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## **Second Phase of General Practice Response to COVID-19**

NHS England have produced the <u>latest guidance</u> for Primary Care on the Second phase of General Practice response to COVID-19 with an update to GP contracts and income protection arrangements.

Key points include:

## **Update on COVID Response**

- All Practices must now also deliver face-to-face care, where clinically appropriate
- Practices to resume as soon as possible services which may have been paused, managing pre-existing conditions and urgent demand
- It should be clear to Patients that all Practice premises are open to provide care, with adjustments to the mode of delivery. No Practice should be communicating to Patients that their premises are closed. Nor should they be redirecting Patients to other parts of the system, except where clinically assessed as appropriate
- An urgent need to prioritise key aspects of primary care not directly related to COVID-19 itself, in a proactive and sensitive way
- Sustaining many of the transformations in ways of working adopted during the height of the pandemic, including local system working; strong clinical leadership; a continuation of total triage; a continuation of hot hubs where these have been established and make sense in a longer term offer; flexible and remote working where possible; and rapid scaling of technology-enabled service delivery options
- Digital consultation should be offered as standard unless there are good clinical reasons otherwise
- More funding will be available a separate letter will be shared shortly on the **COVID** Support Fund for general practice

## **Expanding the Workforce**

- This is a top priority for PCNs this year
- Over 98% of Practices are now signed up as members of a PCN
- Urging all PCNs to take immediate steps to plan to expand capacity now, by using this funding rather than it being lost
- PCNs concerned about employment liabilities should be assured that NHSE/I is committed to the continued funding of these roles
- NHSE commitment to increasing the number of GPs, by working with training hubs, to implement GP recruitment and retention initiatives in their area
- The New to Partnership Payment has recently been launched



## **Cutting Bureaucracy**

- Re-purposing the appraisals process in the context of the pandemic, with a flexible approach to its re-introduction and focus on wellbeing as well as minimise the supporting information requirements
- NHSE will continue to recommend that appraisals are suspended, unless there are
  exceptional circumstances agreed by both the appraisee and appraiser the GMC
  has also announced that doctors who were due to revalidate between 17 March
  2020 and 16 March 2021 have had their revalidation submission dates moved back
  by one year

## QOF

- By guaranteeing financial support and temporarily reducing the current QOF requirements, NHSE is releasing capacity in general practice to focus on COVID recovery – and support those Patients most in need of long-term condition management support
- In 2020/21, NHSE is proposing that Practices will be:
  - o Asked to gear up for a major expansion of the winter flu programme
  - Asked to focus on early cancer diagnosis and care of people with a learning disability
  - Asked to maintain accurate disease registers, prescribing indicators, and the delivery of cervical screening indicators
  - Offered income protection on other indicators
- Absent to national agreement to the contrary, QOF will be reintroduced fully from April 2021

## GP contractual position from 1 July 2020

- From 1 July 2020 Practices should resume the following services if these have been deprioritised:
  - o New Patient reviews (including alcohol dependency)
  - Routine medication reviews
  - Over-75 health checks
  - Clinical reviews of frailty
- Healthcare professionals should discuss with the Patient, their carer, or their advocate the most suitable and safe way to conduct reviews and checks. Where they can be delivered safely on a face-to-face basis, this should be offered
- The routine call for shingles vaccination programme is reinstated from 1 July 2020
- From 1 July the requirement for Practices to engage with and review feedback from Patient Participation Groups (PPG) is also reinstated
- Practices engage with their PPGs to help understand and shape the changes in access to services to ensure that no one is inadvertently excluded. NHSE encourage Practices to conduct PPGs remotely
- Practices are asked to resume normal complaints management activities from 1 July 2020

<u>Dispensary Services Quality Scheme (DSQS)</u> Will be reinstated from 1 August 2020



## GP contractual position until 30 September 2020

- A suspension of the requirement that Practices report to commissioners about the Friends and Family Test returns
- A temporary suspension of the requirement for individual Patient consent in certain circumstances, to encourage increased use of electronic repeat dispensing (eRD)
- A continuation of the temporary increase in the minimum number of appointment slots that Practices must make available for direct booking by 111 to a minimum of 1 slot per 500 Patients

#### Investment and Impact Fund

Will commence from 1 October 2020

# LESs/LISs and Local Pilots

Encourage reintroduction of local enhanced services, local incentive schemes and local pilots as part of the wider plans to step up routine and non-urgent services

## Seasonal Influenza Vaccination Programme 2020/21

Sir Simon Stevens, Chief Executive of NHS England, announced at the weekend that "one of the key plans to reducing the impact of a winter wave of COVID-19 is to vaccinate millions of people against flu. The **flu jab could be given for free to everyone over the age of 50**, who are most at risk of becoming seriously ill or dying if they get coronavirus.

Although the jab won't protect against COVID-19, it could prevent people getting hospitalised with bad flu - in hospital they would take up beds that could be needed for COVID-19, and may also be at higher risk of catching the virus inside the hospital."

The Royal College of Physicians (RCP) has also called for this year's flu vaccination programme to be extended to all over 50s to avoid the normal flu season 'bringing the NHS to a grinding halt'. The RCP also said this should include bringing forward flu vaccinations for all NHS and social care staff aiming for a 100% uptake and could include expanding the programme to all Patients in the clinically extremely vulnerable group.

Whilst it is not yet known when a COVID-19 vaccine will be available, if there was to be a second wave or coronavirus which coincides with winter flu it would result in a perfect storm.

The NHS Directed Enhanced Service (DES) Specification for Seasonal influenza explains that Patients currently eligible for a seasonal influenza vaccination are:

- People aged 65 and over
- Pregnant women
- People aged six months to 64 years (inclusive) and defined as at-risk
- Locum GPs (to be vaccinated by the GP Practice where they are registered as a Patient)
- Health and social care staff employed by a registered residential care/nursing home or registered domiciliary care provider (to be vaccinated by the GP Practice where they are registered as a Patient)
- Health and care staff employed by a voluntary managed hospice provider (to be vaccinated by the GP Practice where they are registered as a Patient)







GP Practices should ensure they offer vaccinations to all eligible Patients and are required to ensure a proactive call and recall basis if considered at-risk (or a proactive call basis if not considered at-risk) with the aim of maximising uptake in at-risk Patients.

PCN workforce planning targets have also been deferred, while introduction of the Impact and Investment Fund (IIF), which aims to deliver extra money to speed up changes to services delivered by PCNs, has been postponed for at least six months.

## **GP National Patient Survey Results**

The GP Patient Survey (GPPS), an England-wide survey, providing GP Practice level data about Patients' experiences of general practice has just published the results of the latest survey. Questionnaires were sent out nationally between 2 January and 6 April 2020 and the summary report. You can view the National report, see how your GP Practice is doing or compare Practices.

#### NICE - New COVID-19 Guidelines

Over the coming weeks NICE will work with NHS England and NHS Improvement to create a single access point of advice for clinicians on COVID-19. They will transfer over 60 specialty guides on COVID-19 to the NICE website and map them against their existing guidelines and integrate them where possible.

# **Wellbeing Support**

Practices are reminded that there is a wealth of wellbeing support available including a wellbeing support helpline, a 24/7 text alternative, peer-to-peer, team and personal resilience support, free mindfulness apps and the Looking After You Too coaching offer.

# **CQC ESF: Discussion Questions for Independent Doctor and Clinic Services**

CQC ESF questions and prompts for Independent Doctor and Clinic Services were <u>updated</u> on 3 July 2020. The conversation with the CQC inspector will focus on four areas:

- 1. Safe care and treatment
- 2. Staffing arrangements
- 3. Protection from abuse and protection of human rights
- 4. Assurance processes, quality monitoring and business risk management

Data indicators the CQC will use to prioritise assessments include:

- Current rating
- Risk register
- Breaches of regulations
- Time since last assessment
- Registered manager in place
- Safeguarding enquiries
- Whistleblowing complaints
- Complaints to CQC
- Statutory notifications

