

17th May 2021

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FACE-TO-FACE APPOINTMENTS

The [UK LMC Conference which was held last week](#), was opened by Richard Vautrey who gave his opening speech. He stated that "General practice has been through a hard and difficult time that has left many physically exhausted and mentally drained. It has tested every GP team and individual like never before. But it has shown the profession at its best. We have been there for our patients. We have not let them down. We have responded to this unprecedented situation and we have risen to and met the challenge. The hard work and dedication of so many people in general practice has saved countless lives and the nation owes you all a huge debt of gratitude."

So, the media headlines of recent days and the subsequent letter relating to the [Standard Operating Procedures](#) from NHS England has completely understandably left many GPs and practice teams demoralised, angry and feeling that the immense workload pressures that practices are currently experiencing is not recognised or appreciated. Practices need help and support

not condemnation and criticism. Richard Vautrey has already expressed to NHSE his deep concern about the contents of their letter, and he has been candid about how it has been received by the profession.

Instead of knee-jerk responses to press headlines there needs to be proper acknowledgement from the Government and NHSE/I that practices are under huge pressure at the moment, that you are doing the right thing by working in line with national infection protection and control guidance as set out by the CMO and that you have been using telephone and online consultations appropriately to both keep patients and staff safe. This also needs to be much more clearly explained to the public.

It is for practices to determine how best to manage and deliver their services and the best arrangements for appointments, based on their expert knowledge of their local community. Practices have the contractual freedom to do this taking into account their capacity and workload pressures, and by doing so delivering a safe service to their patients.

We all want to get back to a time when we have the freedom to see more patients face to face but we need to do that in a way that matches capacity and safety within each practice. As covid-19 prevalence falls and, through the incredible efforts of general practice, vaccination levels rise, practices are rightly adapting the arrangements they have had in place during the height of the pandemic. However, at present we know that there is no spare capacity, there is no surplus workforce waiting to come and assist and the impact of the wider NHS backlog is having a massive impact on every practice. We know that Practices have been and will continue to offer face to face appointments for those patients who need them as well as trying to protect our patients and colleagues from becoming infected in our surgeries.

We don't just need our patients' understanding, we have often had that throughout this last year, we need governments to act. We don't just need short term fixes, or more letters and guidance telling us what to do, but a return to the freedom to deliver services in the way that best meets the needs of our patients, as well as long-term commitment to investment and development of general practice. That is what we will keep pushing for and what we expect government and NHSEI to deliver.

Here is a copy of the [statement to GPs](#) by Richard Vautrey, sent out last Friday. You can also read his full press statement [here](#).

The increased media focus, like these articles in the [Telegraph](#) and [Telegraph](#), so often fail to reflect the massive pressure practices are currently under, nor the continued need to adhere to national guidance to maintain safe infection control arrangements for both patients and our workforce, further damaging the morale of a dedicated and hardworking general practice workforce.

LMC UK CONFERENCE 2021

The LMC UK Conference 2021 was held last week, where we debated a wide range of motions – many focused, not unexpectedly, on the workload and workforce pressures in general practice which have been exacerbated even further during the pandemic. We also passed some very important motions, including ones calling for zero tolerance to racism and the role general practice can play in addressing climate change.

Recent [GP appointment data](#) revealed that there were 3million more appointments in March this year than there were in March 2019, before the onset of the pandemic, and the [workforce figures](#) published last week which showed that NHS in England lost more than 900 GP partners between March 2020 and March this year. This at a time where the number of patients per practice is 22% higher than it was in 2015. Resulting now in 0.46 fully qualified GPs per 1000 patients in England - down from 0.52 in 2015.

This issue was also illustrated in the latest [BMA survey](#), which found that a third of GPs said they were more likely to retire early following the pandemic and one in five said they were more likely to leave the NHS for another career, citing workload and their own health and wellbeing as the primary reason. Read the BMA's full analysis of the figures on the [GP pressures page](#).

The attached graphs by NHS Digital on online consultation submission, also clearly show the increase in the use of online consultations, which have nearly doubled in the past year.

Watch Richard Vautrey's full speech [here](#).

The resolutions will be added to the [website](#), along with recording of the event, shortly.

COVID-19 VACCINATION PROGRAMME

As of 13 May, [38-39-year-olds](#) (part of cohort 11) are now eligible to receive the COVID-19 vaccination in England. This comes after [JCVI updated their advice for vaccination of those under 40](#) last week, which NHSE/I issued [guidance](#) on for GP practices.

COVID vaccine status

The [Government has announced](#) that from 17 May 2021, people will be able to demonstrate their COVID-19 vaccine status for travelling purposes, by accessing the NHS app, or by calling 119. People are also strongly advised not to contact their GP to prove their vaccine status.

“Do not contact your GP surgery about your COVID-19 vaccination status. GPs cannot provide letters showing your COVID-19 vaccination status.”

This was also supported in a motion at the LMC UK Conference passed on Tuesday, which called for easy access to complete vaccination and immunisation record, to provide evidence for employment and travel purposes, to reduce the need for patients to request this from their GP.

In preparation for the requests that may arrive in general practice, practices can use the following draft text to inform messages on your websites and to signpost patients to:

“Thank you for contacting the surgery enquiring about COVID vaccination certification.

We are unable to issue this certificate at the practice.

Please see the [Gov.uk website](#) for further information.

Proof of your vaccination status will be available on the NHSapp, which is also valuable for accessing your health records and ordering repeat prescriptions.

The NHSapp can be downloaded from [here](#) for iPhone or [here](#) for android.

Alternatively, you can call the NHS helpline on 119 (from 17 May) and ask for a letter to be posted to you. This must be at least 5 days after you’ve completed your course of the vaccine, the letter may take up to 5 days to reach you.

Kind regards *Your Surgery* ”

Changes to National Booking Service (NBS) for pregnant women

The new NBS functionality will enable pregnant women to book appointments at a site that offers the Pfizer-BioNTech or Moderna vaccine following a series of screening questions. This is in line with JCVI guidance and the [Green Book](#).

Every woman who is pregnant or thinks she might be, should be offered a discussion on the potential risks and benefits of vaccination with a clinician, so that she can make an informed choice about whether to receive it. Pregnant women will be able to have a conversation with a healthcare professional at their vaccination appointment or can speak to their maternity team or GP service.

Vaccine data

Nearly [55 million doses of COVID vaccines](#) have now been delivered in the UK, and over 18 million have also received their second dose. The latest [data](#) show that over 30 million people in England have received their first dose, and 16 million their second dose.

Read more about the latest changes in the BMA [guidance about the COVID-19 vaccination programme](#).

ONLINE CONSULTATIONS - CONTRACTUAL REQUIREMENTS

There have been a growing number of concerns across the country relating to NHSE/I guidance suggesting, and local commissioners requiring, practices to maintain online consultations and remote triage systems.

The contractual position

Before the pandemic, as part of the [2019 GP contract deal](#) (paragraph 5.10 (i)) GPC England agreed that it would eventually become contractual for practices to offer online consultations during core hours. This agreement has not yet been added to the contract regulations, so is not currently a contractual requirement. However, GPCE also agreed that practices should offer online consultations as early as possible, provided that the necessary infrastructure is in place, but it would not become a requirement until it is entered into the contract regulations. It is therefore for practices to determine how best they use online consultation systems, including what hours they are available, and they should try to use them in such a way that helps with triage and workload management, enabling the delivery of a safer and more accessible service to all their patients.

The reality for practices and patients

The COVID pandemic has necessitated the implementation of online consultations and remote triage ahead of time. Many practices have found remote triage and online consultation systems useful as a way of gathering more information from patients to assess whether they need to be seen face to face, and to direct them to the most appropriate service/healthcare worker

as well as manage demand, workload and crucially safety during the pandemic. However some practices find these systems can increase demand and workload pressures, and many practices as well as patients want a return to arrangements that we last saw in 2019.

It is clear that patient experiences and their expectations have changed due to the pandemic, and that both patients and practices are now using technology to support consultations to a greater extent, but it is also clear that practice workload and demand (which was very high before the pandemic) has also increased over the last few months as we move into the recovery phase.

GPCE has been rebutting suggestions in the media that practices have been preventing patients from accessing services face to face, as any patient who needs it can, and has always been able to, have a face to face appointment. Telephone and online consultations have been appropriately used by practices as a safer way of consulting during the pandemic period, and has allowed many millions of patients to access appointments. Many lives may have been saved as a result.

The future

We all hope to get back to a greater proportion of face to face appointments when it is safe to do so and government restrictions allow, as this is at the heart of good doctor patient relationships and why many of us became and continue as GPs, but that also depends on the capacity of a limited and exhausted workforce to cope with growing demand. We therefore need the government and NHSEI to do far more to support general practice at this critical time, not just with IT, but practical support for the workforce and funding to improve practice premises to create safer environments.

The whole model of access to general practice, including the impact on practice workload and the patient experience, must be reviewed as we move toward a new normal. Practices need the flexibility to find a model that works for their patient population and for the practice workforce – this cannot be a one-size-fits-all approach with total or majority online service, but equally cannot be a total face to face service; there will be a need for a balance.

DPN FOR GP DATA FOR PLANNING AND RESEARCH (GPDPR), LEGAL DIRECTION

NHS Digital issued a [Data Provision Notice \(DPN\)](#) on 12 May to all practices in England notifying them of their intention to begin extracting data as part of the GP Data for Planning and Research (GPDPR) programme. GPDPR is the

successor to the GP Extract Service (GPES) and it is a legal requirement for practices to comply with the DPN.

Read the [joint statement with the Royal College of GPs](#) about this.

Practices will need to comply with DPN; update your Privacy notices; consider as a practice if you will proactively be contacting patients to inform them of what is changing; and register type1 opt outs in a timely fashion.

See also these key documents/links:

[Data Provision Notice \(DPN\)](#)

[Privacy statement](#)

[Patient information on GDPR](#)

[Transparency notice](#)

[Type 1 opt-out form](#)

[Next steps for GPs](#)

NEW GP PAY AND PENSIONS SYSTEM

The new GP Pay and Pensions system is due to become available to practices and GPs on 1 June. PCSE has this week [written to LMCs](#) with further information setting out some of its preparatory work and the support which will be available to users of the system.

MENTAL HEALTH AND AWARENESS WEEK 2021

It is the [Mental Health Awareness Week this week](#), hosted by the mental health foundation.

The BMA now offers face-to-face counselling, in addition to their [existing wellbeing services](#). For the next six months, you can access one-off support or, after triage, a structured course of up to six face-to-face counselling sessions, provided by the BMA's existing accredited provider Health Assured, through a grant from the [CHSA](#). Call 0330 123 1245 today or [visit the website](#) for more information.

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

LOCAL MENTAL HEALTH AND WELLBEING SUPPORT

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](#).

There is help and assistance available within the Herefordshire and Worcestershire Healthy Minds service. They are able to provide bespoke talking therapies for all colleagues irrespective of your role in your organisations to assist with anxiety, low mood, stress and other common mental health problems. Referral is easy and can be completed via visiting <https://www.healthyminds.whct.nhs.uk/>. This is a NHS service and as such is free at the point of contact and confidential.

The Service Manager, Phill Morgan Henshaw is happy to answer any questions regarding referral and treatment and can be contacted on 01432 842200 or via phill.morganhenshaw@nhs.net.

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.

WORCESTERSHIRE ISSUES

Non-Principles Representative

The LMC currently has a vacancy for a Non-Principal co-opted member. We would be grateful if practices would discuss amongst themselves whether there is any doctor within your team who might be interested in filling this vacancy.

It is clearly a very crucial time for general practice with many changes and non-principles remain an important and significant part of our workforce.

The Committee meets (virtually at present) on the second Thursday of the month but normally meets at the Charles Hastings Education Centre at 7.30pm. GPs who attend are paid an honorarium plus travel expenses. Any additional work they may volunteer to do is also properly remunerated. If there is anyone who is interested please contact the LMC Office to discuss the possibility of observing a meeting.

LMC WEBSITE

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

[Vaccination Accelerating Second Doses for Cohorts 1-9](#)

[Conference News May 2021](#)
[GP Data May 2021](#)

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.

MEMBERS OF THE WORCESTERSHIRE COMMITTEE

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Registrars Rep: Dr J Chun (North)
Dr L Jones (South)

Practice Manager Representatives:

Helen Garfield, Representative WF PM
Michelle Hallahan, Representative R&B PM
Meryl Foster, Representative SW PM

First5 Rep: Dr M Venables
IT Rep: Dr R Williams
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Representatives:

All 20 practices are represented at Committee Meetings

Worcestershire and Herefordshire GPC Representative: Dr S Parkinson

The next LMC meetings will be:

Worcestershire – 20th May 2021
Herefordshire – 26th May 2021