

## **CLMC Bulletin 442 – 01/12/20**

### **COVID-19 vaccination programme (CVP) national guidance**

**(CLMC have provided a Q&A document via email to support practices in finding the answers to questions that have been raised locally, regionally and nationally)**

NHSE/I has published a [letter](#) about the outcome of general practice site designation process to provide commissioners and practices with more information to help with planning. This follows on from a [letter that NHSE/I sent to NHS Trusts](#) last week, outlining the wider COVID-19 vaccination deployment strategy and operational readiness for mass immunisation sites.

The letter sets out that NHSE/I aims to give all designated sites at least 10 days' notice of the first vaccines becoming available to ensure sites can be prepared and clinics arranged. It also suggests practices may wish to use this opportunity to invite the extended flu vaccination programme cohort of 50-64 year olds to their single designated site, to test arrangements.

In addition, NHSE/I has published [FAQs on their FutureNHS platform](#) (sign in required) based on the information known at present about eligible cohorts, appointment booking, administration of the vaccine, workforce and funding, to help answer any question that practices may have. It is expected that the COVID-19 vaccination programme specifications will be published imminently.

Practices have stepped up to the challenge of putting in place arrangements at an unprecedented speed and should be commended for doing so. It's been vital to be prepared for all possible options and once the regulatory process is complete we will have greater clarity and be able to finalise plans. The difficulties with storing and moving the Pfizer vaccine make the delivery of this particularly challenging. As a result it may be that initial vaccination plans of priority groups including care homes residents and healthcare staff will depend on the specific vaccinations available.

Please see the recent [GPC guidance](#) about the COVID-19 vaccination programme which has FAQs throughout to answer some of the questions that we know practices must have, and GPC will regularly update it when new information is available. We have moved this information into our Q&A for your ease but it is wise to check back to the GPC pages as these are real time amendments.

Public Health England have produced two videos in which Wei Shen, chair of the Joint Committee on Vaccination and Immunisation, explaining the vaccine prioritisation and the rationale for the age-based approach. The videos can be found on the [Public Health England twitter page](#).

### **COVID-19 winter plan and exiting lockdown**

The BMA has launched a ['blueprint' for leaving lockdown](#), to help save lives and prevent the collapse of health services this winter, outlining major reforms for England to sustainably control the spread of COVID-19.

The Prime Minister set out [the COVID-19 winter plan and announced the return to a three-tiered system](#) when England ends lockdown on 2 December. He also confirmed that that mass testing will be introduced in all England's tier three areas, the highest alert level. In response to this, Chaand Nagpaul, BMA council chair, said:

"The Government has had nearly a month to devise a realistic plan to halt the spread of Covid-19, in order to protect people's health and prevent the NHS facing collapse. Worryingly, the Prime Minister has revealed a plan that is full of risks and threatens to undo the progress and undermine the difficult sacrifices the public have made in that time.

The Prime Minister says the new measures are tougher than October when in reality many are far more relaxed, at a time when infection rates and covid-related hospitalisations and deaths remain high. For doctors and NHS staff who are already working under incredible pressure, the potential impact on NHS services is deeply worrying." Read the full BMA statement [here](#)

The full COVID-19 winter plan is available [here](#) and information about the [local restriction tiers](#)

### **Guidance for clinically extremely vulnerable people**

From Wednesday 2 December, once the current national restrictions in England are replaced with a regionally differentiated approach of the country, the government is planning to communicate updated guidance with all c.2.3m people on the Shielded Patient List (SPL) via letter. The government has provided [specific guidance for clinically extremely vulnerable people at each local tier](#). This letter is published on the GOV.UK [website](#). Letters may have started arriving with patients from Saturday 28 November, and throughout all of w/c 30 November.

### **Local funding protection – template letter for LMCs**

Our local authorities, alongside some others in the country, have advised they will be expecting practices to maintain pre-pandemic levels of service in order to receive agreed payments through Q3 and Q4 of this financial year – GPC England does not believe this is appropriate. The government, through NHS England, recognises the need for practices to prioritise their workload, and has protected their core income to allow them to do this. Local Authorities must follow suit. Some, including our, local authorities are using unnecessarily bureaucratic process for practices to claim supplier relief – again this is not appropriate. The funding must be protected and paid from the outset.

In response to this emerging issue GPC have produced a letter which we will send to our local authorities, urging them to reconsider this position and guarantee income protection for these services for the remainder of the financial year.

### **Integrated Care Systems consultation**

The NHSE/I has published a [consultation](#) inviting comments on the next steps for ICSs (Integrated Care Systems). The consultation raises some fundamental issues about how the NHS will be structured and work in the future and invites a discussion about how ICSs could be embedded in legislation or guidance. It signals an intent to make significant changes to CCGs and move the focus from competition to provider collaboration. The BMA will be carefully considering this and its implications. Read more about the proposals [here](#). A key document to consider is [here](#).

### **RCGP call for suspension of GP appraisal during the Covid-19 pandemic**

The [Royal College of GPs' Council has passed a motion to call for suspension of GP appraisal](#) for the duration of the Covid-19 pandemic. Although the College was pleased to see the introduction of a 'lighter touch' approach to appraisal, they remain concerned that many GPs simply do not have the capacity to engage even with a simpler process. Read the full statement [here](#).

### **GP trainees mileage payment**

NHS Employers and the BMA have published joint [guidance](#) for the reimbursement of home to principle place of work mileage for trainees in a GP practice. The guidance will provide the necessary information for employing organisations on operationalising the current provisions in the absence of an updated version of the terms and conditions. This is applicable to both back dated and future claims.

### **QOF system suppliers update**

As practices will be aware QOF 2020/21 has been [revised to reflect the impact of COVID-19 on general practice](#). GPC recognise that practices need to reprioritise aspects of care not related to COVID-19 and the QOF requirements have been modified for 2020/21 to support this and to help release capacity in general practice. Practices and commissioners have been asked to work together to confirm that any population stratification is clinically appropriate for their local population.

Clinical system suppliers have recently updated QOF indicators and prompts. In some instances, this may have impacted on practices' records of progress to date. Practices should be reassured that the indicators affected by this update are those that are subject to income protection as outlined in 2020/21 QOF guidance. Practices are not expected to re-code or re-review patients for indicators affected by this system update, unless there is a clinical need to do so.

### **Community Infection Prevention and Control Update**

The latest Bulletin from the Community Infection Prevention and Control Team for General Practice focuses on '[Guidance for seasonal decorations during Covid-19](#)'.

### **Over 50s Alcohol Helpline**

The alcohol, drug and mental health charity [With You](#) recently commissioned a poll that found [1 in 2 adults aged over 50 are drinking](#) at a level that could cause them health problems now, or in the future. The poll also found more than four million adults aged over 50s are binge drinking at least once a week during lockdown. In this population factors such as retirement, bereavement, isolation and loss of sense of purpose can lead to increased alcohol use and this may be [exacerbated by the pandemic](#).

In response, With You has launched an over 50s Alcohol Helpline providing support and advice to individuals aged over 50 worried about their drinking, and their concerned others. This will be available 7 days a week; Monday to Friday at 12pm - 8pm and 10am to 4pm at weekends. The number is 0808 801 0750. The helpline is supported by the [National Lottery Community Fund](#).

You may wish to signpost patients to this service by sharing the number or directing people to the [With You](#) website where there is also an [over 50s alcohol health check](#)

### **2020 Conference of England LMCs**

The 2020 Conference of England LMC was held on 27 November, as a virtual event. Rachel McMahon chaired the conference, supported by deputy chair Shaba Nabi, who was also elected as chair of Conference of England LMCs for 2021.

In Richard Vautrey's opening speech he thanked and commended GPs for having stepped up at this time of national crisis and for responding to the COVID-19 pandemic with such speed and effectiveness. He praised the hard work and diligence of our colleagues across primary care over the last nine months, while criticising the Government for being "behind the curve" with delayed guidance, limited initiatives and inadequate funding.

Richard noted that with the daunting covid vaccination programme facing us there can be no better people to succeed in this task which the whole nation is depending on. Once a safe and effective vaccine is available, our practice teams will work to the best of their considerable ability to protect our patients as quickly as practically possible. And whilst we may have super-powers we cannot be in two places at once and so we will need the help of everyone, we'll need to be able to prioritise the rest of our workload and crucially we'll need the understanding of our patients in doing so. We will need all hands to the pump.

The event was webcast via this [link](#) and a recording of the event and the resolutions will be published on the GPC [website](#). You can view the motion outcomes [here](#). Read the [agenda here](#) .

### **GMC State of medical education and practice in the UK**

The GMC has released its annual survey findings in its [State of medical education and practice in the UK report](#). Last year they looked at general practice in detail. This year, not surprisingly, they have found that 80% of GPs said they were working remotely more often, with fewer face-to-face consultations. Of concern, 34% reported seeing situations where patient safety or care was compromised. However, 59% felt the pandemic has had a positive impact on the speed of implementing change. 38% of GPs responding said they were satisfied or very satisfied in their day-to-day work, up from just 20% in 2019.

### **GP appointment data**

The latest [appointment data](#) for October is published. There were nearly 1.6 million more appointments in October than September, and October also had the highest number of appointments of any month in 2020 (28,236,193), and the highest since October 2019. There were 1.8million more face-to-face appointments in October than September and the highest number since February.

This data continues to show that general practice remains open and is delivering a high number of appointments during the second wave of the pandemic.

### **Government spending review**

The Chancellor announced funding plans for the NHS during his spending review speech. The announcements fall short of what is needed to improve GP practices/ estates and expand the GP workforce. Read the GPC briefing on the [announcements](#).

### **COVID-19 select committee: digitalisation of physical health services and impact on wellbeing**

Farah Jameel, GPC England executive team member, has given oral evidence to the [Lords' COVID-19 select committee](#), regarding the digitalisation of physical health services and the impact on our future wellbeing. Alongside other panellists from the King's Fund, HealthWatch and Staffordshire's STP, Dr Jameel talked about the increasing role digital technology has had in healthcare delivery – catalysed by the COVID-19 pandemic – and some of the risks and opportunities that should be considered in order to ensure patients receive the right care, at the right time, via the right medium. Watch Dr Jameel giving evidence to the committee [here](#)

### **Parental leave webinar and workshop**

GPC have published [guidance for GPs on parental leave](#) and will be hosting a webinar and workshop for more in depth guidance on these issues:

- 2 December from 12.30pm – 2.00pm – *Webinar - 'GP Maternity and Parental leave Guide: launch and introduction to the guide'*. Register [here](#)
- 9 December from 12.30pm – 2.30pm – *Workshop - 'GP maternity'*. Register [here](#)

If you would like to submit questions in advance to be covered at either session, please contact Christopher Scott via [cscott@bma.org.uk](mailto:cscott@bma.org.uk)

### **Mental health and wellbeing – looking after you and your practice team (new information included)**

**StartWell EndWell** was developed by North Bristol NHS Trust's senior clinicians, lead psychologist for staff wellbeing, quality improvement team, and Perform team during the early stages covid19. StartWell>EndWell has been designed to provide a practical approach to support colleagues to promote effective teaming, particularly during challenging periods.

Webinars will be taking place on: Tuesday 1<sup>st</sup> December

Webinars Timing: Participants to attend from 3.45pm - Session will start 4pm to 5pm

Joining Instructions: Microsoft Teams meeting

Join on your computer or mobile app: [Click here to join the meeting](#)

Find out more [here](#)

### **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](#)

**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](#)

**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)

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.

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](#)**.

**GPC GP Bulletin**

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

**GPC Sessional GP Newsletter**

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