



Message from Victoria Eaton – Director of Public Health for Leeds
Information correct on Friday 28th August 2020

I'm writing this to provide you the latest update on our local rates of COVID-19 infections. I wanted to reassure colleagues that we are still experiencing lower rates than our neighbours in West Yorkshire, but that we all remain vigilant and continue to take a preventative approach. Since the end of July, we have seen our citywide infection rate increase from 4.1 to 18.9 per 100,000, based on a seven-day reporting period (figures correct on 28 August). This is in line with the Yorkshire and Humber average, but significantly lower than our neighbouring local authorities. For example, Bradford is at 43.3 per 100,000. This continues to cause concern as people are transient, so the risk of infections spreading from neighbouring areas is one we continually monitor.

As many of you will be aware, we have seen a local outbreak amongst employees at the Greggs distribution depot in Bramley, who have tested positive for COVID-19. Leeds City Council, Public Health England, and Greggs have been working closely together to ensure safe management of the outbreak. Following further testing, more staff have been identified as being positive. The workplace is being deep cleaned and further contact tracing carried out, with necessary advice shared about self-isolating and awareness of symptoms. We are satisfied the necessary steps are being taken quickly to minimise any further spread of infection.

We have seen incidences of local clusters in Kirkstall and Harehills and surrounding areas. I'm pleased to say that we have seen positive progress resulting in a decreasing rate of infection in Kirkstall and a stabilising rate of infection in Harehills. We must remain focused on our efforts to reduce the spread. It's important to remember that cases are being reported across the city so we must maintain vigilance and we would request that practices get in touch with public health colleagues with any soft intelligence you may have.

Because of the rise in rates, we have developed an enhanced offer with increased testing using mobile units, working with the Department of Health and Social Care. We also have access to a pop up testing unit so we can carry out intensive testing in areas of concern. Alongside that, a proactive and intense community prevention effort is underway that involves access to mobile testing units and public preventative advice through door knocking in the areas affected by the cluster. The testing units are at Fearnville leisure centre, Kirkstall leisure centre, Bilal centre in Harehills, and Pudsey civic centre. The university site will be at the Gryphon sports centre, Woodsley Road. We are closely reviewing trends and will move testing unit's dependant on local needs.

Our next challenge is preparing for schools to reopen in September, as well as around 70-80,000 students returning to the city. To support this, a new walk-to testing centre will open at the Gryphon Sports Centre on the western edges of the University of Leeds campus next week. This is addition to the walk-through testing centre at Bridge Community Church in Burmantofts (Rider Street, LS9 7BQ).

We continue to monitor activity at care homes and we will alert PCNs on clusters in the community.

We are very much in a pandemic. As local leaders, I ask you to continue following guidance around social distancing, wearing face coverings in enclosed areas and continuing to make your work environments COVID-secure.

Thank you for your ongoing support. Together we can keep our communities as safe as possible.

Second Walk in Testing Centre in Leeds - University of Leeds campus

It's really important that we continue to remind people that anyone displaying COVID symptoms books a test. People can book a coronavirus test by calling 119 or by using the [NHS website](#).

Please [share this video](#) to help patients understand what to do before the appointment and what will happen at the walk-through testing site. Videos in alternative languages are available through this [Leeds City Council playlist](#) on YouTube.

The national flu immunisation programme 2020 to 2021

Details of the 2020-21 flu immunisation programme were announced this week in a [joint letter from the CMO for England](#), the Public Health England Medical Director and Director for Public Health, and the NHSE/I medical director. The letter outlines that this year as part of the wider planning for winter, and subject to contractual negotiations, flu vaccination will be additionally offered to:

- household contacts of those on the Shielded Patient List - specifically individuals who expect to share living accommodation with a shielded person on most days over the winter and therefore for whom continuing close contact is unavoidable.
- children of school Year 7 age in secondary schools (those aged 11 on 31 August 2020).
- health and social care workers employed through Direct Payment (personal budgets) and/or Personal Health Budgets, such as Personal Assistants, to deliver domiciliary care to patients and service users.

It is intended to further extend the vaccine programme in November and December to include the 50 to 64-year-old age group but this will be subject to vaccine supply and notification about this is likely in September. It is planned that this extension is phased to practices to prioritise those in at risk groups first.

Practices should be signed up to the [PPE portal](#), which can be delivered within 48 hours, to ensure regular supplies of PPE in advance of the winter and flu campaign. More information is available on the [DHSC PPE portal guidance page](#) and the portal customer service team can be reached on 0800 876 6802 for enquiries or registration support.

From 3 September the local arrangements for PPE delivery via Leeds City Council will be changing. [This briefing note](#) explains how the new system will work and what to do if you need to order ad hoc supplies between deliveries.

The Fluenz Tetra vaccine will be made available to order by all NHS providers of the 2020/21 children's flu programme on Friday 28 August. **First deliveries will be made on your normal scheduled delivery day, beginning on Wednesday 2 September.**

The inactivated vaccine (QIVe) for children in clinical risk groups for whom LAIV is unsuitable will be available to order from ImmForm by early September.

These timings remain subject to change and plans for vaccination sessions should be made with this in mind. Any changes to this schedule will be communicated on the [ImmForm](#) website and [PHE Vaccine Update](#).

Leeds LMC together with Community Pharmacy West Yorkshire have produced the attached letter to encourage healthcare professionals to support a successful 2020/21 flu campaign.

Infection prevention and control guidance

Public Health England and the equivalent organisations in the devolved nations have published [Guidance for the remobilisation of services within health and care settings](#) which sets out infection prevention and control recommendations. It re-emphasises that where possible services should

continue to utilise virtual consultations and classifies general practice physical consultations as medium risk. PPE should therefore continue to be worn for all face-to-face contacts.

The guidance advises that for vaccination clinics, where contact with individuals is minimal, the need for single use PPE items for each encounter is not necessary and staff administering vaccinations must apply hand hygiene between patients and wear a sessional facemask. More guidance relating specifically to the flu campaign will be issued shortly.

Indemnity for flu vaccinations

All three Medical Defence Organisations (MDOs) have confirmed that they will provide indemnity cover, at no extra charge, for practices who vaccinate their own staff against flu this year. We are in discussions with NHSR about the indemnity arrangements for staff vaccinations for any coronavirus vaccine that may become available.

General practice appointment updated guidance

The BMA have published [joint guidance with NHSE/I on creating more accurate general practice appointment data](#) (GPAD), so that we can more accurately reflect the workload delivered in general practice. The guidance introduces an agreed definition of an appointment and asks general practice to start applying this now and systematically, as an important first step to improve data quality. This is to ensure all appointments are being recorded in general practice appointment systems, and to fully capture the scale of work and workload in general practice,

Further technical system specific advice and guidance will be issued to support practices with configuring appointment books and applying a set of new, standardised national categories for appointment types. Read more [here](#)

GMS and PMS regulations changes from October 2020

The amendments to GMS and PMS regulations to commence from October have now been laid before Parliament and [published](#). These mainly bring into force elements of the GP contract agreement from earlier this year. The amendments include:

- Requirement for monthly data submissions to the NHS Digital Workforce Collection
- Requirement to participate in the existing GP appointments data collection
- Requirement for practices to ensure patient registration data is regularly updated
- Removal of patients who move outside of the practice catchment area: the practice is responsible for the patient's care for up to 30 days (unless and until the patient registers at another practice) but is not responsible for home visits or out of hours services during that period.
- A modification to make sure that patients who have previously been removed from a practice list and been put onto a violent patient scheme cannot be permanently refused readmission to a practice list if they have been correctly discharged from that scheme.
- Patient assignment to any practice within the patient's local CCG, rather than within the practice area.
- Patient assignment as part of a list dispersal
- An exemption to the ban on subcontracting a subcontract in order to allow PCNs greater flexibility to deliver the DES
- Final cancellation of CQC registration is a ground for termination of a GMS contract

Supporting Mentors Scheme and GP Fellowship programme

Following our 2020/21 GP contract agreement, NHSE/I has now launched the [Supporting Mentors Scheme](#) and [GP Fellowship programme](#), as part of a group of GP recruitment and retention initiatives.

The [supporting mentors scheme](#) aims to support the training of at least 450 GPs as mentors, who will then form a cohort of locally based and highly experienced doctors who can each support between 4-6 mentees. GPs on the scheme will be provided with funded training, leading to a recognised mentoring qualification. Once trained, GP mentors will be reimbursed to conduct one session of mentoring every week.

GP mentors will be able to connect with newly qualified doctors on the [GP Fellowship programme](#) and to support them into become part of the local primary care team.

NHSE/I has also published a letter this week about [Expanding the primary care workforce in 2020/21](#), which highlights the [New to Partnership Payment Scheme](#), to support practices to recruit GP partners, and highlights the inclusion of nursing associates to the Additional Roles Reimbursement Scheme.

GMC fees and maternity leave

The aim of the GMC's [income discount scheme](#) is to assist doctors whose overall financial circumstances makes it more difficult for them to afford the full annual fee. However some doctors may miss out on the discount if their period of maternity spans two registration years, with the result that their income does not fall below the threshold in either year. The BMA challenged the GMC about this and following their intervention they will be undertaking a review of their discount scheme, as it recognises the need to allow all women on maternity leave (irrespective of the time of year their baby is born) to access a discount if their income falls below the threshold while they are on maternity leave.

In the meantime, the GMC will offer doctors a discount if they expect their income to be below the £32,000 threshold during a 12-month period that overlaps with their period of maternity leave. This discount is available for one registration year, so doctors will need to indicate on the [income discount application form](#) which year they would like the discount to be applied to.

The GMC will be updating its information to reflect this interim change – for further information please contact the GMC directly (contact details are on the [income discount application form](#)).

New GP practice profiles on the NHS website

NHS Digital has updated the GP practice profiles on the NHS website which feature improved support for mobile and tablet devices. Your practice's existing profile information will be automatically copied over to the new platform and the way you [update your profile](#) has not changed. Profiles editors should have received further information from the [NHS website service desk](#). Use the NHS website [GP practice finder](#) to find and view your new profile.

Final pay controls

RSM (a provider of audit, tax and consulting services) have produced a [video on final pay controls](#) for the NHS pension scheme, which explains the charge, how it is calculated and what to do to avoid it. This would be useful for both GPs and practice managers to watch.

Serious Shortage Protocol for fluoxetine

Due to ongoing supply issues, the [Serious Shortage Protocol \(SSP\) currently in effect for fluoxetine](#) 40mg capsules has been extended. The SSP was issued on 20 May 2020 and will now end on Friday 4 September 2020.

Updated Standard Operating Procedures for general practice

NHSE/I has updated its [Standard Operating Procedures for general practice](#), which now includes sections on cases definition of COVID-19, patients at increased risk of severe illness from COVID-19, patients advised to shield, safeguarding, symptom management and end-of-life care.

Cervical Screening Administration Service – new telephone number

The transfer of the Cervical Screening Administration Service (CSAS) from PCSE back to the NHS includes the allocation of a new telephone number, which as of 19 August 2020 will be 0300 124 0248. As part of this second phase, CSAS will also be deleting all old email addresses on 31 August 2020 which link to Capita / PCSE. Practices should now use [this online form](#) to contact CSAS.

Registering patients prior to their release from secure residential estate

Practices have a contractual obligation as set out in the [NHS England Standard General Medical Services \(GMS\) Contract 2017/18](#) (page 64) to support with registering patients prior to their release from the secure residential estate. GP practices are asked to ensure that processes are in place to support this, with information on how to do this [here](#). Plans are also progressing to enable patients to register with a GP in their place of detention in the same way as they register with a community GP. This change will enable a patient's general practice record to transfer to their place of detention, allowing clinicians working in these settings full access to the individual's medical record and history. This will be rolled out next year in a phased approach across England. BMA guidance will be updated to reflect this clarification and will be circulated as soon as possible to LMCs.

New restrictions on stimulant laxatives to counter risks from overuse

The [Medicines and Healthcare products Regulatory Agency \(MHRA\) will be adding extra label warnings to new packs of stimulant laxatives to reduce abuse and overuse](#), and to make it clear that they do not help with weight loss and can lead to damage to the digestive system. Instead, patients should be encouraged to use alternatives, such as diet and lifestyle changes, or potentially switch to other products such as bulk laxatives.

Sick notes for people who are shielding

If you are providing sick notes to people who are shielding, please avoid using the term 'shielding' as this will mean the patient is ineligible for statutory sick pay.

Society of Occupational Medicines (SOM) Update

Please find the Society of Occupational Medicine's *return to work toolkit*, that we hope you will find useful.

Scotland has just launched this vulnerability stratification tool: <https://www.gov.scot/publications/coronavirus-covid-19-guidance-on-individual-risk-assessment-for-the-workplace/>, summarised in the attached Covid-age tool.

For those who want to find out more, SOM has also produced a Covid-19 special issue of Journal of Occupational medicine at: <https://academic.oup.com/occmed/issue/70/5>

There is a free bulletin for GPs available to sign onto here: <https://www.som.org.uk/oh-gp-connect-bulletin>

IT upgrades for GP practice

Please see the attached comms from the CCG bulletin. It relates to LCC rolling out a city fibre solution to all government buildings for a future fibre service so this would be replacing HSCN in the next 3-5 years. The IT team at the CCG will look to coordinate the work with practice managers.

FIT Test

GPs are no longer required to request a FIT test for their patients at the same time as completing a lower GI 2WW referral. The 2ww referral form is available on DART and LHP and has been updated to reflect this change.

Please [see attached](#) for more information.

eRD Support Programme - Yorkshire Practices

NHSEI have developed an e-repeat dispensing support programme to help practices in Yorkshire implement eRD. They have highlighted that the main benefit of using eRD are:

- Increases time and capacity by reducing administration workload significantly and reducing frequency of authorisation of prescriptions. Keeps your team and patients safer by reducing unnecessary patient contacts. The benefits are partially seen once a practice is beyond 20% of their items via eRD.

- eRD improves quality and safety by ensuring you get up to date with monitoring, bloods and med reviews etc.

Practices can check their current rate of eRD use:

Simply click <https://bit.ly/382zqHP> and then ensure you are on page 4 of 7 (see centre of the page and bottom) and select your practice using the drop down menus.

You'll be able to see your current rate of eRD. Alternatively, SystmOne and EMIS both have reports built in that can give an eRD %.

Practices can contact the NHSI Team directly to set up an initial conversation where they can listen and answer queries and share top tips for getting started at practice or PCN level. They can then support by providing information, contacts and by buddying up practices to help them avoid some of the pitfalls as they drive forwards.

Contact details:

Andre Yeung - andre.yeung@nhs.net

Mike Maguire - mike.maguire2@nhs.net

Yorkshire Evening Post Article 15/8/20 - 'We owe it to those who died to end cycle of intolerance' Please see the attached [YEP article](#) for your information.

GENERAL INFORMATION DISTRIBUTED TO PRACTICES THIS MONTH

Listed below is the information the LMC has sent to Practices recently. If for any reason you would like another copy and/or further information, please contact us.

- LMC Weekly Update
- CCG Briefings re Covid-19
- Election of a Chairperson for the Leeds GP Confederation
- DHSC supply update: Priadel lithium carbonate tablets & Oral contraceptive

COMINGS AND GOINGS

Welcome Sarah-Jayne Humphries newly appointed Practice Manager for Crossley Street commenced employment on the 3rd August 2020.

Anita Hampson who is the current PM retires on the 30th September 2020.

We have a new GP Partner starting with us at Crossley Street on the 1st September by the name of Keith Miller.

Dr. Kirsty Baldwin joined Robin Lane Health and Wellbeing Centre in Pudsey as a Salaried GP on the 15th June 2020

PRACTICE VACANCIES AT.....

ROBIN LANE HEALTH & WELLBEING CENTRE

Fixed-term Salaried GP - Pudsey, Leeds

www.robinlanehealthandwellbeingcentre.com

We have an exciting opportunity to join our friendly & innovative GP practice in west Leeds.

6 sessions per week Salaried GP to cover Maternity Leave.

Tuesday, Thursday, Friday (although may be some flexibility on days worked).

Commence October 2020. 10 month contract.

Recently fully refurbished and extended modern premises. Single site.

13500 registered patients, CQC “Outstanding” organisation.
Well established practice-run onsite Community Ophthalmology Service.
Independent-sector Community Gastroenterology / Endoscopy onsite.
Integrated patient-volunteer supported Wellbeing Centre with 26 social groups per week.
“Pudsey Wellbeing Charity” and “Lux” café all part of the Wellbeing Centre.
Well organised, SystemOne user, high QOF achiever.
Multi-disciplinary Team approach to care. Proactive care via well-established Elderly Care Team; Practice Pharmacist; Practice Matrons; Advanced Nurse Practitioner; Advanced Clinical Practitioner.
Excellent nursing team.
We are seeking an enthusiastic, forward-thinking and motivated individual to join and integrate within the team.
Informal visits or contact welcome. Contact Dr Neil Bastow, GP partner, n.bastow@nhs.net 07946 151751
Applications with CV and covering letter to Farmida Ishaq, Head of Human Resources, Robin Lane Health & Wellbeing Centre, Robin Lane, Pudsey. LS28 7DE ClinicareHR@clinicareservices.net
Closing date Friday 18th September

Thornton Medical Centre, Leeds LS12 1JE
Partnership Opportunity (4-8 sessions) to commence November 2020

- To replace retiring Partner
- Busy GMS practice with a list size of over 9500
- Close to Leeds City Centre
- Modern and fully equipped health centre using System One
- Training practice
- Clinical staff includes 2 GP Partners, 4 Salaried GPs, 1 Advanced Clinical Practitioner, 3 Practices Nurses, 1 Healthcare Assistant and 2 Phlebotomists who are well supported by a friendly and experienced administrative team.
- Core hours 8am – 6pm, no weekend working
- Informal enquiries and visits are very welcome.

Apply with a CV and covering letter to our Clinical Services Manager escott@nhs.net
www.thorntonmedicalcentre.nhs.uk

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