



# Update from the Consortium of Lancashire & Cumbria LMCs

Monday 1<sup>st</sup> June 2020

## Coronavirus (COVID-19) update

### NHS Test and Trace services across the UK

The DHSC announced its [NHS Test and Trace](#) local outbreak control plans designed to help control COVID-19. The plans involve rapid testing at scale, integrated tracing to identify, alert and support, and using data to target approaches to flare ups, at a local and national level.

Anyone who tests positive for coronavirus will be contacted by NHS Test and Trace and will need to share information about their recent interactions. This could include household members, people with whom they have been in direct contact, or within 2 metres for more than 15 minutes. If those in isolation develop symptoms, they can book a test at [nhs.uk/coronavirus](https://nhs.uk/coronavirus) or by calling 119. If they test positive, they must continue to stay at home for 7 days or until their symptoms have passed. If they test negative, they must complete the 14-day isolation period. Members of their household will not have to stay at home unless the person identified becomes symptomatic, at which point they must also self-isolate for 14 days to avoid unknowingly spreading the virus.

The GPC England Exec team have raised with NHSEI the need for much greater clarity on the any implications for health care professionals of the Test and Trace system. They have said if someone who works in, or has recently visited, a health or social care setting such as a practice tests positive for coronavirus, their case will be escalated to local public health experts, who will liaise with the relevant setting to agree on the most appropriate action. If they were wearing PPE at the time of the contact, this will not count as a contact. [An FAQ document has been produced and is attached.](#)

Read Dr Penelope Toff's, BMA public health medicine committee member, [press statement](#).

### PPE Portal

Earlier this week the Government announced that [GPs and small care homes can register on the PPE Portal](#), a new online portal for ordering emergency PPE from a central inventory, to supplement the wholesale supply route that already operates. The DHSC developed the portal in partnership with eBay UK, NHS Supply Chain, the Army, Clipper and Royal Mail.

### Principles of safe video consulting in general practice

NHSEI have published updated guidance on the [principles of safe video consulting in general practice during COVID-19](#).

### General practice research

You may wish to see the [QResearch News](#) Update for Spring 2020. This covers a wide range of activities and research projects using data uploaded from GP practices.





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## Antibody testing programme rollout for NHS staff and patients

[NHSE/I has written to all health systems advising them to commence antibody testing as soon as their laboratory capacity permits](#). The antibody testing programme will provide information on the prevalence of COVID-19 in different regions of the country and help better understand how the disease spreads.

Practices across Lancashire & South Cumbria should have received the [attached letter and consent form](#) from Dr Amanda Doyle regarding local arrangements.

NHSEI has now confirmed that the antibody test will be available for practices to use as practices deem appropriate to help manage their patients. The NHS lab result will be available to the practice in the normal way and it is their responsibility to inform the patient of the result and that a positive test does not indicate immunity to COVID-19. Where there is not a specific clinical indication for the test it may be offered to patients having their blood taken for other reasons if they wish to know whether they have been infected with COVID-19. However, there is no obligation for practices to do this.

## NHS Employers risk assessment guidance for BAME and other staff

[NHS Employers has now published guidance](#) on risk assessment for NHS organisations on how to enhance their existing risk assessments particularly for at risk and vulnerable groups within their workforce due to COVID-19. NHS Employers have advised that employers take an inclusive approach and have described that the guidance is applicable, with appropriate local adaptations, in all healthcare settings. The guidance includes further resources to provide advice on supporting health and wellbeing, mitigating strategies and risk assessment discussions.

[Guidance has also been produced by the Health and Safety Executive \(HSE\)](#) that is intended to help organisations identify who is at risk of harm. It includes templates and examples that organisations can adopt, along with specific guidance. This guidance emphasises the legal obligation of employers to do a workplace assessment.

## Protection of the public's health & most vulnerable must be an 'absolute priority' as lockdown eases

Read Dr Chaand Nagpaul's, BMA council chair, [statement](#) responding to the government announcing the move forward with the next stage of easing the lockdown.

## Temporary residents and travelling patients

BMA GPC have issued new guidance on the use of remote consultations by practices as a way of supporting other practices in tourist areas who would normally have to deal with temporary patients visiting area this summer. Patients are now much more likely to contact their own practice by phone or video rather than having to temporarily register with another practice. Read the guidance [here](#)





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## GP workforce data shows further fall in FTE GPs

The number of fully qualified full-time equivalent GPs dropped by 2.5% from March 2019 to March 2020, the latest official figures show. The [report](#) released by NHS Digital shows there were 27,985 FTE GPs on 31 March 2020 - 712 fewer than 31 March 2019. The total number of GPs also decreased by 0.6%. The number of FTE GP partners fell by 5.4% in the year, with the number of salaried GPs increasing by 4.5%.

Dr Krishna Kasaraneni, BMA GP committee executive team workforce lead, commented on this and were reported in [Pulse](#) and [GP Online](#).

## Appointments in General Practice

NHS Digital are now releasing data on a weekly basis showing weekly counts of appointments and the first report can be found [here](#). It is broken down by appointment status, health care professional, mode and time between booking date and appointment date at national level and a weekly sum of the total scheduled duration of appointments (in minutes) at national level.

The data has several significant caveats, specifically that the information does not give a complete view of GP activity so should not be used to infer a view of workload. GPC England is meeting NHS Digital to discuss these significant flaws in recording. However, practices should be aware that this information is being recorded and published and, therefore, should try to ensure that all patient contacts are appropriately recorded in clinical systems.

## GP and practice COVID-19 toolkit

The BMA continue to update their [toolkit for GPs and practices](#), which should help to answer many questions on a large range of topics relating to COVID-19. Last week they added some information on [home working and distribution of high-risk work](#) in the service provision section of the toolkit.

## District valuer services

BMA GPC met with NHSEI for an update on the Premises Review and to clarify expectations regarding engagement and consultation as more of the review workstreams get underway. NHSEI advised that it has suspended physical inspections of Primary Care Premises by District Valuer Services (DVS) in light of COVID-19, and that valuations will now take place via desktop review. DVS will be in touch with instructing CCG or local NHS England teams to confirm arrangements on a case by case basis.

## Supply of additional Direct Oral Anticoagulants (DOACs)

NHSEI has published [guidance on the supply of additional DOACs](#) (direct oral anticoagulants) during COVID-19 to support patients currently prescribed warfarin being prescribed a DOAC instead, where this is clinically appropriate.

