

28th September 2020

New Rules for Controlling the Spread of COVID-19

You will have seen the announcement from the Prime Minister on Tuesday evening regarding the latest measures which are being introduced in England to help combat a second peak of COVID-19 infections. 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 of us 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.

GPC and LMCs are 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.

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.

Re-election as Chair of GPC UK and GPC England

It was announced yesterday that Richard Vautrey has been elected unopposed as chair of GPC UK and GPC England for a second three-year term starting

immediately. He has promised that he will work hard, and I will do all he can, to secure a future for our profession that ensures that generations of future doctors will continue to look upon general practice as providing the most rewarding of medical career.

NHS Contact Tracing App

The NHS Covid-19 app was launched yesterday in England and Wales. 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. Use of the app though 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](#) was released yesterday, which show 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.

Delivering the Flu Vaccination Programme

We are well in to 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. We are taking this up with NHSE/I and DHSC as a matter of urgency.

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.

Locum Doctors and Flu Vaccine

We 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.

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. The changes are summarised [here](#).

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 and LMCs to confirm this. As a key stakeholder, GPCE has been central to testing and questioning the new system and, while we are disappointed by the delay, we are glad that that a system which is not 100% ready for use is being held back until such a time as it is.

NHSE/I wrote to practices last week, setting out the reasons for introducing the new system. The letter 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 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, we understand that around 50 practices 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, we anticipate no difference, but are taking a precautionary approach and will be closely scrutinising the early performance of the system. We have absolute assurance that robust business continuity arrangements are in place to enable payment if there is major problem.

First Contact Physiotherapist Evaluation and Webinar

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, GPC provided an incorrect link for the joint [template letter](#) that they published with the Royal College of GPs, 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](#).

Worcestershire Issues

Information for Patients about General Practice in Worcestershire

Sadly several practices are reporting increasing cases of verbal abuse towards staff due to a misconceived perception that we are not seeing patients face to face (not helped by recent media reports and the NHSE/I letter to practices).

We have produced the letter below to explain to patients what the reality is across Worcestershire. Please feel free to share this widely amongst your patients and put it on your website if you wish to. We are also working on public communications with our CCG in order to redress the balance. We

realise that many of you feel demoralised and we will do all that we can to reassure our patients that we always have been and will remain open for business. How we provide essential services remains at the discretion of the practice with face to face consultation being an option if clinically indicated. Please see the letter [here](#) which can also be found on our website.

Wellbeing

We are fortunate to have excellent mental health support in place for general practice locally across both our counties. Do please access support if you need it and remember that it is very hard to look after others if you are not looking after yourself!

We have had some queries from practices about what support is available to non-clinical practice staff. Please see below for further information of the local offer that is available to **ALL** staff.

- ShinyMind – wellbeing and psychological support app, we have over 450 users currently a mix of admin and clinical - [flyer here](#)
- Journey to Rome - wellbeing session by the Wellbeing GP to be held 22nd September – potentially further other virtual sessions to follow - [flyer here](#)

There is also a national offer that is also available to **ALL** staff:-

- Lookingafteryoutoo Coaching support - [flyer here](#)

Mentor Support

Please find a flyer highlighting how you can access peer support during this time [here](#). More information about [wellbeing](#) support can be found on the LMC website.

BMA Mental Health and Wellbeing

The BMA continue 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.

LMC Website

The following guidance has been added to the LMC website www.worcslmc.co.uk this week:

[Letter to Patients](#)

[GPPP System Payments Changes letter to GPs](#)

[BMA/GPC Letter to Simon Stephens Sept 2020](#)

Other COVID 19 Resources

[BMJ – news and resources](#)

[RCGP COVID-19 information](#)

[NHSE/I primary care bulletins](#)

[NICE resources](#)

WORCESTERSHIRE AND HEREFORDSHIRE LMC LTD

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All topical issues relating to local general practice are discussed at the monthly LMC meetings and those minutes can be read on the LMC [Website](#). Should you require further information on any issues raised at the LMC meetings please do not hesitate to contact the LMC representative for your area or practice.

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All 20 practices are represented at Committee Meetings

Worcestershire and Herefordshire GPC Representative: Dr S Parkinson

**THIS NEWSLETTER IS PRODUCED FROM THE LMC OFFICE AT
ST STEPHENS SURGERY**

The next LMC meetings will be:

Worcestershire – 8th October 2020
Herefordshire – 28th October 2020