

15th February 2021

Dear Colleague

Please see below our latest updates for your information:

Support for vaccination programme: people with learning disabilities (K&M CCG GP Update 9th February 2021)

During December 2020 there was an increase in the number of people with learning disabilities dying from Covid-19. The CCG adapted its vaccination implementation plan in response to this clear health inequality - all adults with learning disabilities who are on the GP learning disability registers will be vaccinated in the first phase of the vaccination delivery.

Adapting the priority list to reflect evidenced local need will not disrupt other vaccination priorities but allows for the inclusion of an additional clinically vulnerable group, in line with the national contract and Joint Committee on Vaccination and Immunisation (JCVI) guidance. Residents of care homes and supported living for people with learning disabilities are being vaccinated and those living independently or with family should be contacted by the primary care vaccination programme.

Please make sure all staff involved in identifying people to invite for vaccination or handling queries from patients about vaccinations are aware that patients on the Learning Disability Register should be being contacted and invited for vaccination as a current priority group.

Vaccination programme service support is available to PCNs seeking assistance in vaccinating some or all of their registered patients including adults with learning disabilities. The Community Learning Disability Nursing Team is offering a service to vaccinate adults with learning disabilities who are unable to access the PCN vaccine sites. If you have any queries about this please speak to your PCN vaccination lead.

COVID-19 vaccination programme (England)

Earlier this week, <u>eligible patients (70 or over) who have not yet heard from their practice or</u> received a letter and have not yet taken up a vaccine offer, were invited to contact the <u>online</u> booking service, call 119 or contact their GP practice directly. This aims to catch patients who may have been missed by or not responded to previous communications.

While the focus continues to be to vaccinate JCVI groups 1-4 this week if this is complete vaccination sites are permitted to offer appointments to people in cohort 5 and 6 instead of risking wastage.

Practices have also been asked to contact their clinically extremely vulnerable patients, who are shielding, to ensure they have been offered the vaccine.

Vaccination of frontline health and social care workers

Protecting frontline health and social care workers from COVID-19 remains a priority, something that the BMA has been lobbying on, and NHSE/I has written to commissioners this week asking

for reassurance that the offer of a vaccination to frontline health and social care workers, as priority cohorts, has been fulfilled.

Practices are encouraged to liaise with local system partners to ensure that any staff who have not yet been offered a vaccine are offered one, including any locum GPs they are in regular contact with, as soon as practically possible.

<u>Social care workers</u> are now able to, for a limited period until 28 February, to self-book a vaccination at a vaccination centre or community pharmacy led local vaccination service <u>online</u>

Transport of Astra Zeneca vaccine to GP practices within the PCN Grouping

The NHSE/I has confirmed that the <u>SPS SOP</u> (Standard Operating Procedure) has been updated to make clear that the Astra Zeneca COVID-19 vaccine does not need to be used immediately after being transported within the PCN grouping. The SOP states: 1.1.2 The vaccine should be used as soon as it is received or immediately put in a refrigerator to be administered as soon as possible thereafter. *This has been defined as meaning within 24 hours or over the following days.*

Freeing up practices to support COVID-19 vaccination

NHSE/I has written to practices and commissioners providing further measures on freeing up practices to support COVID-19 vaccinations, following their letter of 7 January 2021. The letter sets out the arrangements for additional funding for PCN clinical directors, and income protection arrangements for the Minor Surgery DES and QOF (Quality and Outcomes Framework).

Vaccine hesitancy

Surveys have shown stark differences by ethnic group in attitudes to COVID vaccines, and a quarter of younger women fear it would affect fertility. The BMA has published <u>guidance and</u> resources on how to communicate with different groups about the vaccine.

The British Fertility Society and Association of Reproductive and Clinical Scientists has also published some <u>COVID-19 Vaccines FAQs</u> to help address some of the vaccine hesitancy relating to fertility.

Read BMA <u>guidance on the COVID-19 vaccination programme</u> which includes information about what is expected of practices and the support available to enable practices to prioritise vaccine delivery.

Vaccine dose data (UK and England)

Over <u>13,5 million people in the UK</u> have received their first dose, and almost 525,000 have received their second dose. The latest <u>data report</u> show that as of 12 February a total of 12,3 million doses in total have been given in England.

In the 10 weeks since vaccinations against coronavirus began in the UK, a first dose has been given to more than 11.8 million people in England, more than 715,900 people in Wales, more than 1.1 million in Scotland and more than 373,400 in Northern Ireland. This is an incredible achievement and the BMA would like to say thank you to all those that have made this possible.

Government White Paper on NHS reform and Integrated Care Systems (England)

The Government has now published <u>'Integration and Innovation: working together to improve</u> <u>health and social care for all'</u> – its white paper on new plans to reform the NHS, including proposals to make ICSs statutory and make major changes to way services are procured.

Chaand Nagpaul, Chair of BMA council, has released a <u>strong statement on the white paper</u>, stressing the need for clinicians to be at the heart of any changes. The BMA will be producing a summary of the white paper for members shortly. In January, the <u>BMA submitted a</u> <u>comprehensive response</u> to NHS England's legislative proposals, on which the Government's plans have been based, highlighting the importance of ensuring proper clinical, GP, and LMC representation.

The proposals set out that GPs will be one of the few required members of the ICS leadership, and that there will be a lot of flexibility around how place level (former CCG) working is organised and works, so there is a key role for LMCs to engage in that to help shape it.

Contract agreement 2021/22 webinar (England)

Following the recent <u>contract agreement for 2021/22</u>, we will be holding two contract virtual roadshows/webinars on the following dates: 24th February – 19.30-20.30 25th February – 12.30-13.30 Register here. A recording of the webinar will be available on the BMA website after the event.

Assessments carried out for detention under the mental health to take place in person (England)

Following a <u>ruling in case</u> bought by Devon Partnership NHS Trust against the Secretary of State, NHS England has issued directions to all mental health providers <u>not to carry out any</u> <u>assessments for the purposes of determining whether or not an individual should be</u> <u>detained under the act remotely</u> (by any medium). This applies to all members of a medical team involved in the decision and should be considered as the overriding guidance until further notice. This was reported by the <u>Guardian</u>

Amendments to European Health Insurance Cards (EHICs) and S1 forms (UK) Regulations

There have been some minor amendments to the GMS and PMS regulations relating to European Health Insurance Cards (EHICs) and S1 forms, to allow for reciprocal healthcare arrangements with EU member states.

The change has been made via the <u>Reciprocal and Cross-Border Healthcare (Amendment</u> <u>etc.) (EU Exit) Regulations 2020</u> which support the process of EU exit. The amendments are within the contract regulations that govern *information relating to overseas visitors* (GMS regulation 74F and PMS regulation 67F) – where, if patients choose to provide EHIC, S1 or PRC details on registration, then GPs must forward those details to NHS Digital or NHS BSA.

The new wording allows for the possibility that, on registration, patients may in future submit other (unnamed) documents which are equivalent to EHICs or S1s, which could be required as part of a "listed healthcare arrangement" between the UK and an EU/EEA country (or the EU). However, at present, the UK government has not agreed any listed healthcare arrangements which establish EHIC or S1 equivalent documents, so for now there is no possibility of patients submitting them.

GP Retention Scheme Webinar

A <u>webinar on the GP Retention Scheme</u> will be taking place on *Thursday 25 February* from 7pm – 8.15pm. We will be looking at how the GP Retention Scheme works for both employees and employers, tackling some of the common misconceptions about the scheme and hearing from GPs who are currently on the scheme. Speakers include:

Samira Anane, chair (GP and GPC policy lead for Education, training and workforce) Naureen Bhatti (Health Education England) Katie Bramall-Stainer (Retained GP) Jonathan Rial (Retained GP) Paula Wright (Sessional GPs Committee) Tim Morton (GPC)

The session will be of interest to GPs who are considering applying to join the scheme or who would like to know more about it, GP employers and practice managers who would be interested in employing a retained GP and existing Retained GPs who have questions about the scheme or would like to hear some perspectives from other retained GPs and employers.

The webinar will be recorded and will be made available to view on the BMA website during the following week. There will a Q&A session at the end and you can submit any questions in advance to <u>cscott@bma.org.uk</u>. Click <u>here</u> to sign up

Kind regards Kent Local Medical Committee