

CLMC Bulletin 491 – 07/12/21

Changes to QOF and IIF

On Friday we shared the NHSE/I published [letter](#) announcing changes to QOF and IIF and changes to the COVID vaccination DES. The further detail and operational guidance on these changes was still to come at the time of posting this webpage so we have included it in the accompanying email to this bulletin and will add to the webpage bulletin next week.

Given the announcement on QOF and IIF, GPC hope it will become possible for practices to consider how they may be able to support the national vaccination effort whilst continuing to clinically prioritise patients who need them. GPC recognise the significant unprecedented challenges you are all facing at present and know that you will do your best in the days and weeks to come, as you have been doing these past 20 months.

Thank you for all that you are doing for your patients, for your communities. Read the GPC [press statement](#). Secretary of State for Health and Social Care, Sajid Javid, has written a thank you [letter](#) to Primary Care, thanking them for their efforts on the COVID-19 Vaccination Program. Please do share these thanks with your team.

Additional funding for COVID vaccination programme – but more support is needed

Following the identification of the COVID-19 omicron variant, the government have accepted [JCVI advice](#) to widen the age range for vaccine eligibility to include all 18-39 year olds and to shorten the time from last vaccination to booster to three months.

In addition, 12 to 15 year olds can now receive a second dose of the Pfizer-BioNTech COVID-19 vaccine, no sooner than 12 weeks after the first dose. Severely immunosuppressed individuals who have received three primary doses, should also be offered a booster dose.

To support the quicker and larger roll-out of boosters, NHSE/I announced that there will be some additional funding to support PCN Groupings to step up capacity by:

- Increasing the Item of Service (IoS) fee for COVID-19 vaccinations to £15 from 1 December to 31 January (Mondays to Saturdays)
- Increasing IoS fee to £20 for vaccinations administered on Bank Holidays and Sundays from 1 December to 31 January
- Increasing the supplement for vaccination of housebound patients to £30 from £20 between 1 December and 31 December backdated to 16 September

Although we welcome additional funding being made available, we remain concerned about the high workload and lack of workforce capacity in general practice. Given the announcement on QOF and IIF, GPC hope it will become possible for practices to consider how they may be able to support the national vaccination effort.

At this critical time in the fight against COVID-19, GPs and their teams want to do all they can to protect and look after their communities, focusing on those most in need.

This means finely balancing the clear national priority to deliver booster vaccinations to as many people as possible with ensuring that people who need care and treatment from their GP practice and the wider NHS continue to receive it.

If practices physically do not have the staff or time to dedicate additional time to the vaccine programme because they are also focused on other contractually required work it will do little to help. With a finite number of staff and hours in the day there is a limit to what practices can safely do.

GPC hope that these changes, by removing some of the more bureaucratic and target-based requirements within practices' contracts, will create capacity to step up delivery of the vaccination programme to quickly protect as many as possible from COVID-19. Read the GPC [press statement](#)

New COVID-19 Omicron variant – new measures and booster programme extension

Following the reports of a new COVID-19 Omicron variant, the [BMA called for mandatory mask-wearing and social distancing in indoor crowded spaces](#), and that public buildings, offices and hospitality venues have adequate ventilation to disperse the virus as much as possible.

The [Prime Minister then announced](#) that new targeted measures in England to prevent the spread of the new variant would be [introduced on Tuesday 30 November](#), including mandatory mask wearing in shops and on public transport. The public was also encouraged to ensure they get vaccinated, to help protect themselves and others.

A [CAS alert](#) has been sent out to healthcare workers, with advice to continue to follow the national [Infection prevention and control for seasonal respiratory infections in health and care settings for winter 2021 to 2022 guidance](#), wearing face masks for staff and face masks/coverings for all patients and visitors within health and care settings over the winter period.

It also recommends that physical distancing should be at least 1 metre, increasing whenever feasible to 2 metres across all health and care setting, and that it should remain at 2 metres where patients with suspected or confirmed respiratory infection are being cared for or managed. Read the BMA statement [here](#)

BMA report: Weathering the storm

The BMA published a report, [Weathering the storm: vital actions to minimise pressure on UK health services this winter](#).

The report outlines practical recommendations for stemming the winter crisis that health services across the UK are facing. These include calling on political leaders to have honest conversations with the public about the immediate challenges facing health services so that patients and the public alike have the best information possible about how to access safe and appropriate care

The report calls for urgent and immediate action by government and health service leaders and asks them to do more to:

1. Communicate honestly with patients and the public about health service pressures
2. Retain existing staff and maximise workforce capacity
3. Promote responsible public health policies to keep people safe and healthy and help manage demand on services
4. Direct resources to where they are needed most to manage health service demand

Access the report and read more [here](#)

Joint statement on Inclisiran

GPC have published a [joint statement](#) with the Royal College of GPs regarding the implementation of [Inclisiran](#) in primary care.

Although the BMA is supportive of innovation of new drugs, GPC have serious concerns about how this particularly drug is being introduced. In particular GPC have raised issues about where the long-term responsibility lies when prescribing this drugs, and the lack of clarity about where doctors and patients can turn if there are concerns or problems.

There is also an issue of capacity the lack of clear resources to support the additional work required and how the impact that introducing new treatment plans will have on teams that are already stretched to their limits. GPC have raised these concerns with NICE and NHSE/I.

This guidance aims to advise practices that may want to prescribe these drugs of the concerns and that they should only do so if they feel comfortable. Read the statement [here](#)

Integrated care systems – primary care

The BMA continues to lobby on a range of issues relating to the Health and Care Bill, including strengthening the involvement of general practice, and the role of LMCs. As part of this GPC have co-signed a [letter](#) with other representative bodies for primary care, to Ministers and the Health and Care Bill Committee, asking for a commitment from Ministers in Committee that:

- The government honours its commitment for primary care to be represented and involved in decision-making at all levels of the Integrated Care Systems (ICS) including strategic decision-making forums through formalised roles for GPs, dentists, pharmacists, primary eye care and primary hearing care audiologists in Integrated Care Partnerships (ICPs)
- These roles are remunerated to ensure parity of availability and voice with NHS Trusts, NHS staff, social care and public health colleagues in strategic thinking and decision-making
- That existing statutory Local Representative Committees, such as LMCs, have the right put forward nominations for those roles
- Transparency and accountability - ICBs and ICPs to be under duty to explain in writing in public when they choose not to heed advice from local primary care bodies.

A [briefing](#) outlining what collectively the BMA want government to do has also been sent to Ministers.

CLMC also responded to the ICS Draft Constitution engagement process, highlighting the need to ensure that there is clinical general practice representation on the ICS Board and that there is true engagement with general practice, general practice clinicians and the LMC.

LMC England conference 2021 - resolutions

The resolutions and election results from the Annual Conference of England LMCs 2021, which was held last week, have now been [published](#). Watch recordings of the event:

Day 1: <https://bma.streameventlive.com/archive/246>

Day 2: <https://bma.streameventlive.com/archive/247>

Read more about the event here: [Local medical committees \(bma.org.uk\)](#)

GPC GP Bulletin & Informal Messaging

Read the BMA's GP bulletin [here](#).

Read GPC Chair twitter page: [Dr Farah Jameel \(@DrFJameel\) / Twitter](#)

Read BMA twitter page: [General Practice \(@BMA_GP\) / Twitter](#)

BMA COVID-19 guidance

Read the BMA [COVID-19 toolkit for GPs and practices](#), which provides comprehensive guidance for practices to manage contractual issues and service provision during the coronavirus pandemic. You can access all the BMA guidance on COVID-19, including ethical guidance, [here](#). 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](#)

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'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 is here for you and offers supportive [wellbeing services](#) which include face-to-face counselling. You can access one-off support or, after triage, a structured course of up to six face-to-face counselling sessions. Call 0330 123 1245 today or [visit the website](#) for more information.

For all other support, speak to a BMA adviser on [0300 123 1233](#) or email support@bma.org.uk

[Read more about doctors' wellbeing during the pandemic](#) and on Twitter [@TheBMA](#)

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.