

## **Update from the Consortium of**

## Lancashire & Cumbria LMCs

Monday 8<sup>th</sup> June 2020

#### Coronavirus (COVID-19) update

#### **BMA fifth tracker survey**

Over 2500 GPs responded to the fifth <u>BMA tracker survey</u>. Please <u>see attached the GP specific results</u> from the survey and read a <u>blog</u> by Dr Krishna Kasaraneni, GPC England Executive team member, with his reflections on the survey results.

#### **Overall results**

The BMA's fifth COVID tracker survey shows that the demand from non-COVID patients is increasing, and that there is significant concern around ability to cope with this demand, and with a potential second peak of coronavirus. The <u>BMA has warned that this is not the time to be complacent around</u> <u>lockdown easing</u>, and to reduce the risk of a second peak and avoid the loss of more lives to COVID-19, BMA GPC are asking the Government to prioritise:

- A widescale and accurate approach to test, trace, isolate, support and follow-up with people with COVID-19 symptoms or those who have come into contact with people with symptoms.
- To take mitigating actions preventing the public and workers from contracting and spreading the virus while carrying out essential duties.
- Supporting the public in adhering to social distancing and infection control measures as restrictions are relaxed.

The survey also found that there are:

- supply issues with facemasks again
- increase in pressure to see patients without adequate protection, especially BAME doctors
- some positives from current way of working remotely and with less bureaucracy

#### Meeting with the Primary Care Estates Team

The LMC has recently been contacted by colleagues from the Primary Care Estates National Team at NHSE regarding a 'lessons learnt' exercise for estates within the response to COVID- 19. We discussed the challenges that some practices have faced in terms of how their premises may have affected the way that they could operate within the pandemic and how some practices have come across hurdles with regards to, for example, organising the isolation of patients within smaller premises.

Our premises lead, Abigail Askew, has been in contact with Clinical Directors on behalf of the Primary Care Estates National team and there have been many premises issues flagged up to us, particularly around difficulties in how best to utilise practice premises in order to ensure social distancing.

We will be in touch over the upcoming weeks once we have fed back to the national team and hopefully from this, we can start to help develop a Primary Care Strategy and some guidance documents for practices. We will also be getting in contact with CCGs to ensure they are involved in the discussions.

Please get in touch with us if you have any pressing issues.



# Update from the Consortium of Lancashire & Cumbria LMCs

#### Risk assessment guidance for BAME and other staff

At the beginning of April, the BMA called for a government investigation into the disproportionate impact of coronavirus infection on BAME healthcare workers and the community, and the <u>report by</u> <u>Public Health England has now been published</u>. BMA GPC believe this report is a missed opportunity. There is concern that the report fails to mention the staggering higher proportion of BAME healthcare workers who have tragically died from COVID-19 or that whilst this has now been a well-recognised problem for weeks, government has still not brought forward access to occupational health services or the necessary funding to support practices who have additional costs as result of trying to support and protect their staff following risk assessment. Read the BMA statement <u>here</u>.

The updated BMA <u>resources on conducting COVID-19 risk assessments</u>, specify that all doctors should be able to have a COVID-19 risk assessment and sign posts practical actions that should be taken to avoid or mitigate the risks which older, BAME or pregnant doctors – as well as those with pre-existing conditions – might face.

Dr Richard Vautrey, Chair of the BMA GPC, has written to Sir Simon Stevens calling for urgent action to be taken to make available the promised COVID-19 fund, to support practices that following risk assessments need additional locum cover for face to face consultations and to provide immediate free access to an occupational health service for all those working in general practice.

The updated <u>NHS Employers guidance</u> 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, was published last week.

#### Standard operating procedure for general practice in the context of COVID-19

The NHSE/I <u>Standing Operation Procedure for general practice</u> has been updated. Practices are reminded that the SOP is guidance only and not a contractual obligation. Read the BMA GPC summary of the SOP in the <u>attached document.</u>

#### **COVID-19** guidance

The BMA continue to regularly update their <u>toolkit for GPs and practices</u>, which should help to answer many questions on a large range of topics relating to COVID-19. There is also guidance on the following topics:

- Model terms of engagement for a GP providing temporary COVID-19 services
- Terms and conditions for sessional GPs

For further information, see the BMA's <u>COVID-19 Webpage</u> with all the latest guidance including links to the BMA's <u>COVID-19 ethical guidance</u> and <u>priorities for easing lockdown</u>.

You can also visit the <u>LMC website</u> for useful resources and guidance.





# Update from the Consortium of Lancashire & Cumbria LMCs

#### Shielding

Ruth May, Chief Nursing Officer in England, and Steve Powis, Medical Director at NHSE/I, have published a letter about the <u>NHS support to people who have been shielding</u>, which confirms government's updated <u>guidance which advises that shielded patients can now leave their home</u>, and also provides guidance on removing people from the list. DHSC will be sending out a letter this week to a small number of patients who have recently been removed from the list and a copy is <u>attached</u>. BMA GPC are concerned that although the letter provides more flexibility around seeing patients in clinical settings rather than home visits and suggests the lead role can be done by a team, it does not recognise the workload or other implications for practices. BMA GPC also believe many patients won't need this as they are already experts in managing their condition and know how to access continuity of care when necessary. Concerns about this will be raised with NHS England.

In response to the Government's announcement, Dr Richard Vautrey commented that it remained unclear whether shielded people were allowed to visit doctors' surgeries for routine medical treatment, which could be safer than making home visits, and that 'We hadn't been informed directly about the new guidance. The strong advice had been that patients should receive all of their healthcare in their home setting wherever possible.' This was reported by the <u>Guardian</u> and <u>GPonline</u>

#### LMC HR: Updated COVID FAQs for Employers

Our LMC HR legal team at Freeths have updated the <u>FAQs for employers</u> on their website. The key updates reflect the Government announcements for 14 days quarantine for travellers to the UK and the latest easing of the lockdown

#### BMA statement on wearing face masks

Following the <u>announcement that face coverings will be made mandatory on public transport</u> in from June 15, Dr Chaand Nagpaul, BMA council chair, welcomed the new measures but said that these changes need to come into effect now, rather than later in the month, and that face masks should also be worn in other settings where social distancing is not possible. Read the full BMA statement <u>here</u>

#### **Electronic repeat dispensing (eDR)**

NHSEI has sent a <u>letter to GPs and community pharmacists</u> about the temporary suspension of the requirement for patient consent to use of the electronic repeat dispensing (eRD) system, until 30 June 2020. If GP practices have not already received a list of patients receiving electronic prescriptions, they should request a list of their registered patients that the NHS Business Services Authority has identified as potentially being suitable for eRD, based on recent medication history. Practices can request this by emailing <u>nhsbsa.epssupport@nhs.net</u>





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#### A patient's guide to advanced care planning

The BMA has published an <u>information leaflet that practices can give to patients</u> who might want to think about how they would like to be treated and cared for in the future – including in the event of getting COVID-19. It explains what advance care planning is and covers different types of advance care planning. The leaflet is also available in the <u>in the BMA GP practice toolkit</u>.

#### **GP Recruitment**

As part of the <u>'Choose GP' campaign</u>, on the GP National Recruitment office website and on <u>Facebook</u>, Health Education England receives a lot of enquiries from doctors who are keen to be put in touch with a GP or trainee either in the area they live or with similar interests. The chance to have direct peer to peer conversations is invaluable to them. The service has been running for the last 4 years and has been proven to make all the difference between someone applying or not.

HEE keeps a list of volunteers who are happy to be contacted occasionally and willing to share experience and expertise – always with prior permission. If you are willing and able to do this contact gprecruitment@hee.nhs.uk with details including your name and contact details, practice name and which part of the country, how long you've been a GP or trainee, any special interests/expertise or opportunities you're pursuing or would like to as a GP (clinical and non-clinical) and the different settings you work in as well as practice and indicate whether you joined GP training from foundation year (or equivalent), trained and worked in another area first or switched to GP training from another specialty training programme.

#### Briefing on role of contract tracing in outbreak control

The <u>attached briefing</u> from the BMA's Public health Medicine Committee (PHMC) covers the role of contact tracing in outbreak control and the PHMC position, in the context of the test and trace systems being rolled out, with links to information on the systems in the devolved nations. Please also see <u>attached a letter</u> from PHE to Directors of Public Health.

#### Extension of Serious Shortage Protocol for fluoxetine 10mg tablets

Due to ongoing supply issues with fluoxetine 10mg tablets, the Serious Shortage Protocol currently in effect for fluoxetine 10mg tablets is being extended. The SSP was issued on 12 March 2020 with an initial end date of Friday 12 June. The SSP will now end on Friday 11 September. Read more on the <u>SSP page on the NHSBSA website</u>.

#### Mental health and wellbeing

The <u>latest tracker survey</u> also showed the personal impact of the pandemic on doctors' mental health and wellbeing, with increased stress, anxiety and emotional exhaustion in recent months. The survey was reported on by the <u>BMJ</u>.

Read the BMA's report on the <u>mental health and wellbeing of the medical workforce</u>, which sets out ten recommendations to be addressed to protect staff during the pandemic and in the future.

