

## CLMC Bulletin 474 – 24/08/21

### **Becton Dickinson blood specimen collection supply disruption**

NHSE/I have issued urgent [guidance on recommended actions](#) following an alert by Becton Dickinson to a global shortage of products from their Blood Specimen Collection Portfolio, which is expected to last a significant period of time. They advise that, other than in exceptional circumstances, vitamin D testing should be stopped, retesting and monitoring intervals should be extended when clinically safe to do so and that routine screening for pre-diabetes and dyslipidaemia, allergy testing and routine infertility testing should be deferred until a resolution to the supply problem. GPC have raised this issue with the NHSEI primary care team and are seeking assurances that this will not impact tests required for contractual areas such as NHS health checks, QOF and drug monitoring. It would be unreasonable for practices to delay tests and then be expected to catch-up later, so adding to the current care backlog.

NHS Supply Chain has issued a [Customer Notice](#) which details the products impacted and the measures they have put in place. Practices that secure these products from Primary Care Support England (PCSE) should continue to order in this way. GP practices that do not usually order from PCSE can also order via [their process](#).

A further update on the local position and discussions were provided in the bulletin circulation email sent 240821.

### **Supporting General Practice - letter from NHS England**

GPC have received a [letter](#) from Ian Dodge, National Director for Primary Care, Community Service and Strategy at NHS England and NHS Improvement (NHSE/I). This follows the meeting Richard Vautrey, GPC Chair, had with Amanda Pritchard, the newly appointed NHSE/I chief executive, and which was one of the first face to face meetings with any professional representative she had had since taking up her new role.

The letter acknowledges the pressures facing the profession, recognises its contributions and in doing so demonstrates a change of tone. It shows the steps NHSE/I is taking to rebuild relations with GPC England.

GPC are expecting NHSE/I to shortly publish further information on the service specifications and IIF with a focus primarily on 2022/23. As the letter suggests, NHSE have heard GPC's call to delay as much as possible of this until April 2022 at the earliest, whilst also continuing to invest the planned additional £150m for 2021/22.

### **Support Your Surgery campaign**

GPC have launched their latest campaign – [‘Support Your Surgery’](#). This follows the unfair criticism that has been levelled at general practice in the news and across social media over the last few months due to the way practices have had to work during the pandemic because of the necessary infection, protection and control measures. All too often this has resulted in GPs and their team members receiving abuse, as highlighted in [The Doctor](#) magazine and through the widely reported latest BMA [survey results](#).

To counter these perceptions and to put pressure on the Government to act to do more to support general practice, the campaign will provide practices with resources to help patients understand the reality of the issues facing general practice and to encourage them to join GPC in lobbying for the changes needed to address them. GPC is sending this [poster](#) to practices. This is one of the prepared physical posters and linked social media and website resources for practices to use to encourage their patients and those who work in general practice to sign up to the GPC petition.

The media coverage commenced 24 August with this press release:

**Public says more GPs are needed to improve services, as BMA launches 'Support Your Surgery' campaign**

*Almost half of the public in England say if they could make one improvement to their GP practice, it would be to increase the number of doctors, according to a survey commissioned by the BMA<sup>1</sup>.*

*These findings underpin a campaign launched by the BMA today – '[Support Your Surgery](#)' - encouraging members of the public to support the Association's call for Government investment in general practice to provide better services.*

*As part of the campaign, [a petition](#) has been set up by the BMA for the public to sign, which calls on the Westminster Government to also fund improved buildings and source more GPs. The campaign also explains the pressures on general practice, and why it's been difficult for patients to see their GP face-to-face over the last 18 months.*

*Demand on general practice and its workforce increased hugely during the pandemic, as practices kept patients safe by introducing infection control measures which has limited the number of people GPs and their staff could see face-to-face.*

*Although 58% of the public surveyed support these measures<sup>2</sup>, GPs know this has been frustrating – in fact, [a recent BMA survey](#) found that one in five GPs reported being threatened, and another 67% said their experience of abuse, threatening behaviour or violence had got worse in the last year.*

*60% of those surveyed felt that the Government, local commissioning groups and NHS management were largely responsible for the backlog of care and lack of access to a GP, with just a quarter feeling that GPs and other healthcare staff in surgeries were to blame.<sup>3</sup>*

*Dr Richard Vautrey, GP committee chair at the BMA, said: "This campaign is about being upfront and honest with our patients. We know that Covid-19 has changed how GP services look and feel, and that it can be incredibly frustrating for patients who just want to see their doctor, face-to-face, without delay.*

*"We, like the rest of the NHS, were ill-prepared for the pandemic - with decades of underfunding and seriously short on staff, and the consequences of the last 18 months have added significantly to these pressures. They have also been understandably very stressful for patients and, sadly, this has resulted in poor behaviours, or worse, with some staff reporting cases of abuse and violence from patients.*

*"This isn't the way we want it to be. GPs and their teams are just as frustrated, and while the general practice workforce have done everything in their power to improve pressures in their own surgeries, we can't make the changes we and our patients want to see without urgent Government backing and funding.*

*"It's important that patients understand the reality of this crisis and that, despite the easing of lockdown, the pressures on general practice will only get worse if nothing is done. Not only is Covid-19 still a threat, but GPs also continue to deliver the vaccine rollout; annual winter pressures and the flu season could make things worse; and the backlog of care is constantly growing.*

*"General practice is at a crossroads and the route for general practice to get through this crisis isn't guaranteed at the moment. All doctors want to do is help their patients, but we need the right funding and resources to do that, and to the standard that our communities understandably expect.*

*"We hope this campaign, with GPs and patients working together, is the beginning of not only giving general practice what it needs, but also what our patients rightfully deserve. We therefore urge everyone to sign our petition calling on Government to provide the funding we need for better services and more doctors. If you support your surgery, it means it can be there to support you."*

## **COVID-19 Vaccination programme**

### **Vaccinating 12-15 year olds with underlying health conditions**

Following the advice from the JCVI that those aged 12–15 years with specific underlying health conditions that put them at risk of severe COVID-19 should be offered two doses of the Pfizer vaccine with an interval of eight weeks between doses, NHSE/I has published a [letter](#) outlining the actions practices should take to help identify eligible 12-15 year olds (cohort 13) to ensure they are offered a COVID-19 vaccination appointment by 23 August 2021.

The letter includes a template letter for practices as well as a link to updated [FAQs on Vaccinating children and young people](#)

### **Vaccinating 16-17 year olds by 23 August**

The [government has now also announced](#) that all young people aged 16 to 17 in England should be offered a first dose of a COVID-19 vaccine by Monday 23 August to give them protection before returning to school. Read the NHSE/I [letter](#) which outlines details of the amended enhanced service specifications to incorporate 16 and 17 year olds into cohort 12.

### **Spikevax vaccine (formerly COVID-19 Vaccine Moderna) for 12- to 17-year-olds**

The Medicines and Healthcare products Regulatory Agency (MHRA) has confirmed that the [Spikevax vaccine \(formerly COVID-19 Vaccine Moderna\) is safe and effective to use for 12- to 17-year-olds](#), thereby extending the current UK approval (currently authorised for over 18s).

### **New and updated COVID-19 National Protocols**

The following new or updated COVID-19 national protocols and PGDs have been published:

- The updated [PfizerBioNtech mRNA vaccine BNT162b2 National Protocol v04.00](#)
- The new [Comirnaty COVID-19 mRNA vaccine National Protocol v01.00](#)
- The updated [PfizerBioNtech mRNA vaccine BNT162b2 PGD \(v04.00\)](#)

NHSE/I will also be publishing the new Comirnaty PGD v01.00 shortly.

### **Updated PHE guidance on NHS staff self-isolation and return to work following COVID-19 contact**

As of 16 August 2021 the government has changed the requirements to self-isolate following a positive COVID-19 contact, and PHE has updated its [guidance on how this changed will impact NHS staff and students working in the NHS](#)

Fully vaccinated staff and students who are identified as a contact of a positive COVID-19 case will no longer be expected to isolate and will be expected to return to work, after a number of safeguards have been implemented, such as a negative PCR test prior to returning.

It's important to remember that the updated guidance applies only to people who have the infection but are not showing symptoms. Anyone who develops symptoms should still self-isolate and end isolation only following a negative PCR test.

Read the BMA statement in response, by Dr Penelope Toff (BMA public health medicine committee co-chair) [here](#)

### **BMA Annual Representatives Meeting**

The ARM (Annual Representatives Meeting) agenda, [Build back together: supporting our members, supporting our NHS](#), has now been published. The ARM takes place virtually on 13 and 14 September and is the BMA's largest policy making event. The BMA have also launched ARM 2021 on their [website](#), and you will find information on elections, events and more online, as well as a [blog](#) from Dr Latifa Patel, Acting representative body chair

### **HEE is looking to the future for the health and social care workforce**

HEE has been commissioned by the Department of Health and Social Care to work with partners and review long term strategic trends for the health and social care workforce. The [Long-Term Strategic Framework for Health and Social Care Workforce Planning](#) will review, renew and update [HEE's Framework 15](#), last published in 2014, to help ensure we have the right numbers, skills, values and behaviours to deliver world leading clinical services and continued high standards of patient care.

The BMA will make a submission, but HEE also wants to hear from as many stakeholders and partners as possible, including people who need care and support, service users, patients, carers, members of the workforce, as well as students and trainees.

They have launched a 'Call for Evidence' which is live until the 6 September - please do [complete the survey and have your say](#) if you have capacity to do so.

### **GPC GP Bulletin**

Read the GP bulletin [here](#).

### **GPC Sessional GP Newsletter**

Read the latest Sessional GPs newsletter [here](#)

### **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](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 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](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](#).**

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.