



28th September 2020

Dear Colleague

Please see below our latest updates for your information:

NHS contact tracing app

The NHS Covid-19 app was launched yesterday in England and Wales. In the BMA's response it was highlighted that tracing and isolating people who have been in contact with infected individuals is important in helping prevent spread of the virus. The more people who download the app, the more people who may have COVID-19 but otherwise wouldn't be traced should be identified and instructed to self-isolate. The BMA said that the use of the app does not diminish the pressing need to have sufficient testing capacity, and must complement a properly functioning national test and trace system which can also quickly identify local outbreaks. Please see the [full BMA press release here](#).

The app has a feature that allows any premises to generate and print a QR code to allow visitors to 'check-in' by scanning it. The QR code functionality is intended to consolidate all existing digital check-in services that have largely been in use in pubs and restaurants. Although all commercial premises are still obliged to offer a paper check in service, if they offer a QR one then it must be via the app. While GP surgeries are not obliged to offer either (appointment IT systems keep an accurate log of visitors) as part of wider efforts to encourage the public to download the app, practices may generate and display QR codes generated through the app on the understanding that these are not mandatory and patients are not obliged to scan them in order to attend. QR codes can be generated [here](#).

The app features the ability to turn contact tracing on and off – this feature was built in for users working in high-risk environments but with adequate PPE to ensure that they do not receive notifications to isolate where it is not necessary.

Delivering the flu vaccination programme

Practices are well into the biggest influenza immunisation campaign that many will have engaged in, with large numbers of patients now having received their flu jab. There have been reports of some practices already concerned that they have or will run out of vaccine. The BMA are taking this up with NHSE/I and DHSC as a matter of urgency.

Practices working in their PCNs where appropriate are encouraged to work together with pharmacies to support a successful 2020/21 flu campaign. This is even more important in light of COVID-19, and the challenges in delivering this year's flu programme. As in previous years, this is a national service with both practices and community pharmacies providing NHS flu vaccinations, and all have a role to play in identifying and engaging patients and vaccinating to protect as many as possible at a very vulnerable time.

Practices and pharmacies should talk to each other about the vaccination service they are planning to offer to understand each other's plans. Where possible discussions should include how to reduce health inequalities and how to target harder to reach or under vaccinated populations which can help achieve an effective campaign.

Locum doctors and flu vaccine

Locum GPs are fully entitled to receive the flu vaccination from their registered GP, and practices are contractually responsible for providing the flu vaccination to locum GPs who are their registered patients.

Revised Network Contract DES material published

NHSE/I has now published the revised Network Contract DES materials on their website. This includes a cover note, amended 2020/21 Network Contract DES Specification and guidance, IIF guidance and SMR guidance. The BMA have summarised the changes [here](#).

GP Pay and Pensions system

The new GP pay and pensions system was planned to launch imminently. However following final performance testing the launch has now been postponed. GPs and practices should continue to use Open Exeter until notified otherwise. PCSE are communicating to all practices and LMCs to confirm this. As a key stakeholder, GPC England has been central to testing and questioning the new system and, while there is disappointment about the delay, it is reassuring that a system which is not 100% ready for use is being held back until such a time as it is.

NHSE/I wrote to practices last week, setting out the reasons for introducing the new system. The letter also explained that an end goal is to ensure that no practice should have their payments negatively affected by the system switch. Testing has shown that this is largely the case but that around 200 practices might experience that affect without further reconciliation work. PCSE have contacted those practices to offer patient list reconciliation exercises to correct these anomalies and the majority have responded. However, we understand that around 50 practices have not and we would urge those practices to do so at the earliest opportunity. Undertaking this work will result in practices receiving the correct payment.

For the majority of practices, no change is anticipated, but the BMA are taking a precautionary approach and will be closely scrutinising the early performance of the system. There is also assurance that robust business continuity arrangements are in place to enable payment if there is major problem.

Practice rental payments

The issue of some tenants of GP practices either decreasing, or threatening to decrease their rents was recently raised with GPC. Tenants cannot unilaterally change the existing arrangements without due process and discussions and to do so is not acceptable. The legal principle is that subject to the lease arrangements that are in place, no one party can unilaterally change the terms of the agreement and adjust the rent without agreement and without being transparent. Both parties must work together and the entire process must centre around collaboration, with both parties acting reasonably and responsibly in reaching any agreement.

We have met with the legal team of Well Pharmacy, one of the larger tenants and discussed their advice to their members. While we understand the impact the pandemic has had on their businesses, we made clear it was not helpful for them to issue letters to their landlords advising they will be paying only 75% of the usual rent for the foreseeable future citing the current

situation and a subsequent reduction in footfall. The code of practice published by the government in June has been cited by some tenants, but the fact is that it remains voluntary and does not give pharmacies the authority to adjust their rent unilaterally, without agreement and without being transparent. Both parties must work together for the benefit of aiding swifter economic recovery, and the entire process must centre around that collaboration with both parties acting reasonably and responsibly in reaching any agreement. If practices need legal support to pursue this, they are encouraged to contact BMA Law or other legal firms with expertise in this area.

First Contact Physiotherapist evaluation and webinar

The final phase of a national evaluation into the First Contact Physiotherapist (FCP) role will be published at the end of September. The evaluation, conducted by teams at Keele and Nottingham universities, includes quantitative data on patient outcomes along with qualitative research based on interviews with patients, GPs, practice staff and FCPs.

To coincide with the publication, NHSE/I, Health Education England and the Chartered Society of Physiotherapy are holding a webinar to discuss the findings and explore the recommendations made by researchers. Samira Anane (GPC policy lead for Education Training and Workforce) will appear on the panel. The event is designed to promote successful implementation of the role, which is fully funded under the additional roles reimbursement scheme. You can register for the event [here](#).

BMA COVID-19 guidance

Paula Wright, a member of the GP sessional committee, has written an article on how the COVID-19 pandemic has seen a shift of sessional GP work opportunities from practices to providers of 111 advice. Please see the article [here](#).

Read the BMA's [COVID-19 toolkit for GPs and practices](#), to help answer 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](#)
[Risk assessments](#)

For further information, see the BMA's [COVID-19 Webpage](#) with all the latest guidance including links to the BMA's [COVID-19 ethical guidance](#)

Mental health and wellbeing

The BMA continues to offer [wellbeing services](#) and confidential 24/7 counselling and peer support for all doctors and medical students, as well as their partners and dependents, on 0330 123 1245. For hard copies of our Wellbeing [poster](#), please email: wellbeingsupport@bma.org.uk

Access the [BMA's COVID-19 wellbeing pages here](#)

Kind regards
Kent Local Medical Committee