



Dear Colleague

Please see below our latest updates for your information:

Face coverings in general practice from 19 July 2021

Several practices have contacted the office asking for clarification around face coverings in practices beyond July 19th. While it is expected that the government will relax the mandatory requirement to wear a face covering, our understanding is that updated guidance for healthcare settings is being prepared. We will circulate any new guidance as soon as we receive it. We have contacted the Medical Directors of the Acute Trusts and currently they are planning to continue to require staff and patients to wear face coverings. The latest guidance can be found here [COVID-19 infection prevention and control guidance \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk), page 14.

We are working with the CCG to develop patient communications of a universal message across all healthcare settings in Kent and Medway.

Making an Application for a Premises Improvement Grant - Do's and Don'ts (Webinar)

Join the LMC and Invicta Surveyors' Rosemary Jones this Wednesday, 14th July, for a lunchtime webinar on Making an Application for a Premises Improvement Grant – Dos and Don'ts

CCGs have recently announced release of capital funding to carry out premises improvements, with more to follow during the year. This is a great opportunity to carry out premises improvements to help with compliance matters and to ensure you receive the correct funding for them. Attending this webinar will take you through the information needed and the process involved in making a “right first time” application. Some practical examples of where things can go wrong as well as examples of successes. Book your place [here](#).

Health and Care Bill

The Government has introduced the [Health and Care Bill](#) this week, which will deliver significant health reforms in England. These include making ICSs (integrated Care Systems) statutory bodies, dissolving CCGs and transferring their responsibilities, staff and powers to ICSs, formally merging NHS England and NHS Improvement, removing Section 75 of the 2012 Health and Social Care Act and mandated competitive tendering, and conferring new powers over the NHS to the Secretary of State.

[Responding](#) to the publication, the BMA raised concern over the timing of the bill given the huge pressures facing the health and care system as a result of the pandemic, as well as highlighting critical areas where the bill needs to be amended and strengthened to protect the NHS from unnecessary private sector involvement and establish a healthcare system that is collaborative and fit for the future.

The BMA will continue to lobby to ensure the Bill addresses concerns and that reform is in the best interests patients and doctors, and supports the NHS to be a publicly-funded provider to care for the health needs of the population. We have been working to shape the guidance that will underpin the Bill in practice, including through our [response](#) to NHSE's consultation on the new provider selection regime and feeding into the newly published ICS Design Framework. The BMA have also been clear on the critical role LMCs should play in the new arrangements. The BMA have produced [a member briefing on that framework](#).

You can find out more about the BMA's work around the Bill and key calls [here](#), and read their detailed analysis of the bill [here](#).

Health and Care White Paper : The BMA View

Would you like to know the current direction of travel for the transformation of the NHS? The recently released Health and Care White Paper marks the most significant reform of the NHS since the 2012 and heralds the end of CCGs. Join us for this opportunity to learn more about the direction of travel towards ICSs and possible benefits and cautions going forward. We will be joined by presenters Krishna Kasaraneni, from the GPC Executive team, and Tom Bramwell, BMA Senior Policy Advisor on **July 21st 18:30-20:00** and will include time for questions. Sign up [here](#).

COVID-19 booster vaccine and flu vaccine programmes

Following the [guidance](#) published by JCVI last week about the COVID-19 booster programme, and the subsequent guidance from [NHSE/I guidance on COVID-19 vaccinations](#), the BMA remain seriously concerned that this may be interpreted as a cap on general practice

involvement in the flu vaccination campaign this winter or that practices will be limited in their ability to provide this to their patients as they would normally do because of overly restrictive arrangements set by NHSEI.

GP practices are already preparing for this winter's flu campaign, as they do every year, and will be keen to continue to play a pivotal role in protecting their patients against COVID-19 with booster jabs alongside this. GP practices have shown, for many years through the annual flu programme and recently through the COVID vaccination programme, that general practice through its place in the community is best placed to provide effective and efficient vaccination programmes to the population of England. Many patients and members of the public expect such a service to be widely available from their local GP practice. We believe delivering the flu vaccination and COVID-19 booster vaccination programme concomitantly through general practice is the best way forward and that most practices will want and expect to deliver them.

As Phase 3 begins, practices must be able to administer COVID booster jabs during the same appointment as flu vaccines within their own practice buildings if they wish – which has not always been possible for COVID vaccines, with many practices who wanted to continue to provide COVID-19 vaccination to their patients being prevented by NHSE/I from doing so. We believe patients want to be vaccinated at their local practice as they are used to for their flu jabs each year. In addition, working at practice level can reduce the bureaucracy for staff, limiting the impact on other GP services that are also important. It is also vital that existing resources are retained for additional staff who support the programme.

If we are to 'learn to live with' COVID-19 in the long-term and vaccinations are to become routine, practices need to be trusted and empowered to build on their expertise, proven track record and knowledge of their communities to lead the way in ensuring the public is protected.

The BMA are therefore calling on the Government and NHSE/I to support practices and PCNs in delivering Phase 3, not just through appropriate funding, but also through the ongoing workforce support provided during phase 1 and 2, through managing workload (including the continued suspension of PCN service specifications), and improvements to IT systems.

New guidance for health and social care providers on CQC's monitoring approach

The CQC has published [new guidance for health and social care providers on their monitoring approach](#).

The BMA is seriously concerned about CQC's new approach to monitoring practices and have raised this with them directly. Practices will understandably be anxious about the implications, not least when they are struggling with record demand and significant workload pressures. Whilst CQC has a legal responsibility to inspect health care providers and ensure the safety of services

to patients, it has been doing this throughout the pandemic through its Emergency Support Framework. We have called for a continuation of this ESF approach which is much more proportionate and have misgivings about a move towards greater inspection numbers linked to a risk stratification approach that is new and not widely trialled.

PCSE pay and pension system update

The BMA continues to work hard at challenging the considerable shortcomings of the new portal. They are aware of the many unacceptable issues being faced by practices and GPs but it is of critical importance that users log complaints with **PCSE** to ensure that they can be held accountable. We know that those interactions are also causing frustration and, via the BMA, we are applying pressure for improvements and greater transparency around their customer service work. We would advise practices to keep a record of the issues they are raising with PCSE and the length of time taken to get resolutions.

The BMA's Pensions committee will soon be sending out a survey to GPs, to capture their experiences of using the new system. There will be more details on this next week. GPs are encouraged to log on to the system to check the accuracy of their records. A similar survey will go to practices in the coming month. The BMA have yet to receive a response to the letter to NHSE/I setting out our concerns.

COVID-19 Vaccination Programme

Acceleration of second doses for all cohorts

The government has published guidance advising that appointments of a second dose of the COVID-19 vaccine should be brought forward from 12 to eight weeks for the remaining people in all cohorts who have yet to receive their second dose, to ensure everyone has the strongest possible protection from the Delta variant of the virus at the earliest opportunity possible. Read the NHSE/I letter [here](#)

Vaccine data

Nearly **80 million doses of COVID-19 vaccines** have now been delivered in the UK, and 34 million people have also received their second dose.

Education and training tariff guidance and prices for 2021 to 2022 financial year

The Department of Health and Social Care and Health Education England (HEE) have published the **Education and training tariff guidance and prices** for 2021 to 2022 financial year. The guidance provides further information in support of the education and training (ET) tariff payment

process for the 2021 to 2022 financial year, with medical placements in GP practices listed as an exclusion (see section 5.12-514). Read more [here](#)

Delay in roll-out of patient data sharing programme (GDPR)

Following extensive lobbying by the BMA and RCGP, Government announced a delay to the rollout of GDPR, with full rollout now expected on 1 September rather than 1 July. BMA is now engaged in discussions with NHS Digital and other stakeholders to ensure no additional burden is placed on GPs to facilitate the implementation of this programme, and that patients are properly informed about it. We have been lobbying MPs on this issue.

In view of the extension to date of the first extraction, we will keep you informed on all next steps that practices will need to take as we approach this deadline. Read the BMA's full statement about the announcement to the delay [here](#).

Review of the England Medical Performers List Regulations (England)

The Department of Health and Social Care has commissioned NHSE/I to review the England Medical Performers List Regulations in the context of the wider regulatory landscape in operation across England. This review has the potential to identify where regulatory requirements can be streamlined and simplified, while maintaining the high professional standards that ensure patient safety.

This questionnaire aims to gather information from stakeholders about their views of the existing regulatory landscape for GPs in England and thoughts on how this landscape might be transformed. The feedback will contribute to the content of a series of focus group discussions and inform an options appraisal that will be shared with the DHSC during autumn 2021. Take the survey [here](#).

Calling all pharmacists: your chance to inform staff training in primary care

Health Education England and NHSE/I would like to hear from pharmacists about their experiences of remote triage, care navigation, online and video consultations in general practice. Your input will help to design effective training to support all primary care staff and trainees to confidently work with these approaches. If you would like to be interviewed, please contact Frances Brown at Nightingale Research, francesbrown@nightingaledesignresearch.com by 14 July. To find out more about the study visit <https://bit.ly/3dyYp19>. For any questions about the project contact the Digital First Primary Care team: england.digitalfirstprimarycare@nhs.net

PCN Handbook 2021/22

The BMA has updated the [PCN Handbook for 2021/22](#). It provides advice to practices on establishing and running their PCN and the latest edition includes information from the 2021/22 contract agreement including:

- Updated PCN service specifications and funding streams.
- New ARRS rules and PCN workforce guidance.
- Additional operating guidance for PCNs.

Social prescribing: leadership and development programme

There is an opportunity for social prescribing link workers, managers and people working in similar roles to enrol in an on-line leadership and development programme that will help achieve better outcomes for patients.

This programme consists of four modules over two days that will support the development of personal and team leadership skills:

- skills for coaching staff and volunteers
- skills for mentoring staff and volunteers
- supervision Masterclass
- understanding the Multidisciplinary Team and being more effective in meetings

If you are interested in learning more about the programme and wish to express an interest in securing a place, please [find out how here](#).

120 programme places will be offered with six training cohorts running from June to September 2021.

Please do not delay and miss out on this opportunity: the first programme starts on 16 June 2021.

If you have any queries about this exciting programme, [please email the KMCCG primary care transformation, development and improvement team](mailto:kmccg.pctransformation@nhs.net): kmccg.pctransformation@nhs.net.

Kind regards

Kent Local Medical Committee