

CLMC Bulletin 435 – 29.09.20

NHS contact tracing app

The NHS Covid-19 app has been launched in England and Wales. The GPC response highlighted that tracing and isolating people who have been in contact with infected individuals is important in helping prevent spread of the virus. The more people who download the app, the more people who may have COVID-19 but otherwise wouldn't be traced should be identified and instructed to self-isolate. GPC said that the use of the app does not diminish the pressing need to have sufficient testing capacity, and must complement a properly functioning national test and trace system which can also quickly identify local outbreaks. Please see the [full BMA press release here](#).

The app has a feature that allows any premises to generate and print a QR code to allow visitors to 'check-in' by scanning it. The QR code functionality is intended to consolidate all existing digital check-in services that have largely been in use in pubs and restaurants. Although all commercial premises are still obliged to offer a paper check in service, if they offer a QR one then it must be via the app. While GP surgeries are not obliged to offer either (appointment IT systems keep an accurate log of visitors) as part of wider efforts to encourage the public to download the app, practices may generate and display QR codes generated through the app on the understanding that these are not mandatory and patients are not obliged to scan them in order to attend. QR codes can be generated [here](#).

The app features the ability to turn contact tracing on and off – this feature was built in for users working in high-risk environments but with adequate PPE to ensure that they do not receive notifications to isolate where it is not necessary.

GP appointment data

The GP appointment [data for August](#) showed that the number of appointments delivered by practices that month remained relatively stable, with the percentage of appointments delivered face to face having risen compared to previous months. However, [new weekly appointment figures](#) have also been published for the first time, showing a jump in appointment figures in early September, with concerns related to COVID-19 adding to the expected rise in activity as we move into autumn and with schools returning. Read the GPC response [here](#).

Delivering the flu vaccination programme

Practices are well into the biggest influenza immunisation campaign that many of us will have engaged in, with large numbers of patients now having received their flu jab. We have heard reports of some practices already concerned that they have or will run out of vaccine. GPC are taking this up with NHSE/I and DHSC as a matter of urgency.

Practices, working in their PCNs where appropriate, are encouraged to work together with pharmacies to support a successful 2020/21 flu campaign. This is even more important in light of COVID-19, and the challenges faced in delivering this year's flu programme. As in previous years, this is a national service with both practices and community pharmacies providing NHS flu vaccinations, and we all have a role to play in identifying and engaging patients and vaccinating to protect as many as possible at a very vulnerable time.

Practices and pharmacies should talk to each other about the vaccination service they are planning to offer to understand each other's plans. Where possible discussions should include how to reduce health inequalities and how to target harder to reach or under vaccinated populations which can help achieve an effective campaign.

Locum doctors and flu vaccine

GPC have received several reports of locum doctors finding it difficult to secure flu vaccinations from their registered practice. Locum GPs are fully entitled to receive the flu vaccination from their registered GP, and practices are contractually responsible for providing the flu vaccination to locum GPs who are their registered patients. It is vital that we work together during this unprecedented winter season to protect our already over stretched workforce.

New rules for controlling the spread of COVID-19

You will have seen the announcement from the Prime Minister regarding the latest measures which are being introduced in England to help combat a second peak of COVID-19 infection. You will have also seen that the UK's coronavirus alert level has been being upgraded from 3 to 4, meaning transmission is "high or rising exponentially". Those on the front line of general practice know very well that general practice never stopped working or seeing patients during the height of the COVID-19 crisis despite reports to the contrary in the press. We know that the reality is that general practice is now experiencing significant workload demand and that this is rising rapidly.

As we move toward a second peak of the COVID-19 pandemic, whilst delivering the biggest flu programme ever and on top of the usual winter pressures, GPC is calling on NHSE/I and the Government to ensure general practice is properly protected and supported.

With regard to the new restrictions for controlling the spread of COVID-19 in England the BMA have said that further action is needed. BMA Council Chair Dr Chaand Nagpaul said that it is encouraging that the Government has, at last, recognised the need for more stringent measures to control the virus's spread, but there are a number of further actions which the Government could take to prevent a second peak. The BMA has consistently argued that it was illogical for staff not to be required to wear facemasks in shops, pubs and restaurants as customers are, so are pleased to see this belatedly coming into force. However, given that the infection is equally like to spread in all indoor settings, these rules should also apply to offices and other workplaces. You can read the [full BMA press response here](#).

Richard Vautrey, GPC Chair, gave an interview to BBC Look North (East Yorkshire and Lincolnshire) and answered viewers' questions relating to COVID-19. You can watch the interview [here](#), (3:47 minutes in on Tuesday). He was also interviewed by BBC Radio York on Monday, BBC Radio Humberside on Tuesday and again on Thursday morning about access to GP surgeries during Covid-19 and the importance of triage to keep both patients and the workforce safe, but stressed that patients would be seen face to face when it was clinically necessary to do so. You can listen to the interview [here](#) (at 10.08am on Thursday).

GPC executive team member Dr Krishna Kasaraneni appeared on [BBC Politics North](#) on Sunday morning to condemn the recent letter from NHSEI warning GPs that they must provide face-to-face appointments. He stressed that GPs have been working tirelessly throughout the pandemic to provide face-to-face appointments whenever there is a clinical need for this, and that suggestions to the contrary are damaging and unwarranted. You can watch this from the 16 minute mark.

GP Pay and Pensions system

The new GP pay and pensions system was planned to launch imminently. However, following final performance testing the launch has now been postponed. GPs and practices should continue to use Open Exeter until notified otherwise. PCSE are communicating to all practices to confirm this. As a key stakeholder, GPCE has been central to testing and questioning the new system and, while disappointed by the delay, GPC are glad that that a system which is not 100% ready for use is being held back until such a time as it is.

The NHSE/I [letter](#) to practices set out the reasons for introducing the new system and also explained that an end goal is to ensure that no practice should have their payments negatively affected by the system switch. Testing has shown that this is largely the case but that around 200 practices (nationally) might experience that affect without further reconciliation work. PCSE have contacted those practices to offer patient list reconciliation exercises to correct these anomalies and the majority have responded. However, around 50 practices (nationally) have not and we would urge those practices to do so at the earliest opportunity. Undertaking this work will result in practices receiving the correct payment.

For the majority of practices, GPC anticipate no difference, but are taking a precautionary approach and will be closely scrutinising the early performance of the system. GPC have absolute assurance that robust business continuity arrangements are in place to enable payment if there is major problem.

Revised Network Contract DES material published

NHSE/I has now published the revised Network Contract DES materials on their website. This includes a cover note, amended 2020/21 Network Contract DES Specification and guidance, IIF guidance and SMR guidance. GPC have summarised the changes [here](#).

Survey of Salaried GPs

GPC are conducting a [survey](#) to hear from salaried GPs in England, about their terms and conditions under the BMA's salaried GP model contract. In this survey they are particularly focusing on pay and the provision of parental leave rights under the model contract. Your answers will inform their work on reviewing salaried GPs remuneration package and analysis may be used in negotiating discussions with NHS England. The survey should only take five minutes, and your responses will be anonymous. The survey will close on 12 October. If you have any questions about the survey, please email GPC at info.pcs@bma.org.uk. Thank you for taking the time to complete this survey – we appreciate your input.

Practice rental payments

The issue of some tenants of GP practices either decreasing, or threatening to decrease their rents was recently raised with GPC. Tenants cannot unilaterally change the existing arrangements without due process and discussions and to do so is not acceptable. The legal principle is that subject to the lease arrangements that are in place, no one party can unilaterally change the terms of the agreement and adjust the rent without agreement and without being transparent. Both parties must work together and the entire process must centre around collaboration, with both parties acting reasonably and responsibly in reaching any agreement.

GPC met with the legal team of Well Pharmacy, one of the larger tenants and discussed their advice to their members. While understanding the impact the pandemic has had on their businesses, GPC made clear it was not helpful for them to issue letters to their landlords advising they will be paying only 75% of the usual rent for the foreseeable future citing the current situation and a subsequent reduction in footfall. The code of practice published by the government in June has been cited by some tenants, but the fact is that it remains voluntary and does not give pharmacies the authority to adjust their rent unilaterally, without agreement and without being transparent. Both parties must work together for the benefit of aiding swifter economic recovery, and the entire process must centre around that collaboration with both parties acting reasonably and responsibly in reaching any agreement. If practices need legal support to pursue this, they are encouraged to contact legal firms with expertise in this area.

First Contact Physiotherapist evaluation and webinar - Wednesday 30th September 2020 - 12.00 - 13.30

The final phase of a national evaluation into the First Contact Physiotherapist (FCP) role will be published at the end of September. The evaluation, conducted by teams at Keele and Nottingham universities, includes quantitative data on patient outcomes along with qualitative research based on interviews with patients, GPs, practice staff and FCPs.

To coincide with the publication, NHSE/I, Health Education England and the Chartered Society of Physiotherapy are holding a webinar to discuss the findings and explore the recommendations made by researchers. Samira Anane (GPC policy lead for Education Training and Workforce) will appear on the panel. The event is designed to promote successful implementation of the role, which is fully funded under the additional roles reimbursement scheme. You can register for the event [here](#).

Template letter to private providers about screening

Last week, we included the incorrect link for the joint [template letter](#) that practices can use to write to private providers offering non-approved screening tests. Numerous private companies are offering screening that is not recommended by the UK National Screening Committee and there is a lack of evidence of how results of private screenings are presented in NHS services and is of benefit to patients, which is a cause of serious concern. The letter can also be accessed [here](#). Apologies for any inconvenience.

GPC GP Bulletin

See this week's GP bulletin [here](#).

GPC Sessional GP Newsletter

See the most recent sessional GPs bulletin [here](#).

Mental health and wellbeing – looking after your practice team

Over the last few months GP appraisal leads and GP tutors have been offering telephone support conversations to any GP struggling with any professional or personal issues related to the Covid pandemic. The offer 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

In addition, 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. It will remain in place until at least 1 April 2021.

Read 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 our 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](#).

BMA COVID-19 guidance

The BMA continue to regularly update their [toolkit for GPs and practices](#), 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 [high-risk patients and shielding arrangements](#). 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 [COVID-19 Webpage](#) with all the latest guidance including links to the BMA's [COVID-19 ethical guidance](#) and [priorities for easing lockdown](#).

Other COVID 19 resources

[BMJ – news and resources](#)

[RCGP COVID-19 information](#)

[NHSE/I primary care bulletins](#)

[NICE resources](#)