

## CLMC Bulletin 449 – 02/02/21

### Contract agreement for 2021/22

As you will be aware, GPC secured a contract agreement for 2021/22 with NHSE/I. This contract package delivers significant additional funding, enabling above inflation rises to pay and covering expenses. They have made improvements to the vaccination and immunisation scheme that, it is hoped, will lead to increased levels of uptake. GPC have also secured additional funding for important areas in QOF and been able to make a significant expansion of the PCN workforce, all with 100% reimbursement and guaranteed funding, and greater flexibility for employment in London.

Importantly with no new service specifications to be introduced in April practices can continue to focus on their pandemic response, and this will be kept under review as the outcome of the pandemic becomes clearer. Above all there will be a continued focus on supporting practices particularly as we deliver the vital COVID vaccination programme, something general practice is doing so successfully.

See Richard Vautrey's (GPC Chair) presentation about the contract [here](#). The video and full details of the contract agreement are also available on the GPC [website](#).

### COVID-19 vaccination programme

The roll out of the COVID-19 vaccination programme continues at pace, with the inclusion of two new [cohorts](#) (people over 70 and those clinically extremely vulnerable to COVID-19). Vaccinating the first two groups (care home residents and staff, and those aged 80 and over and frontline health and care staff) will remain the priority, but vaccination sites with enough supply and capacity for vaccinating further people are allowed to offer vaccinations to the next 2 cohorts.

Following earlier issues with vaccine supply, we are being reassured that they are becoming more stable each week although some batches can still vary.

### Vaccination of healthcare workers

The BMA has been campaigning to ensure all healthcare workers are given the opportunity to be vaccinated as soon as possible. They are, therefore, pleased that NHSE/I has reiterated that vaccinating all healthcare staff against COVID-19 is an absolute and immediate priority. NHS staff do not require an NHS number or GP registration to receive a vaccination and should never be denied one on this basis, either in person when presenting for a vaccine, or through design of booking systems. If a member of staff does not have an NHS number, then employers should vaccinate now, record locally via a paper system and ensure that that the vaccination event is more formally documented later. NHSE/I is working towards a longer-term solution, but employers should not wait for this before vaccinating. NHSE/I has also written a [letter](#) encouraging frontline health and social care workers to get the COVID-19 vaccine as soon as possible.

### Vaccine wastage

GPC continue to have reports of some CCGs demanding that vaccines are thrown away rather than giving second doses or vaccinating other cohorts. GPC would like to reiterate that NHSE/I has made it clear that the top priority is that all vaccines be used and, therefore, must not be deliberately wasted. All sites should have reserve lists that they can use to make every effort to invite patients or healthcare professionals to ensure that they can make full use of any unused vaccines rather than have any go to waste. Read more about vaccine supply in the [BMA's advice webpage on healthcare worker vaccination](#) and report any concerns about this via the [feedback portal](#).

### Second doses

GPC have raised with NHSE/I the need for practice sites to be able to start planning for giving second doses by booking appointments. This requires confirmation of delivery schedules in March and April, particularly of the Pfizer vaccine. We hope NHSE/I will be able to confirm arrangements for this shortly. Practices should plan for 6 doses per vial for second dose, but where there is not enough for a 6<sup>th</sup> dose, NHSE/I will look to make an emergency delivery of smaller amounts of more vaccine to make up the difference.

### **Legal advice note commissioned by GPDF on Covid-19 vaccination programme**

Following a request by a number of LMCs the GPDF sought legal advice on the merits of any potential legal challenge to the decision of the UK Government to change its guidance on the Covid-19 vaccination programme. This generic [summary](#) of that advice is to assist LMCs their constituent GPs. It is no substitute for fact specific advice. We hope you find it helpful; you are free to use the Advice Note as you see fit, but must ensure that it is only used as a whole.

### **IT issues**

As a result of IT problems some vaccination sites have had to record patient information on paper rather than inputting it directly in to the Pinnacle system. GPC would, therefore, encourage practice sites to upload this information as soon as possible, which also needs to be done for payment purposes. This will also help NHSE/I to plan properly for the timing of the second dose delivery. Extra funding was made available to PCN groupings to bring in additional workforce until the end of January to ensure that all records for vaccination of priority cohorts are up to date and recorded properly in Pinnacle. PCN groupings will be eligible to claim up to £950 per week of funding support.

### **Transfer of vaccines**

NHSE/I has published guidance on [Mutual aid and the transfer of COVID-19 vaccines between Hospital Hubs, Vaccination Centres and Local Vaccination Services](#). Annex B of the document sets out that as long as the relevant guidance is followed, local commissioner should be offering a supportive role in facilitating the movement of the AstraZeneca vaccine within a PCN grouping and do not need to seek formal approval for moving the vaccine in line with the arrangements set out in the letter. It also advises that once moved, the vaccine should either be administered or immediately put in a refrigerator at a practice site within the PCN grouping, and ideally administered within 24 hours or as soon as practical over the following days.

### **Care homes**

NHSE/I have written a [letter thanking colleagues in adult care homes for the progress in delivering vaccinations and information about the next steps by 31 January](#). In order to be included in the February payment to the lead practice within your PCN Grouping, all activity relating to vaccinations administered between 14 December 2020 and 31 January 2021 needed to be recorded within the Outcomes for Health (Pinnacle) system no later than 23:59 on 31 January 2021. We understand that vaccinations that were not recorded by this deadline will be picked up in the next pay run.

NHSE/I has also published guidance on [Access to National Workforce Supply Routes for Primary Care Network \(PCN\) Groupings](#). All NHSE/I guidance for primary care about the COVID-19 vaccination programme is available [here](#)

The Royal College of Obstetricians and Gynaecologists (RCOG) and the Royal College of Medicine have published a [statement](#) responding to misinformation around COVID-19 vaccine and fertility. RCOG has also published [information and advice for pregnant women about the COVID-19 vaccine](#), including an updated Q&A section.

Read the GPC [guidance on the COVID-19 vaccination programme](#) which includes information about avoiding vaccine wastage, and other information about what is expected of practices support available to enable practices to prioritise vaccine delivery.

We were pleased to see the [joint letter](#) from Secretary of State Matt Hancock and Nadhim Zahawi, the minister with responsibility for the covid vaccination programme, recognising and praising the significant role GP practices have played in the successful roll-out of the vaccination programme. They wrote: "We are enormously impressed with how readily primary care teams have come forward to play such a vital role in the vaccination programme, under truly unique circumstances."

### **Updated PCN vaccine planning and progress tracking tool**

A new version of the [PCN vaccine planning and progress tracking tool](#) has been launched on the LVS workspace in Foundry. The updated version helps PCNs to plan their COVID-19 vaccination programmes for the AZ and Pfizer vaccines and users to calculate weekly vaccination capacity for each vaccine based on site and workforce scenarios. The tool also enables users to track progress with vaccination, including filters for different cohorts, delivery at each site against plan and progress with cohort coverage for PCNs, grouping population across different delivery methods (LVS, Hospital Hubs, Vaccination Centres). [A user guide is also available \(log in required\)](#).

### **Coronavirus vaccination figures**

Coronavirus vaccination figures are now produced on a daily basis. As of 27 January, approximately 7.45 million people in the UK had received their first dose of the Covid-19 vaccine, while 476,298 people had received their second dose.

[NHS England data](#) shows that a total of 79.7% of over 80s have had their first dose of the Covid-19 vaccine, an increase of 20% on the figures published last week. There remains quite a large regional variation in the proportion of over 80s vaccinated; only 65% of Londoners aged over 80 have received their first dose, compared to other regions where the proportions vary between 78.3% (South East) - 83.7% (North East). This data is reflective of last week's figures - the North East continues to have the highest proportion of over 80s vaccinated, although other regions appear to have caught up, for instance East of England which previously had the lowest proportion of over 80s vaccinated (along with London) across the regions but now the data shows that 79.9% of the over 80s have been vaccinated compared to 53% last week. Thank you to all practices that have made this possible.

Until now, weekly figures published by NHS England have contained information based on region and age group. Going forward, these figures will be supplemented by ethnicity and occupational data to understand vaccination uptake in high-risk groups (BAME, people living in deprived areas) in order to tackle health inequalities. Data according to site of administration, i.e. mass vaccination centre, hospitals hubs, GP practices are not yet published but we understand that in England over 70% of vaccinations are given by GP sites.

### **CQC activity in Primary Care**

Following the update on [CQC's regulatory approach](#) provided on 15 January, and the lobbying on this issue that GPC have been doing, CQC has written to all CCG primary care leads and NHSE/I regional directors confirming that it will only inspect GP practices in response to significant risk of harm and when it cannot seek assurances through other routes. If an inspection is necessary, it will carry out as much activity off-site as possible. Full details are available in this [letter](#).

### **New to Partnership Scheme**

The New to Partnership Scheme was launched in England in July 2020 (backdated to April 2020). So far about 400 applications have been approved and many more are being processed. NHSE/I has now finalised the S96 contract for GMS practices, which forms the agreement between the practice, the new partner and NHSE/I. This contract has been agreed with the BMA.

Contracts are now being sent out to applicants from GMS practices to sign and seek their partners' signatures, within 4 weeks. The funding will then be released to the practice to pass onto the new partner. Contracts for PMS practices are expected to follow shortly.

Thank you for bearing with GPC and NHSE while they get this right – we hope this development will now speed up the process and encourage even more new partners to apply for the scheme.

Read the GPC guide to applying for the [GP partnership scheme](#), which will help you navigate what can be a complicated application process.

### **Skilled worker/tier 2 status registrars**

We are aware that a number of international GP trainees who are due to complete their training in February are concerned about securing full time employment before their visa expires. This is because many GP practices do not hold sponsorship licences or are not actively recruiting.

NHS England and Improvement have asked that any impacted doctors contact [england.intrecruitment@nhs.net](mailto:england.intrecruitment@nhs.net) and they will put the registrar in touch with regional colleagues who may be able to assist.

From an immigration perspective, please direct individual BMA members to the [Immigration advice service](#) so they can get free basic legal advice on their case.

### **NHS Pension Scheme Access for ARRS staff**

There were potential issues with access to NHS pension scheme access for ARRS staff employed by GP Federations who might lose their APMS contract as a result of the Extended Access changes (and which cease, therefore, to be an Employing Authority under the NHS pension scheme).

The delay to the formal handover of the Extended Access arrangements to Primary Care Networks (PCNs) until April 2022 means this issue is probably less pressing for many GP Federations than it was a few weeks ago. Nevertheless, the provisions for GP Federations without a GMS/PMS/APMS contract to apply for temporary access to the NHS pensions scheme for its staff has now been extended until March 2023. That position has now been confirmed in the updated NHS BSA guidance on access to the NHS pension scheme for PCNs – see scenario 3 in [this document](#)

GPC will continue their work on a more permanent provision for this group of staff and will keep you updated.

### **GP appointment data**

The [GP Appointment data for December](#) has now been published. The data shows that there was a drop of just over 1.25 million appointments from November to December (from 25 million to 23,7 million) but that is a significantly smaller drop than for November – December 2019 (26.8 million to 23.5 million), and there was an increase of around 170,000 appointments in December 2020 compared to the previous year.

Waiting times also appear to have dropped compared to the same period in the previous year, with the number of appointments within 7 days up by 1.9 million in December 2020 compared to December 2019, and appointments over 8 days down by 1.76m.

This shows the incredible achievement of general practice with 100% of appointments in December 2020 as December 2019 in addition to launching and running the vaccination programme.

### **GP referrals into CPCS**

The PSNC (Pharmaceutical Services Negotiating Committee) has published an [animation](#) to explain how GP practices can refer patients with minor illnesses to local pharmacies, by using the referral pathway of the Community Pharmacist Consultation Service (CPCS), which is in the process of being rolled out to include GP referrals.

The CPCS enables the safe referral of patients from other parts of the NHS to community pharmacies and frees up other healthcare providers to provide more appointments for patients with more complex or higher acuity needs whilst improving access for those with lower acuity conditions.

Before the service can be rolled out in an area, there must be local discussions between the PCN, general practices and community pharmacies to agree how the referral process will operate – and practices are encouraged to begin those local conversations now. Read more on the [PSNC website](#)

### **Face to Face Vaccination Training Offer - North East and North Cumbria**

Northumbria University, Teesside University and the University of Cumbria are providing sessions for the face to face components of the vaccination minimum training requirements. The elements included are:

- Anaphylaxis
- Basic Life Support - Level 2
- IM Injections

Please note that these spaces are available to all hospital, primary care and mass vaccination hubs across North East and North Cumbria. Booking and Information is available on the below link which will continue to be updated as further dates are added:

<https://bookwhen.com/covidvaccinationtraining>

If you require any assistance or have any queries please do not hesitate to contact via [covid.vaccinationtraining@nhs.net](mailto:covid.vaccinationtraining@nhs.net).

### **Health & Wellbeing Coaches Workshop - NENC**

The Primary Care Training Hub are working in partnership with Regional NHSE/I Personal Care to explore supervision, training, development and support opportunities for Health & Wellbeing Coaches. We are keen to engage with Health & Wellbeing Coaches or any member of the team delivering health coaching to inform plans. An engagement workshop has been planned for 9<sup>th</sup> February 2021 3-4pm on Teams.

Could you please cascade this information as you see fit. Apologies if you have already received this information via another stakeholder. Further detail below:

**Join our Journey**  
North East and North Cumbria

**PERSONALISED CARE**

**NHS**

**Join our Journey**  
North East and North Cumbria

## Workshop for Health & Wellbeing Coaches working in North East & North Cumbria

9<sup>th</sup> Feb 2021 3-4pm on-line Teams meeting

**Calling all Health & wellbeing coaches working in North East and North Cumbria, we would like to invite you to a workshop to explore;**

- how Health & Wellbeing Coaches can best be supported with supervision and training
- Information on workforce development opportunities that are being planned locally for health coaching
- the 3 personalised care roles in PCNs and how the 3 roles work together
- the potential options for peer support for H&WB coaches

To book a place please e-mail [ruth.twiggins@nhs.net](mailto:ruth.twiggins@nhs.net) with your name, e-mail, role and place of work

NHS England and NHS Improvement

Practitioner Person

To apply for a place on this workshop please complete your details in the grid below and send to [ruth.twiggins@nhs.net](mailto:ruth.twiggins@nhs.net)

Name	e-mail	Role	Place of work

### **GP Retention Scheme Webinar**

A [webinar on the GP Retention Scheme](#) will be taking place on Thursday 25 February from 7pm – 8.15pm. GPC will be looking at how the GP Retention Scheme works for both employees and employers, tackling some of the common misconceptions about the scheme and hearing from GPs who are currently on the scheme. There will a Q&A session at the end and you can submit any questions in advance to [cscott@bma.org.uk](mailto:cscott@bma.org.uk). A full list of speakers will be confirmed shortly. Click [here](#) to sign up

### **Healthwatch South Tees STAR Awards 2021**

Following on from the success of last year's Healthwatch South Tees (HWST) STAR (South Tees Awards of Recognition) Awards, HWST are delighted to announce that they are now opening up the nominations for their 2021 STAR Awards. HWST received such high-quality nominations last year, showcasing the amazing work carried out across South Tees by a diverse range of individuals, teams and services; they look forward to celebrating more STARS this year!

Background to the STAR Awards:

Local community voice is key to the work of Healthwatch and improving health and social care services. People often tell HWST about their positive experiences of services and groups on offer in the local area, and the difference these have made to their wellbeing. HWST believe those who make a positive difference should be recognised, especially during these unprecedented times, and so the Healthwatch South Tees Award of Recognition celebrates those who make a difference to the people they support and their communities as well as going that extra mile to help others. They hope the STAR Award also offers the opportunity to share good practice across South Tees.

More information about the STAR Awards process and about previous winners can be found on the HWST website by clicking the following link: <https://www.healthwatchmiddlesbrough.co.uk/news/2021-01-21/star-awards-2021>

HWST look forward to receiving your nominations and celebrating the amazing work carried out across South Tees!

### **GPC regional elections**

Nominations for the Durham/Cleveland seat for GPC UK are open and successful nominees will take their seat for a three-session term from 2021-24, commencing after the ARM 2021:

Nominations are also open for a *Prison GP representative* on GPC UK – this seat is for a three-year term from 2021-24.

To submit your nomination please visit <https://elections.bma.org.uk/>. The deadline for all nominations is 12pm Friday 12 February: Voting will take place from 12pm 19 February to 12 March for the by-election and 19 March for all other seats.

For any questions relating to the role or GPC please contact [info.gpc@bma.org.uk](mailto:info.gpc@bma.org.uk). If you have any queries regarding the election process, please contact [elections@bma.org.uk](mailto:elections@bma.org.uk).

Read more, including link to the BMA committee profile, on the [BMA website](#)

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

### **Leadership Support Circles (National Autumn Offer 2020-2021)**

Leadership Support Circles are part of the National Health and Wellbeing response to Covid19 to support the wellbeing of #OurNHSPeople. They provide evidence-based guidance and tools in a series of short, themed and interactive online sessions based on 10 principles for leading compassionately. Leadership Support Circles are a reflective space for managers at all levels to come together in a multi-disciplinary setting to share their experiences and be heard. Further information and how to register click the link [here](#)

**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](mailto: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'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](mailto: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](#).**

### **BMA COVID-19 guidance**

The BMA [COVID-19 toolkit for GPs and practices](#) includes updates in the COVID-19 vaccination programme section and protecting clinically extremely vulnerable (CEV) patients section. 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](#)

### **GPC GP Bulletin**

Read the latest GP bulletin [here](#)