

LMC Update Email 26 March 2021

Dear Colleagues

COVID-19 one year on

This week marks one year since the first UK lockdown was introduced in order to combat the spread of COVID-19 and the fight back, with the help of the vaccination roll-out, is gathering speed. It is though concerning that national daily case numbers have stopped falling and in some areas are rising again. There is clearly some way to go in dealing with the pandemic.

The vaccination effort started only a few short months ago, and more than half of the adult population in the UK have already received at least one dose of the vaccine. It is an incredible achievement to have reached such a significant milestone so quickly. Thank you to all involved in this vitally important task which has been achieved whilst at the same time managing many other workload pressures.

Practices across the nation have been working together in groups, often in PCNs (primary care networks) to deliver the vaccination programme locally. Ever since we started, we have been vaccinating people come rain or shine. Even when snowstorms tried to put a spoke in the wheel, armies of volunteers rallied with shovels, clearing snow in car parks and enabling people to get to their appointments.

The vaccine roll-out demonstrates the value of general practice. GPs, by the very nature of their contractual arrangements, are incredibly adaptive, flexible and responsive to new situations. They understand their patients and their communities. If you give practices the necessary resources and the flexibility to get on with it, that's what we will do. And that is exactly what has happened.

Read the full article here

Support for CCGs in addressing vaccine inequalities (England)

In February, £4.2 million of funding was allocated to STPs to be used across CCGs to support and enable locally led community engagement in all areas with health inequalities. NHSE/I has now pledged an <u>additional £3 million of funding</u> to support further local activity in addressing local vaccine inequalities. From 26 March, regions are invited to submit funding applications for their CCGs. Read more <u>here</u>

COVID-19 vaccination programme (England)

As we reported last week, although vaccination supplies are increasing this week, there will be a reduction of supply of COVID-19 vaccinations from next week for about four weeks due to reductions in national inbound vaccines supply. We are told that this should not impact the delivery of second doses. Vaccinations sites are encouraged to continue their efforts in maximising uptake in cohorts 1-9 which are yet to be vaccinated.

We are expecting a statement from JCVI shortly on details relating to the next phase of vaccination for groups 10-12.



Frequently Asked Questions for second doses

NHSE/I has published some <u>FAQs to help answer some questions relating to second doses of the COVID-19 vaccination</u>, including location of second doses, interval period and consent.

Quality Assurance Framework and SOP for lateral flow devices for COVID-19 vaccination sites

NHSE/I has published a Quality Assurance Framework for COVID-19 vaccination sites, to use as a tool aligned to the operating frameworks and standard operating procedures underpinning the delivery models for these settings.

NHSE/I has also published a <u>Standard Operating Procedure (SOP)</u> for usage of lateral flow devices for <u>asymptomatic NHS staff testing</u> at vaccination sites.

COVID-19 vaccines and pregnancy

There has been some confusion around the eligibility of pregnant women for the COVID-19 vaccine. While it is not currently available to all pregnant women, those who are at high risk of exposure to the virus, including health and care workers, or with high risk medical conditions *are* eligible. This includes women diagnosed with gestational diabetes in pregnancy or those with a BMI of more than 40 at their antenatal booking appointment.

The benefits and risks of COVID-19 vaccination in pregnancy should be discussed on an individual basis. The discussion should include acknowledgement that, while there is no known risk associated with giving other non-live vaccines to pregnant women, there are no specific data as yet about the safety of COVID-19 vaccination in pregnancy. More information including FAQs and a decision aid are available from the RCOG website.

In addition, the National Clinical Director for Maternity and Women's Health, and the Chief Midwifery Officer, have published a <u>letter setting out actions for maternity services to identify and invite pregnant women for vaccination</u>, and enabling them to make an informed choice about receiving it.

Read more about the latest changes, including the delivery of second doses, added funding, and what practices need to do and the support available in our updated guidance page about the COVID-19 vaccination programme.

Vaccine dose data

Nearly <u>29 million people in the UK</u> have now received their first dose of the COVID-19 vaccine, and the latest <u>data report</u> shows that as of 25 March nearly 27 million doses of the COVID-19 vaccine have been given in England.

Weekly COVID-19 data update

The BMA's Health Policy team is now producing a weekly summary of key data on various aspects of the pandemic. The data is from external published sources (with links to the relevant data/study) and can be shared. The latest summary is attached with the Monday pdf.



Medical assessments for prospective foster carer and adopters

This week, we have published a <u>joint statement</u> with the Royal College of GPs, to support GPs in considering requests for medicals for prospective adopters and foster carers. These assessments play an important role in safeguarding vulnerable children and are the final requirement for many families across the country.

NHS Operational Planning and Contracting Guidance 2021/22 (England)

NHSE/I has published the <u>NHS Operational Planning and Contracting Guidance for 2021/22</u>, setting out the priorities for the year ahead, to restore services, meet new care demands and reduce the care back logs caused by the pandemic, whilst supporting staff recovery.

One of the priorities is expanding primary care capacity, which will largely be done through the increased ARRS allocation, and a renewed focus on recruiting and retaining an additional 6000 GPs.

Investment in General Practice report and data quality statement 2015/16-2019/20 (England)

NHSE/I has published the annual Investment in General Practice Report 2015/16-2019/20, Data quality statement and GP investment. This shows the level of investment in 2019/20 compared with previous years. The increased funding received by general practice in England is in a greater proportion compared to other sectors in the NHS and is as a direct result of our 5 year contract agreement.

Annual allowance voluntary scheme pays 2018/19 deadline extension

In a previous newsletter we provided information on the annual allowance repayment scheme, which was introduced in England and Wales. The scheme guarantees any annual allowance tax charge in 2019/20, for eligible clinicians will be compensated for at the time of retirement. The deadline for submitting an application form for the scheme for GPs who have or who are planning to retire by 31 March 2021, has been extended to 31 March 2021. For detailed advice on the scheme, please click here.

Scottish GPC meeting update

The BMA Scottish GP Committee (SGPC) met yesterday, 25 March, and discussed the needs of general practice as it recovers from the pandemic and the changes introduced as a result of the pandemic which should be retained.

The committee also discussed the latest progress on the development of transitionary services and the next steps for the Memorandum of Understanding, as well as the redesign of urgent care across LMC areas, and the ongoing impact of Covid on general practice, including the ongoing vaccination programme and future of the community pathway.

The committee received various reports from the GP Sessional committee and GP Trainee committee. SGPC also heard updates on premises, IT, GP wellbeing, medical appraisal and pensions.

Weekly COVID-19 data update

The BMA's Health Policy team has started producing a weekly summary of key data on various aspects of the pandemic. The data is from external published sources (with links to the relevant data/study) and can be shared. The latest summary is attached.



BMA report on impact of COVID-19 on health inequalities

The BMA has launched a report, 'Mitigating the impact of Covid-19 on health inequalities', outlining a range of measures for Governments across the UK to ensure that those who have been most impacted by COVID-19 are protected in the immediate and longer term.

The report highlights concerns that the unacceptable inequalities that existed before the pandemic will only worsen for families who have been pushed into poverty, and disadvantaged communities that face further hardship due to job losses and COVID-19's socio-economic impact.

The BMA wants to work towards addressing the underlying inequalities which lead to unacceptable and avoidable differences in life expectancy, as well as quality of life across all communities. Read more and read the report here

BMA moral distress survey (UK)

The BMA has launched a <u>survey on moral distress</u>, open to all UK doctors, including retired doctors, although it is not aimed at medical students. The survey will remain open until Sunday 11 April.

The survey asks about your understanding of moral distress and moral injury, whether you have come across these terms before or have experienced them. The impact of COVID-19 and potential solutions are also considered. The findings will be used to make recommendations and allow the BMA to help mitigate this problem throughout the UK's medical workforce. Take the survey, and read more about moral distress and how it impacts doctors, here.

Training needs of LMC officers

GPDF have developed a project to help identify the support and training needs of LMC officers. Details of the project are attached and they would also welcome the completion of **this survey**. There are 23 questions separated into four sections and it should take no longer than ten minutes to complete.

GPC UK regional elections

The voting period for seats to the General Practitioners Committee (GPC) UK in the *Durham and Cleveland region* has reopened.

To submit your vote please visit https://elections.bma.org.uk/

If you live or work in the Durham and Cleveland region and do not have access to the voting, please contact <u>elections@bma.org.uk</u> and the team will be able to assist.

If you do not have a BMA web account?

To vote in this election you must have a BMA web account, if you do not have one please click here to create one. Please follow the link to 'request a temporary non-member account' and email your temporary membership number to elections@bma.org.uk to get access to vote in this election. The deadline for voting is **12pm**, **19 April**.

If you have any queries regarding the election process, please contact elections@bma.org.uk.

GPC election results

The voting for the following GPC UK regions has now closed. Congratulations to all the successful candidates and thank you to all those who took part in this year's election.



Contested

Norfolk, Suffolk, Great Yarmouth & Waveney - Ian Hume

Enfield & Haringey, Camden & Islington, Barnet, Kensington & Chelsea, Westminster - Farah Jameel

Merton, Sutton & Wandsworth, Kingston & Richmond - Richard Van Mellaerts

Salford & Trafford, Manchester, Stockport - Samira Anane

Forth Valley, Fife, Lothian, Tayside - Stuart Blake

E Sussex, W Sussex - Russell Brown

Gwent, Bro Taf, Morgannwg - David Bailey

Herefordshire, Worcs, Warks, Coventry - Sarah Matthews

Barnsley, Doncaster, Rotherham, Sheffield representative (by-election) - Clare Bannon

Uncontested

Sefton, Liverpool, Wirral - Robert Barnett
Grampian, Highland, Orkney, Shetland, Western Isles - Iain Kennedy
Somerset, N & E Devon - Mark Sanford-Wood
Birmingham, Solihull - Gavin Ralston
Northern Ireland - Alan Stout
Prison GP representative - Wayne Sturley

Media

Healthwatch England report on GP access

Healthwatch England has published a report showing that some people were struggling to access their GP and that only 54% of appointments over the past year have been face-to-face. Their key recommendation was for NHS England to commission a full review of GP access arrangements as part of the COVID-19 recovery plans. Responding to the report, I said: "We're acutely aware that remote appointments don't work for everyone, as this report highlights, but it's important to dispel the myth that patients without access to the internet have in some way been abandoned and simply cannot access their GP. The vast majority of initial contact with patients was made through phone calls, and practices will always see patients face-to-face when clinically necessary." This was reported by the Evening Standard and GP online.

Vaccine rollout

I appeared on *Sky News* last Friday talking about the success of the vaccine rollout and how the whole of the NHS should be incredibly proud of the work they have done. I appeared on the programme to reassure people that although there were some supply delays patients 'could be' assured that they will still be contacted to invite them to have the vaccine at the appropriate time. I was also interviewed on <u>BBC 5 Live</u> (1 hour and 5 mins in) about the vaccine rollout, where I talked about the hard work of healthcare staff and about some of the challenges that they have faced.

Read the latest GP bulletin <u>here</u>

Richard Vantey

Best wishes

Richard

Richard Vautrey

Chair, BMA GPs committee