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Items marked * in orange on the content list are highlighted either because of their importance or because they contain information you may not have seen elsewhere.

CORONAVIRUS

Face Mask Exemptions

The following advice is taken from the BMA's [guidance on reducing Covid-19 transmission and PPE](#).

Practices are reporting increases in requests from patients for letters of exemption to wearing face masks in various public settings. In England, face coverings must be worn on public transport and in shops and supermarkets as of 24 July 2020.

The Government guidance suggests there is no requirement for evidence for exemption. It should be sufficient for someone to declare that they are eligible for an exemption direct with the person questioning them (e.g. bus driver).

Practices are therefore not required to provide letters of support for those who fall under the list of exemptions, or to those who do not fall under the list of exemptions. Some transport providers are providing evidence of exemptions themselves, see for example this information from [First Bus](#) and [Arriva](#).

The government has published a list of [people who are exempt from the requirement to wear face masks](#).

Antibody Briefing Paper

Humber region Directors of Public Health have published a new briefing paper on coronavirus antibody testing which considers the two types of tests available and how the results should be interpreted.

Key messages from the briefing:

- Tests are available to identify if an individual is currently infected with COVID-19 or if they have previously been infected with COVID-19.
 - COVID-19 is a new disease and the lasting immunity or ability to become infected with COVID-19 again requires further research.
 - If an individual tests positive for COVID-19 antibodies, this does not mean they are immune from further infection and must adhere to social distancing and self-isolation
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guidance.

[Download the Humber Antibody Testing Briefing Paper.](#)

Testing Guidance

Guidance from the Medicine and Healthcare Products Regulatory Agency has recently been updated on the types of test available for coronavirus. The [guidance for patients, the public and professional users](#) outlines how the tests work, types of test, and the limits of testing kits.

TRAINING, EVENTS & OPPORTUNITIES

New to Partnership Payment Scheme

The [New to Partnership Payment Scheme](#) (N2PP) provides an opportunity for eligible health care professionals to become a partner at your GP practice and in return receive up to £20,000 plus a contribution towards on-costs of up to £4,000 (for a full time participant). The funding is available to support establishment as a partner, as well as up to £3,000 in a training fund to develop non-clinical partnership skills.

In order to participate in the scheme, applicants who meet the eligibility criteria will be required to submit an application form and supplementary evidence.

Eligible roles are General Practitioners, Nurses (including Advanced Nurse Practitioners), Pharmacists, Pharmacy Technicians, Physiotherapists, Paramedics, Midwives, Dietitians, Podiatrists, Occupational Therapists, and Mental Health Practitioners working in general practice.

This scheme was a commitment in [Update to the GP Contract agreement 2020/21-2023/24](#), forming part of the suite of interlocking GP recruitment and retention initiatives and was delayed launching during the height of COVID-19 pandemic.

The overarching aim of the scheme is to grow the number of partners working in primary care, stabilising the partnership model and helping to increase clinicians' participation levels so that primary medical care and the patients it serves have access to the workforce they need.

A guide to the scheme, frequently asked questions and the application form can be found [on NHSE's website](#). If you have any queries, please email england.newtopartnershipenquiries@nhs.net.

Supporting Practice Managers

Owing to support and funding from NHS England, the LMC were able to recruit and train a cohort of freelance Practice Manager Appraisers, all of whom are currently working as Practice Managers across the Humber area.

Many of our local Practice Managers report feeling over-burdened and isolated, receiving little formal or ongoing personal and professional development. The peer to peer appraisals on offer as part of this scheme are designed to address this developmental shortfall. These are not intended to be a performance review, but instead an opportunity for reflection on the manager's work and approach, and to help identify areas for ongoing improvement and development. There is also the opportunity to repeat the review with the same Appraiser at agreed intervals, such as six-monthly or annually.

Several of these peer to peer reviews have been completed over the past year, and the feedback from participants has been very positive:

"It was really nice to be appraised by someone who understood how you felt and was able to provide some good supportive advice that wasn't just 'text book' but from actual real life experiences. The whole process was really informal and [my appraiser] was great. Overall I found it a really positive experience and yes I would definitely do this again"

"It was quite useful to actually sit down and complete the form to enable me to evaluate what my role is. I did find meeting with [my appraiser] and talking through what I had written very useful, and for me to be away from my Practice to do this was of great value."

"It was really helpful, almost therapeutic! I think the work will lie in being able to implement some of the suggestions. We agreed to keep in touch and meet again to review progress in 6 months."

Our trained cohort of freelance Practice Manager Appraisers are keen to continue to connect with their local PM colleagues and facilitate these valuable sessions. If you are interested in being part of this scheme, then please contact the Humberside LMCs team by email humberside.lmcgroup@nhs.net.

If you decide to go ahead and arrange a session, you will be matched with a PM from outside of your CCG area, who contact you directly to make all of the arrangements.

Rapid Access Support Service

The Rapid Access Support Service has been designed to provide short, virtual sessions with a trained mentor who will listen and sign post you to appropriate resources. Please get in touch using one of the following methods:

- by visiting www.gp-s.org and completing the online contact form;
- by email contact@gp-s.org or
- by telephone 0115 979 6917.

You will initially be in touch with a Nottinghamshire based operational lead who will offer you a choice of GP mentor based in the Humberside area.

Our standard mentor offer of four, two-hour mentoring sessions is also still available and being delivered virtually. Please use the same GP-S contact details above.

Save the Date – Lighten the Load Virtual Training

Wednesday 9th September and Wednesday 7th October 2020, 14:00 to 17:30
Virtual – via Zoom

Lighten the Load is a free event provided by Humberside LMCs for local GPs, Practice Managers and Primary Care colleagues, delivered by Beyond Coaching. The event is designed to equip GPs in achieving this step-change in how services are being delivered, which requires different ways of working and even greater resilience, whilst providing opportunities for personal, business and wider leadership development.

The programme has been adapted to run virtually across two afternoons with sessions of 90 minutes each with a 30 minute break between. There will be a small amount of skills practice which can be done virtually between the two sessions. We also anticipate



that the programme will run again on a face to face basis in the future.

Booking details will be available soon.

Save the Date - Having Better Conversations Virtual Training

Wednesday 23rd September 2020, 19:00-21:00

Virtual – via Zoom

This is a free event for GPs in the Humber region provided as part of our GP resilience programme. The programme previously ran in December 2019 and has been adapted to run virtually so that more GPs can receive the training.

NHSE has developed this programme to promote the idea of “having better conversations” by developing and teaching a framework to provide informal yet timely support. This allows the sensitive exploration of any potential contributing factors and the possibilities that might exist for change.

This is not mentoring, coaching or outcome focused problem-solving, but is intended to provide some clarity and direction for doctors seeking a quick response to a problem or concern. It gives consideration to whether that response is constructive and appropriate, and offers an opportunity to gain a wider perspective in a supportive environment.

Booking details will be available soon.

HCV Apprenticeship Project

Following the announcement from the Chancellor on the ‘Plan for Jobs’ and the additional funding for traineeships and apprenticeships, two major updates to the support available to businesses have been launched:

- Businesses will receive a £1,000 bonus payment from the Government for every trainee they offer a work experience placement to.
 - Businesses will be given £2,000 for each new apprentice they hire under the age of 25. This is in addition to the existing £1,000 payment that the Government already provides for new 16-18-year-old apprentices and those aged under 25 with an Education, Health and Care Plan.
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The Excellence Centre are currently working on a project across the Humber, Coast and Vale to support GP Practices, Nursing and Care Home and Hospices to become digitally ready to access the apprenticeship funding available and receive transferred funds from other organisations who have had unspent apprenticeship levy funds.

Additionally, a key focus of the project is to support your service with workforce development and the potential to use apprenticeships within their practices; either as new recruits or to up skill substantive employees.

There will be a series of short webinars throughout August and September on apprenticeships, traineeships and workforce development. **The first webinar is on Trainee Nursing Associates on Thursday 6 August 2020.** Click [here](#) to book a place.

If you would like to discuss using apprenticeships within your workforce or utilising the apprenticeship funding available or would like to request webinars on anything specific relating to apprenticeships or workforce development, please contact Claire Ryan, Project Manager at claire.ryan@hey.nhs.uk

Talk Before You Walk Seeks GP Input

The HCV Talk before you walk programme is working to ensure patients are triaged before attending A&E for non-life threatening conditions. Sue Rogerson is co-ordinating the working group and they are looking for a GP who may be interested in participating in the programme for some clinical input.

If you may be interested in this please contact us and we can pass your details on.

PRACTICE MANAGEMENT

Transition between COVID-19 Care Home Support and the Care Homes Service in the PCN DES

From 31 July 2020, the interim COVID-19 care home service will transition into the Enhanced Health in Care Homes service as described in the [Network Contract Directed Enhanced Service \(DES\)](#). The BMA have agreed with NHSEI that to provide some continuity and stability the Network Contract DES will be amended so that when



appropriate the clinical lead role for the service may, as now, be held by a clinician, other than a GP, with appropriate experience of working with care homes provided this is agreed by the practices in the primary care network, the CCG and the relevant community provider.

Type IIR Face Masks from Cardinal Health Alert

The Medicines and Healthcare products Regulation Authority (MHRA) have [issued an alert](#) to all NHS and social care providers, asking organisations to destroy affected lots of the type IIR face masks from Cardinal Health. This must be completed by 3 August 2020. If you are in shortage, you are advised to contact your local resilience forum (LRF) in the first instance, who may be able to assist you or advise you to [contact the National Supply Distribution Response](#).

COVID-19 Test Results and GP Systems

NHS Digital has [announced](#) that COVID-19 test results are now being automatically sent to GP systems as well as being communicated to patients, giving GPs visibility of which of their patients have had COVID-19 tests and whether they have tested positive or negative for the virus.

Patients who use online patient services such as the NHS App and who have requested full access to their GP medical records will now be able to access their results themselves, as well as receiving their results via communication from the NHS Business Service Authority as before.

GUIDANCE & RESOURCES

Health and Care Video Library Available Free to NHS

As part of the response to COVID-19, NHSX has secured a 6 month national licence for NHS clinicians to access [a health and care video library of over 600 patient information videos free of charge](#). The videos have been developed and written by NHS clinicians to use within a wide range of care pathways including maternity, physiotherapy, rheumatology and podiatry. The library platform and the videos have been professionally produced by Health and Care Innovations (HCI).



BMA Issues Holiday Guidance Ahead of Domestic Tourism Return

Following the [guidance](#) issued by GPC England about the support practices can continue to offer their patients when travelling on holiday this year in order to support colleagues in tourist areas, the BMA has today issued further advice and public health information for the public. This comes just days after pictures of a crowded Bournemouth beach raised concerns over social distancing. The BMA's public messaging campaign¹ urges people to:

- Don't travel if you're ill, or have any symptoms of COVID-19 (e.g. cough, high temperature, loss of smell or taste)
- Have a plan for self-isolation if you, or anybody in your 'bubble', develops symptoms or are told to do so by the official NHS Test and Trace service. You will likely be required to self-isolate for 14 days.
- If you take medicines prescribed by your doctor, make sure you have enough with you to last for your time away
- Practise good social distancing and hand washing while you are away from home
- Wear a face covering whenever you are mixing with others outside your 'bubble' and cannot social distance, particularly when you are indoors.

To read more about the principles [see PDF here](#).

Performers List Processes Associated with GP Registrars and Professional Standards

[This document](#) that provides formal notification from NHSE/I confirming the joint agreement with Health Education England that GPRs due to start training in August 2020 are exempt from the requirement to be included in the England Medical Performers List.

Intimate Clinical Assessments during COVID-19

A new guidance document - [Key principles for intimate clinical assessments undertaken remotely in response to COVID-19](#) - has been published by NHS England and NHS Improvement.

This guidance is aimed at clinicians who are consulting remotely with patients through a digital channel (e.g. online, email, text, video-link) across healthcare settings. The



COVID-19 pandemic has accelerated the adoption and utilisation of online and video consultations as part of core clinical practice. This guide focuses on how to safely manage the receipt, storage and use of intimate images taken by patients for clinical purposes.

GENERAL NEWS

Update on GP Services for 2020/21

NHSE/I has [released its next letter regarding arrangements for practices for the rest of 2020/21](#). In summary the letter outlines:

- Continued suspension of appraisal and revalidation. We are working with NHSEI and others on a much more proportionate and supportive appraisal process and will provide details about this shortly
- QOF will recommence from 1 July (focussing on flu, prescribing, screening and maintaining registers, as well as modified QI indicators to focus on returning services to patients with cancer or learning disabilities) with income protection for those indicators that have not been prioritised for return, and an expectation that practices will discuss their approach to prioritising clinical care with the CCG. QOF guidance to support this approach will be produced very soon but in summary the points relating to influenza and cervical smear targets will be doubled to 58, the points for quality improvement (74), prescribing indicators (44) and disease registers (81) will remain the same and the other indicators (310) will have income protection. Income related to this element of QOF will be paid based on historic achievement. We are working on how that will be calculated. We would encourage practices to use their professional judgement in their management of patients with long term conditions, to do what they can within their capacity and capability over the coming months, and by doing so demonstrate that, even at times such as this, the delivery of good quality care is not dependent on contractual requirements.
- Practices should return to providing new patient reviews, routine medication reviews, over- 75 health checks, clinical reviews of frailty, shingles vaccinations, and PPG arrangements
- The worklist process from CCAS will be maintained at 1 per 500 in order to ensure any local outbreaks and any second wave might be managed without requiring further changes
- Friends and Family tests, and the requirement for consent for ERD remain

suspended

- The Investment and Impact Fund will begin in October, but details of exactly what is to be delivered are still being discussed
- DSQS will return from August for dispensing practices
- Encouragement for PCNs to continue with their recruitment (and provides further assurances around liabilities)
- Commissioners are encouraged to reinstate LES/LIS in an appropriate and controlled way
- Arrangements for local outbreaks should they occur
- Income protection and further funding implications are outlined, although further discussion on funding is ongoing

BMA Report – Trust GPs to Lead

This report sets out a range of principles and solutions that will enable GPs and practices to manage the ongoing demands of responding to COVID-19. The report also looks at GPs being supported to continue delivering innovative patient-focused local services for both the short and long term.

Download [*Trust GPs to lead: learning from the response to COVID-19 within general practice in England.*](#)

RCGP Report - General Practice in a Post-COVID World

The Royal College of GPs has published their report [*General Practice in a Post-COVID World*](#), which outlines how GPs will be on the frontline of dealing with the physical and psychological health consequences of the COVID-19 pandemic, and the need for urgent government planning and funding to prepare general practice services for facilitating the recovery of local communities.

It supports the call in the BMA report (see above) for a reduction in bureaucracy and regulation, and an increase in investment for digital technology to support the new ways of working and by doing so both improve access and work towards a greener way of delivering general practice.

New Performer List Website

The new Public Performer List website is now live. Go to <https://secure.pcse.england.nhs.uk/PerformersLists> to view the site.

The new site is designed to be more user friendly, with more functionality and data points than before. On the new site users can:

- Perform a 'Quick Search' for Performers on the Performers List for England by name
- Create a more 'Advanced Search' to filter down further, for example by type of Performer or CCG area
- Search for Performers attached to a particular practice, using the 'Organisation Search' option

You can also download all search results directly from the site.

Seasonal Flu Vaccination Programme

The government has announced that this year's flu vaccination programme will be expanded to include many people previously not included.

A significant new group will be eligible for the free flu vaccine as people aged 50 to 64 will be invited later in the season for a vaccination. Households of those on the shielded patient list will be eligible, and the school programme will be expanded to the first year of secondary schools for the first time.

More information can be found in the [government flu vaccination announcement](#). The LMC are working with NHSE and local commissioners to clarify the requirements for the flu vaccinations and will provide updates on the LMC website.

NHS Funding and Pay Uplift

The government has announced that it has accepted the latest Review Body on Doctors' and Dentists' Remuneration (DDRB) report's recommendation that NHS doctors and dentists in England should see a pay uplift of 2.8%.

Salaried GP pay bands will be uplifted by 2.8%, backdated to April. However the BMA has confirmed that practices will not receive a specific funding uplift in order to fund



these pay rises for staff as this is already covered in the five-year funding deal.

The BMA issued the following update regarding primary care pay recently:

“The GP contract agreement provides practices with funding for a 2% pay uplift for all staff. The government has announced (based on DDRB recommendation) an uplift of 2.8% for Salaried GPs.

GPC England position on the pay uplift

We do not believe that the 2.8% is enough and the BMA is pushing for this to be increased. In addition, we do not believe it is fair that Contractor GPs have not been included in this reward for the efforts during the COVID period (as government has badged the uplift this year). Junior Doctors are in a similar position and the BMA Council Chair will be meeting with the Secretary of State for Health to raise these concerns. Similarly, the GPC executive are continuing to liaise with DHSC and NHSEI to push for this COVID-reward to be extended to all GPs and we are exploring flexibilities elsewhere which might allow practices to realise this, irrespective of the government decision.

Applying the uplift

The main question we are getting is about how to apply the uplift as it currently stands, while we continue to put pressure on DHSC and NHSEI.

How any pay uplift is actually provided to salaried GPs, as with all practice staff, will be determined by the terms of their employment contract. However, practices are encouraged to provide the full 2.8% uplift for all Salaried GPs.

The GMS contract regulations, and standard PMS agreement (since 2015), state that practices must employ Salaried GPs on terms no less favourable than the model contract. So all GMS practices, and those PMS practices that have agreed to that wording, must employ Salaried GPs on terms no less favourable than the Salaried GP model contract.

The Salaried GP model contract states ‘annual increments on [incremental date] each year and in accordance with the Government’s decision on the pay of general practitioners following the recommendation of the Doctors’ and Dentists’ Review Body’. Therefore if this wording is included in the employment contract, the full 2.8% uplift must be provided. The model contract however may be

amended by agreement, so it will depend on the individual agreement between the practice and the Salaried GP. If it includes the clause above then the 2.8% must be provided. If a different annual increment/calculation is included in the contract, or if the contract is silent on this point, then the practice is still encourage to pass on the full 2.8%.

Other practice staff

The government announcement does not cover other practice staff, however we know that practices often wait for this announcement before arranging the uplifts for all of their staff. As stated previously the contract agreement provides funding for a 2% pay uplift for all staff. As with salaried GPs, the reality will be based on what it states in the contract of employment but practices are encouraged to provide at least the full 2% uplift (or more if the terms of the employment contract dictate so).”

BMA GP committee chair Dr Richard Vautrey commented: “After such a tumultuous few months, this announcement comes with no extra funding to support practices to follow its recommendation for sessional GPs, nor allow GP partners a pay increase that truly reflects the immense efforts that they have gone to this year.”

The BMA have also written to Professor Stephen Powis, National Medical Director, NHS England regarding managing workload and workflow across primary and secondary care, during and following the COVID-19 pandemic. The letter can be downloaded [here](#).

HYMS Student Placements 2020/2021

The team at HYMS would like to thank all the practices who have agreed to continue to provide excellent training for our local medical students, particularly during the challenging times during the COVID-19 pandemic. We are all aware that the new year will be different in many ways, and that varied approaches have been considered and agreed on to provide our students with access to patient consultations and remote learning.

Due to the recent increase in student numbers, there are still opportunities for practices to become involved with medical student training, or to increase their current student numbers. In particular, practices who may be considering Year 5 student training are asked to contact the team at HYMS.



For further discussions or informal enquiries, please contact Dr Rolan Schreiber via email hyrs30@hyms.ac.uk

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