

*Dear Colleagues*

**Wessex LMCs News Update from the Team. . .**

## **Wessex LMCs Intro. . .**



*Laura Edwards  
Joint CEO  
Wessex Local Medical Committees Ltd*

This week has seen the release of the details of the next phase of the COVID vaccination programme 'Phase 5'. There are definite moves that aim to make it a more 'business as usual' model and a flavour that it should move away from the emergency mode that we have been operating under to date. Disappointingly there is still a lack of detail around many aspects. It is a specification that seems to put the flexibility on the side of the commissioner rather than the provider especially around staffing – which, as ever, is the

biggest issue facing all parts of the NHS.

It has also been made very clear that if you do offer vaccination this must not interfere with your normal offering of primary care services.

Of particular note the Item of Service (IOS) fee has reduced from £12.58 to £10.06 per vaccine which is to align with other Imms & Vacs IOS fees with a £10 supplementary fee for housebound patients.

One major uncertainty is the interplay with the flu vaccination campaign. Our view is that note needs to be made of the different timings - with the COVID campaign due much earlier than current flu vaccine orders are likely to arrive. We would therefore advise that practices continue to plan for their normal flu clinics.

We have put more detail below.

We would urge that practices consider carefully their decision in the short time frame that you have available to make this decision.

## **Covid Vaccination Programme Phase 5**

On the 30<sup>th</sup> June NHSE released the [Phase 5 Covid Vaccination Programme Specification](#) which will run from the 1<sup>st</sup> September 2022 – 31<sup>st</sup> March 2023. For practices who signed up to phase 4, this will terminate early on the 31<sup>st</sup> August 2022 to enable this specification to come into place. Practices/PCNs who are signed up to phase 4 but don't wish to sign up to phase 5 need to note this will end earlier than expected, original end date was 30<sup>th</sup> September 2022.

Practices need to ensure you have indicated to the Commissioner a willingness to participate by Thursday 14<sup>th</sup> July (5pm deadline) with consideration being given that you: have the ability to administer any of the adult Covid Vaccinations, that by providing this service it doesn't negatively affect the delivery of your practice services, you are able to record the vaccines on the day they are given and you agree with the Commissioner your role if an increase in the number of vaccines given and/or timeframe is needed.

You need to be aware that the Item of Service (IOS) fee has changed from £12.58 to £10.06 per vaccine which is to align with other Imms & Vacs IOS fees and would suggest discussing whether you are able to provide this service with a change in the fee being paid. It is also useful to note there is a £10 supplementary fee for housebound patients. We do have a spread sheet available that enables you to identify the costs associated with running a service which can be accessed via: <https://www.wessexlmcs.com/costingaservice> and you may wish to use.

What are the changes you need to be aware of:

- Phase 5 currently identifies the eligible cohorts as:
  - Patients in older adult care homes, it specifies vaccines to be given 10 weeks from the start of the contract or as soon as reasonably possible
  - Housebound patients
  - Severley Immunosuppressed patients (as defined in The Green Book)

It also appears to enable practices/PCNs to vaccinate those previously eligible to receive a vaccination but didn't take up the offer for whatever reason and who meet the eligibility criteria set out in Phases 1 – 4 along with those who now meet the eligibility criteria. Interestingly this is referenced in section 9.3 of the specification and is in brackets, so this may change nearer the time. The cohorts are also dependent on any changes the JCVI may recommend and again this may be updated nearer the time

- It encourages practices where possible to align the delivery of Covid Vaccinations for the three cohorts with other visits, appointments or obligations. As the Covid vaccination programme will be at the same time as flu vaccinations and whilst the specification enables co-administration it also states this shouldn't delay flu vaccinations being given and therefore would suggest practices continue to plan for flu clinics as needed
- It requires agreement with the commissioner of how many vaccinations per week can be delivered to help with local planning

The specification includes the requirements associated with having a designated site per PCN however, when looking at the cohorts this would only be applicable to the severely immunosuppressed patients as the other two cohorts will need to be given elsewhere. There may also be the need to offer vaccine where patients didn't previously take up the offer of a vaccine or become eligible, so it is likely be a smaller number of patients that will need to attend a designated site to obtain a vaccine but again this is all dependent on any changes recommended by the JCVI. Within the [Site Delegation & Onboarding document](#) it identifies the process which will need to be followed and states "a key requirement is that all GP practices have access to a designated site from which the majority of Covid vaccinations must be administered" and would suggest this enables some flexibility of where these are delivered.

Going forward it will be for practices/PCNs to decide whether in light of the changes described above you wish to continue to provide Covid Vaccinations.

## Warning over GPs leaving the NHS

In response to the [Royal College of GP's report 'Fit for the Future'](#) and its warning that England could lose almost 19,000 GPs over the next five years, Dr Kieran Sharrock, GPC England deputy chair, said:

*"This stark warning from the College is one that the Government can ill afford to ignore. The number of fully qualified GPs is already plummeting, meaning each day more people are losing 'their family doctor', and such projections lay bare the potentially devastating impact for both the NHS and patients if politicians and policymakers fail to act.*

*The RCGP has laid out a number of areas that need urgent attention, many of which the BMA has raised continuously. Ministers must work with the profession and organisations such as the BMA and RCGP to come to workable solutions that protect general practice so that doctors and GP teams have the capacity to provide the standard of care that patients deserve."* [Read the full statement](#)

## Letter from GP for travel with medication

It has been brought to the BMAs attention that [some airlines](#) are advising travellers bringing medication in their hand luggage, should bring a letter from their medical practitioner confirming the type of medication and what it is for. The BMA will raise this issue with the airline, but in the meantime, we would remind practices that patients can print off their medical record from the NHS app, or alternatively, practices are able to charge for travel-related requests for information

## Fit Note Update

From 1 July, new legislation comes into force which allows nurses, occupational therapists, pharmacists, and physiotherapists to legally certify fit notes, in addition to doctors. To support this, the government has published [guidance](#) to help individuals and employers identify the knowledge, skills and experience required to certify fit notes. New training packages are available below and should be completed before taking up this task - this is freely accessible for all healthcare professionals. There is a rollout period from today where GP IT systems will be updated to reflect the change.

[The Fit Note - elearning for healthcare \(e-lfh.org.uk\)](#)

[Work and Health - elearning for healthcare \(e-lfh.org.uk\)](#)

## Roll out of a new digital firearms marker for GP practices

To make firearms licensing safer and the system quicker for practices, NHS Digital is introducing a standardised digital firearms marker in England. This marker matches relevant medical conditions against a firearms code, triggering an automatic flag to the doctor.

The marker will start to be rolled out by different GP IT suppliers from July 2022 when it will be available to apply to a patient EPR. It cannot be used retrospectively on those patients who already have previous firearms licences/flags.

IT suppliers will be issuing communications and advice on using the marker system to support the rollout.

## Shared Decision Making (SDM) technique for clinicians to use during patient consultations

Following on from their Shared Decision Making (SDM) module, the Personalised Care Institute has launched a short video on [Teachback consultations](#), which is an evidence based technique for clinicians to use during consultations to ensure that patients understand information they have been provided and can make use of it.

It is particularly helpful when talking to people with limited or lower levels of health literacy so we can be assured that they have fully understood the information and can participate in decisions and choices about their health and care.

For the latest updates and information on SDM please see our [collaboration platform](#) (you will need to login into the NHS Futures Platform and join that network) or contact the team via: [ENGLAND.shareddecisionmaking@nhs.net](mailto:ENGLAND.shareddecisionmaking@nhs.net).

## Easy top read guides to health choices and questions to ask

Health Education England has worked with people with lived experience to produce two [easy read health guides](#). Designed to help people navigate healthcare information, the guides could help people get the treatment they want and the answers they need to understand information they are given. This could include information about medication, appointments, or treatment, and how it is provided, for example by letter or email.

'Get ready to talk about your health' prepares people for what to do before they go for a healthcare consultation. '3 questions for better health' suggests important questions to ask during an appointment.

## BMA Employer Advisory Service

As a membership benefit, the BMA provides an [employer advice service](#) for GP partners and your practice managers. With no expensive contracts, you can get tailored advice from the BMA's specialist team of HR & employment advisers and regulatory knowledge, who can support you with HR & employment law case management, employment tribunal support, and much more. *The service is available to BMA members - [contact the BMA GP employer advisory service](#)*

## Programme now available for General Practice Managers

The Institute of General Practice Management (IGPM) has launched its [formal accreditation programme for managers in primary care](#), with 10 managers already having received the accreditation. Anyone with a managerial role in general practice can apply for accreditation, with full details of eligibility available on the IGPM website. Associates must apply to be assessed by an accreditation panel in order to obtain the level of Member of the Institute of General Practice Management (MIGPM).

This is welcomed news for managers, with the IGPM established by practice managers to ensure that there is a professional body to represent and support them. [Practice managers can join The IGPM online](#).

## Trainee Nurse Associates – Apprenticeship Programme

Health Education England has announced a national cohort offer of 100 Trainee Nurse Associate places for General Practice to start in October 2022 with The Open University. These places are open to any new or existing staff within your Primary Care Network or General Practice.

This is a fantastic opportunity to increase your workforce. Please forward your expressions of interest to the Health Education England National Nursing and Midwifery Team at [nationalnursingandmidwiferyteam@hee.nhs.uk](mailto:nationalnursingandmidwiferyteam@hee.nhs.uk) by no later than Friday 29 July 2022

## Mandatory Training in Learning Disabilities and Autism

This training is to ensure all staff working in health and social care receive learning disability and autism training. It is called the Oliver McGowan Mandatory Training after Oliver McGowan, a patient whose death in 2016 triggered a government consultation. ([See more info from Health Education England](#))

The Government has introduced a requirement for anyone registered with CQC to ensure their employees receive learning disability and autism training appropriate to their role. This has been done as part of the Health and Care Act 2022, therefore making it a statutory responsibility. CQC will be monitoring practices to make sure their staff will have done this training

On 1st July 2022 it became statutory to complete this training, but the training packages are not yet available.

In the mean-time if practices wanted to start to update their staff we have a 15 minute audio podcast on [Patients with Learning Disabilities and the Flu Jab](#) which could be interesting to share with your team. We also have a recorded webinar - [Learning Disabilities in Patients - Autism: What is our role in primary care?](#) – where Micky Koenig from the Wiltshire Autism Diagnostic Service was joined by David Reynolds who shared his personal experiences of living with autism and a discussion was had as to what our role in Primary Care is. Both resources are FREE to access.

When the official training packages are released, we will share these with you.

You may also find it useful to watch to our [Practice Manager update](#) where this topic was discussed by our Directors of Primary Care.

## Education & Events

### Effective Appraisals (two-part training)

Day 1: Tuesday 20 September 2022 1pm – 4pm

Day 2: Tuesday 27 September 2022 1pm – 4pm

Wessex LMC Members £170pp

Book Online: <https://www.wessexlmcs.com/events/12714>



- Are you new to management and never run an appraisal before?
- Do you feel your appraisal system needs a rethink, or to be refreshed?
- Maybe you don't like running appraisals, and don't feel you and your team benefit from them?

If so, this 2-part virtual programme will be an ideal opportunity to look at best practice, and update your skills. This course is suitable for anyone running appraisals, including nurses.

*Please note this webinar is not being recorded*

### A guide to dealing with patients who present with medically unexplained symptoms

Friday 23<sup>rd</sup> September 1pm – 2pm

Wessex LMCs members: £25pp

Book online: <https://www.wessexlmcs.com/events/13421>

A significant proportion of patients who present to clinicians will turn out to have symptoms that are medically inexplicable. Most doctors and nurses have regular patients who leave them feeling “overwhelmed”. The expression “heartsink” has been applied to them. Such patients present frustrations and challenges for all clinicians. We now have clear evidence that can guide more effective use of time and lead to better outcomes.

This webinar is for all clinicians who undertake patient consultations.



*Please note this webinar is not being recorded*

*Regards*

*The LMC Team*

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