

LMC ViewPoint

The newsletter of Leeds Local Medical Committee Limited

March 2021

UPDATE FROM Victoria Eaton
Director of Public Health
Accurate 31/3/21

I want to give you an update on the latest Covid position in Leeds, and updates on the revised outbreak plan, shielding and vaccination work going on in the city. Today's Covid infection rate shows a slight rise to 116 per 100,000, up 16% in the last week. The average for Yorkshire & Humber is 115 and the average for England is 55.8 per 100,000. Today's over 60 years is 31.7, down 16% in the last week. The over 60s rate continues to fall and remain much lower. This reflects a much improved picture of COVID impact on the health and care system, and in protecting those most at risk. Positivity rate is now at 4.5%. The ward picture remains dynamic, with about half the wards over 100 and half under 100. These figures are continually monitored to inform additional work where needed. Three care homes, 88 education settings, and eight workplace sites are reporting positive cases, all being managed well, with proactive work and support taking place. The cases in prisons are now reducing. Of the 1,581 deaths registered so far, in Leeds, 97% were Leeds residents, 66% were in hospitals, 25% were in care homes, 3% in a hospice, and 6% in their own home. To date, 20% of all deaths registered have been Covid-related.

The Government has updated its [Contain Framework](#), setting out the arrangements for managing local outbreaks and asking that local authorities update their local outbreak management plans in particular to deal with the issues set out in the most recent roadmap, eg variants of concern. The [refreshed Leeds Outbreak Management Plan](#) is now published. Primary Care are a crucial local partner for us and partnerships are at the heart of the Contain Framework, which sets out the roles and responsibilities of how partners work together at a national, regional and local level. Successful prevention and management of local outbreaks is a core element of our shared ambition to break chains of Covid transmission, to enable people to return to, and maintain, a more normal way of life, living safely with the virus.

From 1 April, the advice to Clinically Extremely Vulnerable (CEV) individuals to shield at home will be paused, although the advice is to continue to take extra precautions to stay safe and avoid coming into contact with the virus. The decision to pause was taken by the Chief Medical Officer, supported by evidence that rates of transmission in communities are lower, and a very high % of CEVs will have some level of protection from their vaccination. All CEVs in England are being written to by Government, to explain the new advice, as well as local communication to CEVs in Leeds. Thank you for the support that clinicians are providing to maintain the Shielded Patient List by adding or removing individuals as appropriate.

The numbers vaccinated are changing all the time. We believe it is now over 325,000 people in Leeds - about 44% of the 16+ population. The extensive work to vaccinate those with additional risks (eg CEV or learning disability) or those less confident continues and is beginning to show some results. The Vaccination Minibus has received excellent coverage in local press this week, including the [Asian Express](#) and [Yorkshire Evening Post](#).

I want to continue to thank you all for everything you're doing in our ongoing response and recovery to COVID. The 26th of March marked the one year anniversary of the first lockdown in England. Whilst we still have more challenges ahead and we will have to cautiously move through the roadmap outlined by government, the year is looking more optimistic and I look forward to continuing this important work with you.

COVID-19 vaccination programme

Frequently Asked Questions for second doses

NHSE/I has published some [FAQs to help answer some questions relating to second doses of the COVID-19 vaccination](#), including location of second doses, interval period and consent.

Quality Assurance Framework and SOP for lateral flow devices for COVID-19 vaccination sites

NHSE/I has published a [Quality Assurance Framework for COVID-19 vaccination sites](#), to use as a tool aligned to the operating frameworks and standard operating procedures underpinning the delivery models for these settings.

NHSE/I has also published a [Standard Operating Procedure \(SOP\) for usage of lateral flow devices for asymptomatic NHS staff testing](#) at vaccination sites.

COVID-19 vaccines and pregnancy

There has been some confusion around the eligibility of pregnant women for the COVID-19 vaccine. While it is not currently available to all pregnant women, those who are at high risk of exposure to the virus, including health and care workers, or with high risk medical conditions are eligible. This includes women diagnosed with gestational diabetes in pregnancy or those with a BMI of more than 40 at their antenatal booking appointment.

The benefits and risks of COVID-19 vaccination in pregnancy should be discussed on an individual basis. The discussion should include acknowledgement that, while there is no known risk associated with giving other non-live vaccines to pregnant women, there are no specific data as yet about the safety of COVID-19 vaccination in pregnancy. More information including FAQs and a decision aid are available from the [RCOG website](#).

In addition, the National Clinical Director for Maternity and Women's Health, and the Chief Midwifery Officer, have published a [letter setting out actions for maternity services to identify and invite pregnant women for vaccination](#), and enabling them to make an informed choice about receiving it.

Support for CCGs in addressing vaccine inequalities

In February, £4.2 million of funding was allocated to STPs to be used across CCGs to support and enable locally led community engagement in all areas with health inequalities. NHSE/I has now pledged an [additional £3 million of funding](#) to support further local activity in addressing local vaccine inequalities. From 26 March, regions are invited to submit funding applications for their CCGs. Read more [here](#)

Guidance for QOF payments

GPC England have published [guidance about QOF payments for 2020/21](#). Due to the pandemic, these payments will be calculated differently to normal. Some indicators are based on achievement, some are awarded in full and some will be income protected.

Income protection is based on achievement in previous years but updated for the 2020/21 QOF point value, prevalence and list size adjustment. Therefore, it is not the case that practices will have a floor for payments equal to payments in previous years – it will be a different calculation.

Read the NHSE/I letter and QOF guidance for 2021/22 [here](#)

The Department of Health and Social Care has published the [amended QOF SFE for 2020/21](#).

Vaccination and Immunisation guidance

NHSE/I has published a [letter confirming the changes to the provision of routine vaccination and immunisation \(V&I\) in general practice](#) from 1 April 2021, which includes:

- The provision of V&I services becoming an essential service for all routine NHS-funded vaccinations with the exception of childhood and adult seasonal influenza and COVID-19 vaccinations.
- The introduction of five core contractual standards to underpin the delivery of immunisation services.
- A single item of service fee for all doses delivered in vaccination programmes funded through the GMS contract, including where additional doses are required to meet clinical need and where children are vaccinated outside the routine schedule.

The Childhood Immunisation DES will be retired on 31 March 2021 and a new V&I domain in the Quality and Outcomes Framework introduced for 2021/22

General Medical Services (GMS) Ready Reckoner 2021/22

GPC England have been working with NHS England and NHS Improvement on the production of a [ready reckoner](#) which has now been published and is intended to provide an indication of the changes in income streams that may affect a GMS practice and primary care network (PCN) from 1 April 2021.

Implementing the 2021/22 GP contract changes to personal medical services and alternative provider medical services contracts

NHS England and NHS Improvement have published [this document](#) which sets out the approach to the funding changes that we will apply to Personal Medical Services (PMS) and Alternative Provider Medical Services (APMS) contracts. Commissioners will update local PMS and APMS contracts as soon as possible, applying the funding changes identified in this guidance with effect from 1 April 2021.

Medical assessments for prospective foster carer and adopters

A [joint statement](#) between GPC England and the Royal College of GP has been published, to support GPs in considering requests for medicals for prospective adopters and foster carers. These assessments play an important role in safeguarding vulnerable children and are the final requirement for many families across the country.

NHS Operational Planning and Contracting Guidance 2021/22

NHSE/I has published the [NHS Operational Planning and Contracting Guidance for 2021/22](#), setting out the priorities for the year ahead, to restore services, meet new care demands and reduce the care back logs caused by the pandemic, whilst supporting staff recovery.

One of the priorities is expanding primary care capacity, which will largely be done through the increased ARRS allocation, and a renewed focus on recruiting and retaining an additional 6000 GPs.

Investment in General Practice report and data quality statement 2015/16-2019/20

NHSE/I has also published the [Investment in General Practice Report 2015/16-2019/20](#), [Data quality statement](#) and [GP investment](#). This shows the level of investment in 2019/20 compared with previous years. The increased funding received by general practice in England is in a greater proportion compared to other sectors in the NHS and is as a direct result of our 5 year contract agreement.

NHS Digital Research Session Request – NWRS (National Workforce Reporting System)

NHS Digital is currently carrying out research focused on improving the NWRS and wishes to engage with users to understand current experiences and potential opportunities. The workforce data GP practices and PCNs share via the NWRS is absolutely essential to ensuring there is an accurate national primary care workforce picture, prudent workforce planning can take place and General Practice can ultimately recruit sufficient and safe levels of staffing. NHS Digital staff would like to speak to people who use NWRS in both practices and Primary Care Networks.

Participants would be asked to join a Microsoft Teams meeting for 30-60 minutes and tell NHS Digital colleagues about your job, work practices and what that entails in relation to NWRS. They would also find it helpful if you could share your screen, and talk them through how you use NWRS and comment on some design ideas they have.

There will be two NHS Digital staff on the call with you: a User Researcher and a Designer. They are ready to speak to willing participants now, so we urge willing GP practice and PCN staff to get in touch and assist NHS Digital with this vital research via Katherine.tyte@nhs.net

School absence note requests

The Department for Education (DfE) has published [operational guidance for reopening schools](#) reminding schools they should not encourage parents to request unnecessary medical evidence i.e. doctors' notes from their GP when their child is absent from school due to illness.

Parents can use other evidence such as prescriptions, appointment cards, text/email appointment confirmations, and input from GPs should only be sought for complex health needs or persistent absence issues.

The guidance also confirms the procedure for clinically extremely vulnerable children, and for those absent from school due to COVID-19 and self-isolation.

Patients ordering PCR tests without symptoms

Patients are now able to order a PCR test without having any symptoms, and the [COVID-19 PCR test booking webpage](#) includes an additional reason for getting a test, to make it easier for patients to book a test when recommended by a GP.

This aims to support patients in accessing testing where they have been instructed to by a GP, no matter what their symptoms are. No referral is required to book a test under this option.

Covid-19 Assisted Lateral Flow Device test results to GP records

Positive assisted lateral flow device (LFD) test results are being sent to GP records, including historic results (assisted refers to LFD test results being interpreted and reported by a trained operative at a test site).

This does not apply to unassisted LFD tests which are self-administered, interpreted and reported by the individual, such as LFD tests that primary care staff are regularly undertaking twice weekly. Negative and void assisted LFD tests and all unassisted tests will not be flowed to GP records.

There is no action for practices following receipt of these LFD results and no need for GP practices to report them to PHE as a notifiable disease

Discharge Medicines Service

The Discharge Medicines Service (DMS) became a new essential service within the Community Pharmacy Contractual Framework (CPCF) on 15 February 2021. NHS Trusts are now able to refer patients who would benefit from extra guidance around new prescribed medicines for provision of the DMS at their community pharmacy.

Read more about its introduction and implications for general practice, in a [briefing by the PSNC](#) (Pharmaceutical Services Negotiating Committee)

Covid Vaccination – Renal transplant

Kidney transplant patients have been identified as a group of patients where giving the second COVID19 vaccine dose at the earliest time point may be advantageous (3 weeks for Pfizer, 4 weeks for Oxford/Astra-Zeneca). National guidance states: "The small number of patients who are about to receive planned immunosuppressive therapy should be considered for vaccination prior to commencing therapy (ideally at least two weeks before), when their immune system is better able to make a response. Where possible, it would also be preferable for the 2-dose schedule to be

completed prior to commencing immunosuppression. This would entail offering the second dose at the recommended minimum for that vaccine (three or four weeks from the first dose) to provide maximum benefit that may not be received if the second dose was given during the period of immunosuppression. Any decision to defer immunosuppressive therapy or to delay possible benefit from vaccination until after therapy should not be taken without due consideration of the risks from COVID- 19 and from their underlying condition.”

The Leeds Teaching Hospitals kidney transplant team have looked at this for their patient cohort, and GPs may see letters from the kidney transplant team suggesting that this is actioned if possible. Apologies if this has caused some anxiety and we understand this may not be practical to action. We are currently developing a way we can offer an earlier appointment at the community vaccination centre or hospital hub for these patients to receive their second dose sooner. Some patients may of course decline the offer of an earlier slot and should be offered second doses by GP practices as early as possible.

Looking After You – Primary Care coaching Communications toolkit

#LookingAfterYouToo Recognising that frontline staff are facing many challenges, a support programme was launched on 24 April 2020 at the height of the Coronavirus pandemic, providing individual coaching support for primary care staff. It's an easy to access, individually tailored coaching service, proactively supporting people through COVID-19 and beyond. It's a space for staff to offload the demands of whatever they are experiencing and be supported in developing practical strategies. Sessions are available Mondays to Fridays between 8:00am – 10:00pm and on Saturdays and Sundays between 10:00am – 6:00pm. The first session will last up to 45 minutes. www.england.nhs.uk/looking-after-you-too

#LookingAfterYourTeam Launched on 5 January 2021, this coaching offer is available for those who lead, manage or organise a team or group in primary care. Individuals, and up to two collaborators, get access to tailored support that will focus on proactively supporting them to lead their team or group, and is centred around compassionate and collaborative team leadership. The aim is to encourage psychological wellbeing and resilience in teams while supporting them to continue to deliver projects, services and high-quality care to patients. Sessions are available Mondays to Fridays between 8am – 8.15pm and on Saturdays between 10am – 1.30pm. The first session will last up to 60 minutes.

<https://www.england.nhs.uk/looking-after-your-team>

Resources from the Society of Occupational Medicine

- Long Covid – return to work – attached
- Mental health for small business – attached

Free webinars on key issues to do with work and health: [Webinars | The Society of Occupational Medicine \(som.org.uk\)](#)

Submit an article on work and health with the Journal of Occupational Medicine here - [Submission Online | Occupational Medicine | Oxford Academic \(oup.com\)](#)

COMINGS AND GOINGS

Good bye and best wishes to...

Leeds City Medical Practice welcomed to Dr Elizabeth Guerry and Dr Jane Armstrong in March.

Senior Partner, Dr Andy Newbound will be retiring from Meanwood Group Practice on Wednesday 31st March – he will be greatly missed by all the team.

Dr Jane Armstrong has left Collingham Church View Surgery, after many years at the practice, and we thank her for all her hard work. We wish her well in her new job in Beeston.
We welcome Dr Sheona Harper to the practice, who will be joining us at the end of April.

Dr Amjid Aslam is leaving Hyde Park Surgery in March 2021 to take up a partnership at High Field Surgery. He has been a dedicated salaried GP at Hyde Park Surgery since 2013 and will be much missed by both patients and all the members of the practice team. We wish him all the best for this next stage in his career.

Dr Gail Orme retired from Thornton Medical Centre at the end of February 2021. She will be greatly missed by all the staff at the practice and we wish her well in her well-earned retirement!

Practice vacancies at.....

Salaried GP / Nurse Practitioner 4 Sessions Whitehall Surgery, Leeds LS12 5SG.

- Salaried GP or Partner / or Nurse Practitioner required for 4 sessions per week, to join 3 GP partners and 3 salaried GPs.
- Partnership opportunities for the right candidate.
- Friendly and welcoming team. Good working environment and collaborative staff.
- 8750 patients in mixed urban/rural setting.
- Modern purpose built premises.
- Routinely high QOF achiever, 100% attained this year.
- Special interests welcome.
- Informal visits and enquiries welcome.
- For further information regarding the practice please see our website, www.gpnhs.net

Applications to be made with CV to Mrs Joanne Woods, Whitehall Surgery, Wortley Beck Health Centre, Ring Road, Lower Wortley, Leeds LS12 5SG. Tel: 0113 4677533.
E mail: joanne.woods@nhs.net

Ashfield Medical Centre – Dr Walling & Nathan LONG TERM LOCUM

6 MONTH CONTRACT IMMEDIATE START TILL SEPTEMBER 2021

We are seeking a long term locum on a 6 month contract with immediate start who is enthusiastic and forward thinking to be part of our team delivering a first class care in general practice. We are a two site practice in Leeds 14 and 15

Our practice provides excellent care and are high achievers for treating and caring for patients with long term health conditions including receiving a highly commended award in the Yorkshire Evening Post Health Awards 2016 for community care and winners of our CCG's celebrating success award, both for the significant work delivering house of care approach for patients with long term conditions.

We are high QOF achievers year on year and this is down to a team work ethic and a team with a can do attitude

We are also a training practice and currently have a number of staff who are progressing through the healthcare profession with our support.

We look to offer GP's opportunities for development should there have a specialised interest

You will be required to take part in a variety of duties such as seeing patients including home visits, telephone consultations and e-consults, practice administration, duty tasks. We are a very friendly and extremely supportive team.

Our team comprises 2 GP partners, 4 salaried GP's, registrar, FY2 along with a team of Practice Nurses (2) and ANP (1) and HCA'S (2) with a wide skill mix.
We have an excellent and friendly reception and administrative team.
Rated 'good' by CQC (December 2018).

We are looking to appoint a 4/6 Locum GP the position is for immediate effect subject to references and a subsequent agreed probation period. Applicants must be registered to practice with the GMC. To find out more about this excellent opportunity

Please contact: Michaela Guilfoyle, Practice Business Manager telephone 0113 2213536 or email practicemanager.ashfield@nhs.net . Closing date for this position is 26th March 2021

Thornton Medical Centre, Leeds LS12 1JE

Salaried GP (4-6 sessions negotiable) to commence Summer 2021

- Busy GMS practice with a list size of around 9500
- Modern and fully equipped health centre using Systm One
- Training practice
- Clinical staff includes 3 GP Partners, 2 Salaried GPs, 1 Advanced Clinical Practitioner, 3 Practices Nurses, 1 Healthcare Assistant and 1 Phlebotomist who are well supported by a friendly and experienced administrative team.
- Core hours 8am – 6pm, no weekend working
- Competitive salary, MDU paid, 6 weeks' holiday pro rata and 1 week study leave pro rata.

Informal enquiries and visits are very welcome.

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

St Martins Practice

Salaried or Retainer GP

4 sessions pw (incl Fridays), for 18 months in the first instance

£9,000 - £9,500 per session according to experience

We are seeking a salaried or retainer GP with strong clinical skills to join our democratic and forward-thinking practice. We'd like you to bring a commitment to serve our varied practice population, and you will have the opportunity to play a full role in all aspects of the practice.

We are a co-operative team, meeting daily for mutual support in our modern spacious new premises. We want all our clinicians to have a good work-life balance and an enjoyable working day.

St Martin is an urban training practice, caring for a patient list of 7000. Excellent QOF and target achievement and a track record of innovation. 5 partners. Excellent skillmixed nursing team doing long-term condition management. Well-developed Patient Support Team who are "care navigating" & managing the clinical letters. Wide range of attached staff and services. Active member of Chapeltown Primary Care network.

For a full information pack see our website www.stmartinspracticeleeds.nhs.uk which will also tell you more about our practice. The ad is also live on NHS jobs <https://beta.jobs.nhs.uk/candidate/jobadvert/A1992-21-1833> where you will find job description, person specification, and terms and conditions.

To arrange an informal chat please contact Camilla Hawkes, Practice Manager, camilla.hawkes@nhs.net, 0113 284 9749 or 07989 972230

Closing date: 9am 5th April 2021

St Martins Practice, 210 Chapeltown Road, Leeds LS7 4HZ

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