

9th November 2020

COVID-19 Vaccination

On Thursday afternoon, GPC England and NHSE/I agreed a Directed Enhanced Service for general practice to lead the delivery of the COVID-19 vaccination programme which will be ready for the beginning of December – with the rollout of the campaign dependent on when vaccines are approved and delivered to surgeries.

The nature of the first vaccinations that are likely to be available will require significantly different arrangements to the flu campaign but GPC believe that GPs and their teams are uniquely placed to deliver this vitally important programme to ensure that their communities are properly protected from this deadly virus. Practices will be able to choose to take part in the programme, and if they do will need to work together in their local area, initially with vaccinations taking place at one site – most likely a nominated practice.

No one is under any illusion about the scale of this task. Not only is this a complex vaccine – for example it needs special storage conditions - a campaign of this magnitude will be a huge undertaking for practices already struggling to cope with the impact of the pandemic as well as supporting the large number of patients with other healthcare concerns. We will therefore need significant support from many others, including community nursing teams, CCGs and NHSEI.

Read more in this [press statement](#). It was hoped that full details would have been published by NHSE/I on Thursday but this has been delayed. We will update you as soon as we can.

Messages of Thanks to General Practice

Following a tumultuous time and lack of appreciation of general practice, both by Government and the media, general practices have now received some welcome messages of thanks.

In yesterday's [press briefing by the Prime Minister](#), Sir Simon Stevens, Chief Executive of NHS England, said "we are doing very well thanks to the brilliant work of GPs in expanding the flu vaccination uptake this winter which is so important given that if you have flu and coronavirus at the same time you're twice as likely to die from coronavirus than you otherwise would, that's why it's so great that 2.5 million more people have had their flu jab this time this year compared to the same time last year".

In addition, Jo Churchill, health minister in England with responsibility for primary care, has written a letter of thanks to GPs and practice staff for their work throughout the pandemic.

She expressed appreciation about the unprecedented pace at which general practice has adapted in response to COVID-19 and how primary care services have been transformed by introducing total triage, delivering remote consultations alongside face-to-face appointments in order to serve as many patients as possible, while protecting staff and the public from risk of infection.

She also highlighted the high workload in the health service and how grateful she is for the efforts GPs and all practice staff continue to make to support patients. Read the full letter [here](#).

Protecting Clinically Extremely Vulnerable Patients (formerly shielding)

Following the announcement of a second lockdown in England, the Government has updated their [guidance for people who are clinically extremely vulnerable](#) alongside the new national restrictions.

NHSEI has [written to practices](#) to inform them of the new arrangements and although shielding is not being reintroduced as before, two additional groups have been added (adults with stage 5 chronic kidney disease and adults with Down's syndrome).

Patients who are on the shielding list will receive notification directly from government about what they should do. The [letter to the patients](#) also states that a copy of the letter is sufficient to give to an employer as evidence for Statutory Sick Pay purposes should that be required. Patients in this situation should therefore not need a fit note issuing by the practice.

Practices are also asked to review any children and young people remaining on the Shielded Patient List (SPL) and, where appropriate, remove them from the Shielded Patient List. Read more in the BMA's updated [guidance *Protecting clinically extremely vulnerable patients*](#).

Medicines Home Delivery Service

The Community Pharmacy Home Delivery Service and the Dispensing Doctor Home Delivery Service have been commissioned for those identified as clinically extremely vulnerable on the shielded patient list for the national lockdown period in England, which means that all pharmacies and dispensing doctors in England will again be required to ensure patients on the Shielded Patient List receive their medicines at home.

Read more in this [letter to pharmacies and dispensing doctors](#) and in the [service specifications](#).

Temporary Approval to Suspend the Need for Signatures on Prescriptions

The Secretary of State for Health and Social Care has approved [a temporary measure in England to help limit the transmission of coronavirus by suspending the need for patients to sign prescriptions](#) until 31 March 2021, to avoid cross contamination and help minimise the handling of paperwork when collecting medicines.

Patients are still required to either pay the relevant charge or prove their eligibility for an exemption from charges. Where patients are exempt from charges, the dispensing contractor will mark the form on the patient's behalf to confirm the patient's entitlement to exemption and, where applicable, to confirm that the patient's evidence of eligibility has not been seen. Read more [here](#).

Workload Prioritisation During COVID-19 Pandemic

In response to the COVID-19 pandemic, and rising workload pressures GPC have prepared [joint guidance](#) with the Royal College of GPs to help practices prioritise the clinical and non-clinical workload in general practice.

As we enter the second national lockdown the prevalence of COVID-19 the pressures on health and social care services are growing. GPs and their teams must be supported and enabled to provide care that best serves the needs of their patient population, in a way that adds most clinical value and keeps patients, clinicians and staff safe from the risk of contracting COVID-19.

PCR COVID Testing

NHSE/I announced in their latest [primary care bulletin](#) that NHS Test and Trace is making PCR COVID testing available on a voluntary basis for self-administration, following a number of pilots in practices over recent weeks. This will be a supplementary option for practices *and does not replace any of the existing routes to access testing*. Members of the public will continue to be directed to regional testing centres or home testing kits in the first instance.

The tests will be part of the Pillar 2 process and can be offered to patients who attend a practice when the GP feels that a test would be appropriate and there would be difficulties for them to access the standard routes for testing. The tests can also be used for GP staff and symptomatic household members. More information about the service and how to opt in, will be emailed out to practices shortly.

We have raised concerns with NHSE/I that this could lead to patients contacting practices for tests inappropriately rather than using the current drive in or postal routes and as a result there will be no media launch of this initiative. Further information is available [here](#).

PCN Clinical Director Survey

The BMA has launched the second edition of its [annual survey of PCN Clinical Directors](#). In order to understand the situation on the frontline, the BMA is asking PCN Clinical Directors for their unique insights into the recruitment of the new workforce, the delivery of services throughout the pandemic and the future of PCNs.

The responses to the survey will contribute to supporting the long-term development of PCNs and help inform the BMA for its annual negotiations with NHS England.

Performance Tracker 2020: How public Services have coped with coronavirus

This week, the Institute for Government and Chartered Institute of Public Finance and Accountancy have published [Performance Tracker 2020: How public services have coped with coronavirus](#).

The report highlighted that the disruption in general practice caused by coronavirus led to years of change in a matter of weeks and that the best of these reforms – improved collaboration – must be kept and expanded. It is suggested that the government should promote increased data sharing,

combined with greater transparency about how patient data is shared and used. The government should also assess the impact of increased use of technology, particularly remote consultations, on care quality, service efficiency, patient satisfaction and staff wellbeing.

It concluded that the government should invest more in IT equipment and training for staff to maximise the potential benefits.

NHS Community Pharmacist Consultation Service (CPCS)

From 1 November 2020, the NHS Community Pharmacist Consultation Service (CPCS) is being extended across England to include referrals from general practices as well as from NHS 111. GPs will be able to refer patients to community pharmacies to receive a CPCS consultation for minor illness (unlike NHS 111, GPs cannot refer patients for an urgent supply of a medicine or appliance).

General practices can choose whether they want to refer patients to the CPCS and before GPs can make referrals, there must be local discussions to agree how this will work. These discussions will involve pharmacy contractors, the Primary Care Network (PCN) and the member general practices, the NHS and your Local Pharmaceutical Committee (LPC).

Mental Health and Wellbeing

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! The latest support available can be found on our [website](#).

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 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. Access the [BMA's COVID-19 wellbeing pages here](#).

The BMA has welcomed the NHSE/I [announcement](#) of further funding for the expanded and rapid access provision of mental health services for NHS staff in England over the winter. This is urgently required and something the BMA has been calling for to support the major challenges NHS staff are facing. At the ARM, a motion was passed expressing concern at the potential long-term impact of the pandemic and called for resources to support the profession. As we head into a second wave of the virus it is vital that staff are protected. [Find out more here](#).

LMC Website

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

[NHSE Your Covid Recovery Guidance](#)

[Updated NHSE Guidance for GPs – Highest Clinical Risk Patients](#)

[NHSE Update for GPs – Clinically Extremely Vulnerable Patients](#)

[DHSC Guidance on accessing central flu supply for providers](#)

[BMA Maternity and Paternity Guide](#)

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

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

The next LMC meetings will be:

Worcestershire – 12th November 2020
Herefordshire – 9th December 2020