

24th May 2021

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VOTE OF NO CONFIDENCE IN NHS ENGLAND LEADERSHIP

As lockdown measures are easing to various extents across the UK and the [BMA urging 'utmost caution'](#), GPs in England are understandably angry after receiving the letter from NHSEI recently about face to face appointments and seeing walk-in patients in advance of an updated SOP whilst the [Government's guidelines](#) still recommend social distancing in healthcare settings, and at the same time asking for second doses of COVID vaccinations to be brought forward, causing enormous pressure on general practice.

If it has not been evident to government, media or the public before now, it is now clear beyond doubt that general practice is under immense strain as a result of significant and unsustainable workload pressures and GPs are delivering a far greater [number of consultations](#) (3m more) than they did at the same time two years ago, before the onset of the COVID-19 pandemic. This not only follows the serious impact of the pandemic and the hugely impressive involvement of GPs and their teams in delivering the COVID

vaccination programme so quickly and effectively, but also the major scale of the NHS backlog and that GP recruitment and retention is still nowhere near at the levels we need and your government has pledged to address. Added to this, demand for our services has increased significantly through the use of additional means of communicating with patients through the growing use of online consultations.

As stated in Richard Vautrey's [address](#) to the UK LMC Conference, general practice has been through a 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.

The media headlines of recent days and the subsequent [letter](#) relating to the NHSE/I's [Standard Operating Procedures](#) (published last week) 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. **Note that this is guidance and not contractual. It is for practices to determine how they meet the reasonable needs of their patients.**

GPC have already expressed their very deep concern to NHSE/I about the contents of their letter, and have been candid about how it has been received by the profession.

GPC have also [written to the Secretary of State for Health, Matt Hancock MP](#), calling for the Government to provide urgent support to general practice and clarity to practices and patients about the expectation to deliver more face-to-face appointments and enable walk-in patients whilst also maintaining safe waiting and reception areas, and have asked for an urgent meeting to discuss this. This follows a meeting this week to discuss the situation with Health Minister in England, Jo Churchill MP. The letter also outlines a number of changes which the Government must make if practices are to increase the number of face-to-face appointments. Read their press statement [here](#).

Worcestershire LMC have written a [letter](#) to patients which can be used on practice websites, explaining the way in which we are working and the demand currently facing general practice and asking patients for their support and

patience. We have also written a [letter](#) to all local MPs outlining our concerns regarding the lack of support and resource available to practices.

In the GPC England meeting last week, an Emergency Motion of no confidence in the leadership of NHS England was passed following its “tone deaf” letter to practices the previous week around face-to-face appointments, and longer-term failure to support, or recognise the efforts of, the profession over the last 14 months. The motion also demands an explanation from the Government as to why the letter was sent last week and an urgent meeting with the Secretary of State for Health and Social Care. As a result, the committee has now ceased all formal meetings with NHSE/I and this will continue until sufficient steps have been taken to give the committee confidence to justify a resumption in such meetings.

This motion sounds a much-needed warning bell, rung by GPs at the end of their tether, emotionally and physically exhausted by the past 14 months. The onus is now on NHS England and ministers to fix a broken system so that patients as well as doctors have a GP service that is fit for purpose in every way. Read the full [statement](#).

GPC and LMCs are calling for an end to this management-by-directive approach which is not appropriate at this stage of the pandemic. To reiterate, such guidance is not contractual and it is for practices, as independent contractors, to determine how they meet the reasonable needs of their patients, and how they organise their appointment and access arrangements, including online consultations and triage, in the best way they can utilising their available capacity and expert knowledge of their local community.

The story about the vote of no confidence was widely covered in the [Telegraph](#), [Mail Online](#), the print version of the Times, [GP Online](#), and [Pulse](#). It was also mentioned on BBC Radio 4 on Friday, and across regional BBC stations.

The BMA [statement](#) on the [NHS England letter about the SOP](#) published last week on returning to face-to-face consultations was covered by [The Times](#) (paywall), front page of the The Daily Telegraph (print), [GP Online](#) and [Management in Practice](#). Richard Vautrey was quoted saying: "We need to be very clear, GP practices have continued to see patients in person during the pandemic, but as with many other NHS services, the number of face-to-face appointments has understandably had to reduce to protect patients - particularly those at higher risk if exposed to such a potentially lethal virus – and to protect our staff." He was also interviewed on LBC News on Saturday on this subject where he said that it was vital that doctors had kept their

patients safe throughout the pandemic without bringing them in unnecessarily to health settings.

ONLINE CONSULTATIONS – 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.

COVID-19 VACCINATION PROGRAMME

[34 and 35-year-olds](#) will now receive texts inviting them to book a COVID vaccination via the national booking service, at an NHS vaccination centre, pharmacy or GP vaccination site.

COVID-19 vaccination: accelerating second doses for priority cohorts 1-9

Following the recommendation by JCVI that reducing the dosing interval to help protect the nation from the COVID-19 B.1.617.2 variant, the [Government has instructed](#) that appointments for a second dose of a vaccine **will be brought forward from 12 to 8 weeks** for the remaining people in the top nine priority groups who have yet to receive their second dose. People should continue to attend their second dose appointments, and nobody needs to contact the NHS. The NHS will let those who should bring their appointment forward know, when they are able to do so.

Vaccination sites will receive an increase of the AstraZeneca vaccine to support with rescheduling second dose appointments.

The [letter from NHSE/I](#) promised additional financial support would be made available to vaccination centres to cover the administration costs of this activity and last week GPC pushed for this to be made. NHSE/I has now published [Further details on the support available for PCN-led sites](#), including CCGs and ICSs to bring in additional workforce where possible, and additional payment of £1,000 for PCN groupings for rescheduling second dose appointments on or

after 25 May 2021. They have also updated their [FAQs on providing second doses](#).

Updated Enhanced Service Specification

The [Enhanced Service Specification](#) for the COVID-19 vaccination programme 2020/21 has been updated to introduce a 3 month maximum period within which payment claims must be made, a change to restrict PCN groupings to using a single Point of Care system, as well as a change to permit the administration and payment claim of a single dose vaccine.

BMA media campaign '*Spread the word, not the virus*'

The BMA has launched a [social media campaign to encourage a better uptake of COVID-19 vaccinations amongst communities from minority ethnic backgrounds](#).

Working with a group of influential social media creators, who have developed short video posts for Instagram, it is hoped that the campaign will pass on the message that everyone who can be, needs to be vaccinated so that the risk of infection and illness reduces and life can get back to normal. Find out more [here](#).

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.

Storage of Pfizer vaccine

Following [reports by the European Medicines Agency](#) that the approved storage period in a fridge for the Pfizer vaccine could be extended from days to weeks, the [MHRA has approved](#) new storage conditions for the vaccine, extending the length of time the thawed vaccine can be stored at normal fridge temperatures from 5 days to 31 days. NHSE/I has also published a [letter](#) about the change to shelf life of the Pfizer vaccine when stored in refrigerators at 2-8C. This change makes a big difference to the remaining vaccination campaign and potentially simplifies the giving of boosters at the same time as flu vaccines

later in the year. However work still needs to be done on trying to reduce pack sizes. We have also questioned again the continued need for a 15 minute observation period after vaccination.

Vaccine data

Nearly [60 million doses of COVID-19 vaccines](#) have now been delivered in the UK, and over 18 million have also received their second dose. The latest [data](#) show that over 31 million people in England have received their first dose, and 18 million their second dose.

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

NHS STANDARD CONTRACT 2021/22 – NEW “INTERFACE” PROVISION

Following reports from GPs regarding inconsistent implementation of [NHS Standard Contract](#) requirements on secondary care providers relating to the interface with local primary care teams, the BMA has worked with NHS England on the introduction of a new provision in the contract to improve collaboration between clinical teams.

The new provision requires that secondary care providers work with their local commissioners to assess by the end of September, and annually thereafter, their compliance to the interface requirements of the contract. The commissioners and providers will have to agree an action plan to address any deficiencies identified by their assessment and ensure that this action plan is informed by discussion with and feedback from the relevant LMCs, and they also need to ensure that the action plan is adopted in public by their Governing bodies, and that progress on its implementation is shared with the relevant LMCs.

GP DATA FOR PLANNING AND RESEARCH, LEGAL DIRECTION

On Wednesday 12 April, NHS Digital issued a [Data Provision Notice](#) (DPN) to all practices 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. Your IT supplier will be in touch separately with instructions on how to comply as these vary by system.

These are the next steps that practices need to take include complying with DPN, update your Privacy notice, 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 GPDPR](#)

[Transparency notice](#)

[Type 1 opt-out form](#)

[Next steps for GPs](#)

A joint statement from BMA and RCGP can be found [here](#).

PRIMARY CARE SYSTEM DEVELOPMENT FUNDING AND GPIT FUNDING GUIDANCE

NHSE/I has published [primary care system development funding and GPIT funding guidance](#) for 2021/22. This outlines the funding, which GPCE has played a significant role in securing, both nationally and for each region for a range of general practice schemes. In summary at national level the funding available this year includes:

- £746 million for ARRS (£415 million included in the CCG baseline and £331 million held centrally)
- £55 million (at least) for GP fellowships
- £8.1 million for mentor scheme
- £15.5 million for the NPPS
- £120k per ICS for flexible staffing pools and digital staffing platforms
- £12 million for local GP retention fund
- £12 million (at least) for training hubs (separate to HEE funds for training hubs)
- £5 million for international GP recruitment
- £65 million for digital first support (additional £3m to fund staff for NHSEI regional teams)
- £16 million for online consultation software systems
- £246.5 million for GPIT systems and support in CCG baselines
- £13 million for technology upgrades
- £80 million GPIT BAU capital
- £105 million for GPIT futures framework
- £10 million for Access improvement programme (three streams of £5m, £2m and £3m)
- £29.2 million for PCN development

- £8.5 million for General Practice Resilience Programme
- £40 million for ETTF

LMC UK CONFERENCE 2021

The LMC UK Conference was held last week, as a virtual event. See the [resolutions](#) and watch a [recording](#) of the event.

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.

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:

[LMC Letter to Worcestershire MPs](#)

[LMC Letter for Patients](#)

COVID 19 RESOURCES

[BMJ – news and resources](#)

[RCGP COVID-19 information](#)

[NHSE/I primary care bulletins](#)

[NICE resources](#)

WORCESTERSHIRE AND HEREFORDSHIRE LMC LTD

**Registered office: St Stephens Surgery, Adelaide Street, Redditch, Worcs B97 4AL
Tel. 01527 65082**

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

CHAIRMAN: Dr David Herold
Riverside Surgery, Waterside, Evesham, Worcs. WR11 1JP
Tel: 01386 444400 Email: d.herold@nhs.net

VICE-CHAIRMAN: Dr Matthew Davis
Bewdley Medical Centre, Dog Lane, Bewdley, Worcs
DY12 2EF
Tel. 01299 402157 Email: matthew.davis@nhs.net

SECRETARY: Dr Gillian Farmer
St Stephens Surgery, (address and contact details as above)
Email: gfarmer@worcslmc.co.uk

EXECUTIVE OFFICER: Lisa Siembab
St Stephens Surgery, (address and contact details as above)
Email: lsiembab@worcslmc.co.uk

Representatives:

BROMSGROVE: Dr D Pryke
Dr K Hollier

REDDITCH: Dr I Haines
Dr M Shah

WYRE FOREST: Dr M Davis
Dr S Morton
Dr J Rayner

WYCHAVON: Dr D Herold
Dr J Rankin
Dr K Gines

MALVERN: Dr P Bunyan
Dr R Khekar

WORCESTER: Dr F Martin
Dr C Whyte
Dr R Benney

Co-opted Representatives:

Out of Hours: Dr E Penny
Dispensing: Dr J Rankin
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
Non Principals: Dr W Safdar
Clinical Directors: Dr R Williams
BAME: Dr W Safdar

MEMBERS OF THE HEREFORDSHIRE COMMITTEE

SECRETARY: Dr Nigel Fraser
Wargrave House Surgery, 23 St Owen Street, Hereford, HR1 2JB
Tel: (01432) 272285 Email: nfraser@hereflmc.co.uk

MEDICAL DIRECTOR: Dr Paul Downey
St Stephens Surgery, Adelaide Street, Redditch B97 4AL
Tel: 01527 65082 Email: pdowney@hereflmc.co.uk

EXECUTIVE OFFICER: Lisa Siembab
St Stephens Surgery, (address and contact details as above)
Email: lsiembab@worcslmc.co.uk

Representatives:

All 20 practices are represented at Committee Meetings

Worcestershire and Herefordshire GPC Representative: Dr S Parkinson

The next LMC meetings will be:

Worcestershire – 10th June 2021
Herefordshire – 26th May 2021