided during phase 1 and 2, through managing workload (including the continued suspension of PCN service specifications), and improvements to IT systems.

PCSE pay and pension system update

GPC continue to work hard at challenging the considerable shortcomings of the new portal. They are aware of the many unacceptable issues being faced by practices and GPs but it is of critical importance that users log these with [PCSE](#) to ensure that they can be held accountable. GPC know that those interactions are also causing frustration and are applying pressure for improvements and greater transparency around their customer service work. We advise practices to keep a record of the issues they are raising with PCSE and the length of time taken to get resolutions.

Regular and ongoing meetings have led to a considerable number of 'fixes' to the system but there are many more outstanding. This will take time, but GPC are committed to ensuring a much improved service for the profession to use. NHSE/I and PCSE have assured that the current run of global sum payments is going well but we are keeping a particularly close eye on this.

The BMA's Pensions committee will soon be sending out a survey to GPs, to capture their experiences of using the new system. There will be more details on this next week, but we continue to encourage GPs to log on to the system to check the accuracy of their records. A similar survey will go to practices in the coming month. GPC have yet to receive a response to the [letter to NHSE/I setting out their concerns](#).

Patient survey results

The annual [GP patient survey](#) results show 83% of patients rating their overall experience of general practice as good, an increase on the previous year; this is testament to just how hard GPs and their teams have, and continue to, work in order to provide care to their patients and communities. To see an increase in overall patient satisfaction despite the really challenging year the entire NHS has faced - is incredibly positive. Such excellent feedback from patients about all members of the practice team will also lift morale amongst an exhausted workforce who have clearly gone the extra mile and beyond for their patients. These results also clearly show how out of touch with the real views of patients NHSE/I's damaging and demoralising letter earlier this year was.

GPs and their teams have been providing this good patient care all while playing a crucial role in the delivery of the COVID-19 vaccination programme and dealing with the consequences of a massive NHS care backlog, resulting in record appointment numbers being delivered. However, if we are to continue to meet the increasingly complex needs of our communities – delivering flu vaccine programmes, COVID-19 booster programmes, supporting growing numbers of patients with long COVID and managing an increasing number of appointments - then general practice needs more staff, more resources and better premises. It is the only way to avoid a potentially irreversible crisis in general practice and instead to build further on this feedback from patients.

Health and Care Bill

The Government has introduced the [Health and Care Bill](#), which will deliver significant health reforms in England. These include making ICSs (integrated Care Systems) statutory bodies, dissolving CCGs and transferring their responsibilities, staff and powers to ICSs, formally merging NHS England and NHS Improvement, removing Section 75 of the 2012 Health and Social Care Act and mandated competitive tendering, and conferring new powers over the NHS to the Secretary of State.

[Responding](#) to the publication, the BMA raised concern over the timing of the Bill given the huge pressures facing the health and care system as a result of the pandemic, as well as highlighting critical areas where they believe the Bill needs to be amended and strengthened to protect the NHS from unnecessary private sector involvement and establish a healthcare system that is collaborative and fit for the future.

The BMA will continue to lobby to ensure the Bill addresses concerns and that reform is in the best interests patients and doctors, and supports the NHS to be a publicly-funded provider to care for the health needs of our population. GPC have been working to shape the guidance that will underpin the Bill in practice, including through their [response](#) to NHSE's consultation on the new provider selection regime and feeding into the newly published ICS Design Framework. GPC have also been clear on the critical role LMCs should play in the new arrangements. They have produced [a member briefing on that framework](#), including their immediate reaction to it.

You can find out more about the GPC work around the Bill and key calls [here](#), and read their detailed analysis of the Bill [here](#).

Praise for the NHS and general practice

Responding to the announcement that [Her Majesty the Queen has awarded the George Cross to the NHS](#) to acknowledge its remarkable efforts throughout the pandemic and contribution over the last 73 years of service since the birth of the NHS, BMA council chair Dr Chaand Nagpaul said:

“This is a worthy honour for all NHS staff who have worked tirelessly throughout the pandemic to protect the health of the nation, providing care to hundreds of thousands suffering with illness and have also saved the lives of so many. The fight against Covid has been largely down to their enormous contribution, and with many putting their own health at risk as they cared of patients with a deadly and infectious illness, and with sadly several hundred losing their lives from the virus. It is only right that they should be recognised for their brave and dedicated commitment.” Read the full BMA statement [here](#)

NHSE/I has published a [video](#) marking the birthday of the NHS, to thank general practice and primary care teams for our phenomenal hard work and dedication. This follows the praise and acknowledgement of the significant activity and related workload pressures in general practice by NHSEI executive directors in a recent [NHSE/I board meeting](#).

COVID-19 vaccination programme

Acceleration of second doses for all cohorts

The government has published guidance advising that appointments of a second dose of the COVID-19 vaccine should be brought forward from 12 to eight weeks for the remaining people in all cohorts who have yet to receive their second dose, to ensure everyone has the strongest possible protection from the Delta variant of the virus at the earliest opportunity possible. Read the NHSE/I letter [here](#)

Vaccine data

Nearly [80 million doses of COVID-19 vaccines](#) have now been delivered in the UK, and 34 million people have also received their second dose. The BMA weekly COVID-19 data report is [here](#).

Education and training tariff guidance and prices for 2021 to 2022 financial year

The Department of Health and Social Care and Health Education England (HEE) have published the [Education and training tariff guidance and prices](#) for 2021 to 2022 financial year. The guidance provides further information in support of the education and training (ET) tariff payment process for the 2021 to 2022 financial year, with medical placements in GP practices listed as an exclusion (see section 5.12-514). Read more [here](#)

Review of the England Medical Performers List Regulations

The Department of Health and Social Care has commissioned NHSE/I to review the England Medical Performers List Regulations in the context of the wider regulatory landscape in operation across England. This review has the potential to identify where regulatory requirements can be streamlined and simplified, while maintaining the high professional standards that ensure patient safety.

This questionnaire aims to gather information from stakeholders about their views of the existing regulatory landscape for GPs in England and thoughts on how this landscape might be transformed. The feedback will contribute to the content of a series of focus group discussions and inform an options appraisal that will be shared with the DHSC during autumn 2021. Take the survey [here](#)

Calling all pharmacists: your chance to inform staff training in primary care

Health Education England and NHSE/I would like to hear from pharmacists about their experiences of remote triage, care navigation, online and video consultations in general practice. Your input will allow them to design effective training to support all primary care staff and trainees to confidently work with these approaches. If you would like to be interviewed, please contact Frances Brown at Nightingale Research, francesbrown@nightingaledesignresearch.com by 14 July. To find out more about the study visit <https://bit.ly/3dyYp19>. For any questions about the project contact the Digital First Primary Care team: england.digitalfirstprimarycare@nhs.net

One career, endless opportunities #Choose GP

Final applications for 2021 GP specialty training will open on 27 July – 18 August 2021. Please 'like' and follow the #Choose GP [Facebook](#) and [Instagram page](#) to keep up to date with news and views, and forward this information to any doctors who may be thinking about career options. The [GP National Recruitment Office](#) (GPNRO) website has more guidance and they have a number of GPs and trainees who can help with enquiries. Email Daryl gprecruitment@hee.nhs.uk to be put in touch.

ARM elections – GPC UK

[GPC UK](#) is the only body that represents all GPs in the UK. It takes an interest in all matters concerning the professional lives of GPs, in addition to negotiating national terms and conditions. They are currently seeking nominations from GP members to join the committee. Nominations close at 10am, 13 September. [Submit your nomination here](#)

To participate in the election, you must hold the relevant position for the specified seat and be a BMA member. You must also be a delegate of the [ARM \(annual representative meeting\)](#) to vote.

Specialist and Professional Committee elections

Nominations for the Specialist and Professional Committee elections are now open for the following committees:

- [Private Practice Committee \(PPC\)](#)
- [Professional Fees Committee \(PFC\)](#)
- [Committee of Medical Managers \(CMM\)](#)
- [Civil and Public Services Committee \(CPSC\)](#)
- [Armed Forces Committee \(AFC\)](#)

The deadline for nominations is 12pm Wednesday 7 July 2021. For more information about the roles please visit the committee webpages linked above.

To participate in any of the elections, you must hold the relevant position for the specified seat. You must also register for a [BMA web account](#) to use the online election system if you do not already have one.

To submit your nomination in any of the above elections please login to the BMA's [election system](#).

If you have any queries regarding the election process, please contact elections@bma.org.uk.

BMA COVID-19 guidance

Read the GPC [COVID-19 toolkit for GPs and practices](#), which provides comprehensive guidance for practices to manage contractual issues and service provision during the coronavirus pandemic. There is also guidance on the following topics:

- [Model terms of engagement for a GP providing temporary COVID-19 services](#)
- [Terms and conditions for sessional GPs](#)
- [Risk assessments](#)

You can access all the BMA guidance on COVID-19, including ethical guidance, [here](#)

Mental health and wellbeing – looking after you and your practice team

GP appraisal leads and GP tutors offer of telephone support conversations remain for any GP who feels they would like to talk through any aspect of their professional/personal life that has been affected by Covid. To organise a telephone support conversation, either with the appraisal lead or with a GP tutor, please contact the appraisal team, or email di.jelley@nhs.net

Crisis Coaching & Mentoring: [Coaching and mentoring sessions are available now](#) for all NHS and Health and Social Care leaders. Delivered by The Centre for Army Leadership and Meyler Campbell Coaching, these sessions are designed to support with the huge pressure on the ability of the NHS to deliver safe, high-quality care, sharpen focus on meeting the core needs of staff, ensuring wellbeing and sustained motivation to deal with this rapidly changing situation. The intervention will give leaders an understanding of crisis leadership that goes beyond what is necessary and focused on engagement and motivation through Covid19. Further information and how to register [see link here](#)

CLMC continue to offer [wellbeing services via Validium](#) for **ALL working in general practice within Tees** (including locums). We understand that a number of staff have accessed this confidential service and it has been well received.

The BMA now offers face-to-face counselling, in addition to their [existing wellbeing services](#). For the next six months, you can access one-off support or, after triage, a structured course of up to six face-to-face counselling sessions, provided by the BMA's existing accredited provider Health Assured, through a grant from the [CHSA](#). Call 0330 123 1245 today or [visit the website](#) for more information. Access the [BMA's COVID-19 wellbeing pages](#) and the [BMA wellbeing twitter page](#)

The BMA's [report on the mental health and wellbeing of the medical workforce](#) which sets out ten recommendations to be addressed to protect staff during the pandemic and in the future. The BMA continues to offer [wellbeing services and confidential 24/7 counselling and peer support for all doctors and medical students](#), as well as their partners and dependents, on 0330 123 1245. For hard copies of the [Wellbeing poster](#), please email wellbeingsupport@bma.org.uk

There is also a wealth of [NHSE provided support](#) available to you and your team including a **wellbeing support helpline**, a **24/7 text alternative**, **peer to peer, team and personal resilience support**, free **mindfulness apps** and the [#LookingAfterYouToo coaching offer](#).

NHSEI have recently developed a new [communications toolkit](#) and resources to help promote their offers to the workforce. The toolkit has an overview of each offer, including bulletin, email and social media copy, and links to some case studies and posters. You can also follow this link [Primary Care Coaching – Link to Assets](#) to a range of resources, including social media assets, a video, PDF case studies and posters, website and email banners.

GPC GP Bulletin

Read the GP bulletin [here](#).