## **CLMC Bulletin 425 - 07.07.20**

#### **Faulty PPE**

MHRA have advised a product recall notice to practices and care homes with safety warnings, notices for destruction and distribution stoppages for more than 85 million Cardinal Surgical masks and 3m and Cardinal respirators in the PIPP stockpile since it was deployed in March. This comes despite repeated assurances by Public Health England, NHS England and the Department of Health and Social Care, that all PPE products had been rigorously tested and are safe for use.

Although these masks meet the breathability, filtration and splash resistance requirements of BS EN 14683, in light of ongoing monitoring, further complaints reported and testing from the manufacturer on the masks, the MHRA recommends that all lots of this product are disposed of locally. There is a risk to staff wearing the mask if the foam strip on the mask flakes and enters their airway or mouth. There have also been complaints of the ties and/or stitching coming away from the mask. The product affected is the Type IIR Mask from the supplier Cardinal Health (NPC: BWM028, MPC: AT74535UK, applies to all lots of AT74535UK).

This is an unacceptable situation that has put healthcare workers at risk and now could leave some practices without any face masks to use, therefore potentially having a major impact on patient care. GPC have raised serious concerns about this with NHSE/I. They have responded to say that they have not supplied any Cardinal masks since May and are working through a replacement plan with the wholesalers who supplied primary care. Practices can obtain PPE supplies via their LRFs (who have good supplies) and the Portal that can be delivered within 48 hours. Find out how to register and contact the Portal Customer services team here.

If doctors and health and care workers have been supplied with, and worn, faulty, re-dated masks, this is clearly a dereliction of duty to ensure the safety of NHS staff and patients. Wearing substandard PPE places doctors at risk of becoming infected and also spreading the illness to patients and nothing short of 100% fit for purpose PPE should have been supplied from the outset. Read the full BMA statement here.

#### Lapse of the emergency GMS regulations

The emergency regulations relating to general practice, which were part of the NHS response to the COVID-19 pandemic, lapsed on 1 July; this includes the revert back to 1 appointments per 2000 patients for 111 direct booking (as per the LIS). GPC have been in discussion with NHSE/I about what the arrangements will be for the rest of the year as we are clearly a long way from the end of the pandemic and need to be prepared for a second wave or impact of local outbreaks as we are already seeing. We are seeking urgent clarification of this so that practices can plan for the months ahead and will provide an update as soon as we can.

## **COVID-19 risk assessments**

The disturbing results of the <u>latest BMA tracker survey</u> found that more than a third of BAME doctors in the UK are still not being given access to potentially life-saving COVID-19 risk assessments – nearly two months after NHS England issued recommendations that risk assessments should be carried out for all staff as a precautionary measure.

In response to a GPC letter to Simon Stevens and lobbying on these issues, NHSE/I have issued a letter which sets out that CCGs should commission an occupational health service to support practices with this risk assessment process. GPC do not believe practices should be expected to pay for this, and it should be made freely available as soon as possible through local OH capacity, or by commissioning more to complement existing OH services via this <a href="Dynamic Purchasing Solution">Dynamic Purchasing Solution</a>, if additional capacity or access outside normal working hours is needed. CCGs are asked to assure that this is happening comprehensively and speedily in their areas. CLMC highlighted this as one of the elements required in supporting practices through 'recovery/return to normal' in a document for the ICP a few weeks ago. We will update on any developments.

Read the BMA's guidance on risk assessments which includes specific information for practices.

# Social distancing guidelines

Following the <u>PM's announcement</u> about the change in the guidance on social distancing, GPC are working through the implications of this with NHSE/I and the impact it will have on services.

From 4 July, the guidance will change from 'Stay 2 metres apart' to 'Where it is possible to keep 2 metres apart people should', it also advises people to keep a social distance of 'one metre plus', meaning in areas where it is not possible to keep 2 metres apart such as in public transport and some working environments, they should remain at a minimum one metre apart, while also taking physical steps to reduce the risk of transmission. The government <a href="guidance">guidance</a> continues to state that businesses should maintain 2 metre distancing wherever possible. This would apply to practices who should continue to apply social distancing.

The BMA has <u>written</u> to the Secretary of State for Health and Social Care to express concerns over the lack of clarity in the Westminster government's plans to ease lockdown and calling on government ministers to produce clear and consistent guidance on social distancing.

The BMA has also <u>called for the Government to be more open</u> and transparent with local COVID-19 data and about how regional spikes will be managed in the future, following the announcement of a reintroduction of lockdown measures in and around Leicester due to increasing levels of infection in the city.

Read more in the BMA statement calling for consistent guidance on social distancing

#### **Shielding update**

GPC have updated their <u>guidance on shielding</u> following the <u>announcement</u> that the guidance for clinically extremely vulnerable people who are currently shielding from coronavirus, will be eased in two stages – on 6<sup>th</sup> July and 1<sup>st</sup> August.

These patients will be <u>sent a letter</u> advising them to continue with the care/treatment arrangements currently in place. More detailed advice will be provided by the Government as the changes in advice come into effect, and unless there is a significant rise in COVID-19 cases the shielding programme is expected to be paused on 31 July.

The shielded patients list will continue to be maintained after August so that it can be used again in the future if necessary. Work is also being done to develop a new predictive risk tool which could lead to an updated list in the future.

GPC have heard of situations where individuals, employers, businesses or insurance companies have been suggesting that shielding patients obtain a letter from their GP to engage in certain activities, including having their hair cut. There is no requirement or necessity for such letters and patients and others should follow the government guidance relating to social distancing and other necessary precautions.

Read the Government's guidance on shielding for patients and the letter to the NHS on shielding

<u>Trust GPs to lead</u>: learning from the response to COVID-19 within general practice in England GPC's <u>Trust GPs to lead</u>: learning from the response to COVID-19 within general practice in England, explores and highlights the scale of extra work being taken on by GPs during the pandemic, which was also highlighted in the BMA's latest <u>tracker survey</u>.

Richard Vautrey, GPC Chairman, has joined a ministerial working group on renewal and recovery in general practice, set up by Jo Churchill MP, Parliamentary Under-Secretary of State for Health and Social Care. This is also linked to the contract agreement for a government review to reduce unnecessary bureaucracy impacting general practice. The BMA will be submitting evidence to the review and participating in the ongoing discussions. The final recommendations will be agreed by the ministerial working group to take forward. Read more here

### Pandemic Medicines Delivery Service extension

NHS England/NHS Improvement have announced the Pandemic Medicines Delivery Service will be extended until 31 July 2020. This new commission will be under the same terms of the current scheme with the same claims processes in place. Their <a href="Letter">Letter</a> announces that pharmacies and dispensing doctors across England will be required to ensure shielded patients can receive a home delivery of their medicines until 31 July 2020. Read the service specification and guidance <a href="here">here</a>

# Mental health and wellbeing - looking after your practice team

CLMC continue to offer <u>wellbeing services via Validium</u> 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. It will remain in place until at least 1 April 2021.

The BMA's report on the <u>mental health and wellbeing of the medical workforce</u> sets out ten recommendations to be addressed to protect staff during the pandemic and in the future.

The latest <u>tracker survey</u> revealed high levels of exhaustion and stress amongst doctors; the BMA continue to offer <u>wellbeing services</u> 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 their Wellbeing <u>poster</u>, please email <u>wellbeingsupport@bma.org.uk</u>

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

## **GP** appointment data

NHS Digital has published the <u>appointment data in England for May 2020</u>, which shows that there has been a significant reduction in appointments to non-COVID period in April and May. However we know that the reality on the ground is quite different with many seeing an initial drop in appointments at the start of the pandemic, but now experiencing a significant increase back to historic levels or in some cases over pre-COVID levels as practices manage delayed presentations.

## **Annual GP recruitment drive**

Applications for GP specialty training open on the 28 July–13 August 2020. Please 'like' and follow the #Choose GP <u>Facebook page</u> to keep up to date, and forward this information to anyone who may be thinking about career options. Visit the <u>GP National Recruitment Office</u> for more information. Health Education England has a number of GP and trainee volunteers who can help with local or general enquiries. Email Daryl at <u>gprecruitment@hee.nhs.uk</u> to be put in touch with them.

HEE thanks all GPs and trainees who responded to the call for volunteers willing to be contacted by doctors considering GP training - your support is very much appreciated.

### Performers List processes associated with GP Registrars and professional standards

This <u>PLAN</u> 07 provides formal notification from NHSE/I confirming the joint agreement with Health Education England that GPRs due to start training in August 2020 are exempt from the requirement to be included in the England Medical Performers List.

#### **Self Care Forum Coronavirus Innovations Award**

Every year the Self Care Forum invites submission of examples of good practice and innovation, to be celebrated during Self Care Week, and be given a £500. This year they are asking for examples of good practice and innovations in self care that have been implemented during the pandemic and which have made a difference to individuals and the community. Closing date for admissions is 31 st July 2020. More information about the award and an application form can be found here

## Survey on digital primary care and COVID

The inSIGHT study is an international project that aims to understand the impact of COVID-19 on the use of digital-first technologies in primary care, and they would like to hear from GPs. The inSIGHT project is led by the Institute of Global Health Innovation at Imperial College London, involving collaborators from 17 organisations worldwide. Take the survey here

# **Consultation on NICE indicators**

NICE are consulting on these proposed additions to the NICE indicator menu:

- Proposals for general practice level vaccination and immunisation indicators.
- Proposals for general practice level obesity indicators focusing on giving appropriate weight management advice.
- Proposals for general practice indicators focusing on support from primary care for people diagnosed with cancer.

You can provide input into the consultation <u>here</u>. Deadline for responses 15<sup>th</sup> July.

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

The BMA continue to regularly update their <u>toolkit for GPs and practices</u>, which should help to answer many of the questions we have been getting on a large range of topics relating to COVID-19. Last week they added a section on <u>high-risk patients and shielding arrangements</u>. 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

For further information, see the BMA's <u>COVID-19 Webpage</u> with all the latest guidance including links to the BMA's <u>COVID-19 ethical guidance</u> and <u>priorities for easing lockdown</u> published last week.

# Other COVID 19 resources

BMJ – news and resources RCGP COVID-19 information NHSE/I primary care bulletins NICE resources

# **GPC GP Bulletin**

See this week's GP bulletin here.

### **GPC Sessional GP Newsletter**

Read the Sessional GPs newsletter here