

# YOUR News Update



Issue: 16 December 2022

*Dear Colleagues*

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

**PRESS RELEASE: 'Help us treat the sickest patients the quickest'  
GPs offer advice to parents amid surge in Strep A cases**

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



*Dr Will Howard  
Medical Director  
Wessex Local Medical Committees Ltd*

Group A Strep is *the* news story right now. Parents and Carers are anxious when their children are ill, and this has been driven by a real rise in Group A Strep infection rates. As we all know, this rise in cases of Group A Strep has led to some very poorly children and also, tragically, some deaths. Parental anxiety has fuelled a juggernaut of demand that has been impossible to stop, and the perspective of illness severity has been lost. The emotive messaging out there means we are searching for the most ill children amongst an ocean of mild illness. GP Practices, OOH services, 111 services and A+E departments are overwhelmed – but this *isn't* on the news.

Wessex LMCs are trying to get this story out there – that GP Practices are facing unprecedented demand, and that this might mean we have to stand down some routine services. We are also lobbying NHS England and ICBs across Wessex to support Practices in deciding what they can stop doing, but also protect practice income.

A major difficulty that Practices have had is in prescribing antibiotics. This has been a daily headline in most news feeds as patients search pharmacies to get their prescriptions. The government has said in Parliament that there is plenty of antibiotic out there - mixed messages making patients experience and expectations unworkable.

A simple support for Practices is to develop a local "spreadsheet" shared on a Sharepoint or Dropbox platform with local Pharmacies. This is working well in some networks where Pharmacies complete their stock on the shared spreadsheet daily, noting whether they have lots of stock (green), limited stock (amber, or no stock (red) of the variety of antibiotic options available to treat patients.

Here is an [example spreadsheet](#) that PCNs could use as a template and empower local knowledge sharing between Pharmacies and clinicians on a daily basis. Asking a member of PCN staff to chase Pharmacies if they are not reporting daily can be helpful, but our experience shows that Pharmacies really want to support efficient prescribing and so do complete this reliably. Lots of local Pharmacy groups have developed a WhatsApp group which Practices could link into as well to ensure there is rapid information sharing.

We hope that this helps a little during what is an almost impossible time for Practices. We also very much hope that you get time with your own families and loved ones in the coming few weeks to help recharge your batteries.

## Strep A Guidance

In light of the recent increase of children presenting with Strep A symptoms, [updated interim clinical guidance aimed at clinicians involved in the diagnosis and treatment of children up to the age of 18 years](#), which follows the [UK Health Security Agency report released on 2 December 2022](#), has been published.

David Webb, Chief Pharmaceutical Officer for England has [written to pharmacists about Group A Strep and antibiotic supply](#), outlining that sufficient national stock exists for the NHS.

A [letter has also gone out to systems](#) encouraging primary care teams to boost in-person assessment capacity, where possible, as well as considering the establishment of combined adult and paediatric Acute Respiratory Infection (ARI) hubs.

The [NHS.UK Strep A webpage](#) has also been updated for the public with information, symptoms and when to seek help – please share this webpage on your public channels.

If you are feeling uncertain about who we should be treating and at what threshold or confused about the myriad of information that has been put out around this then listen to this calm, sensible, pragmatic podcast: [Diagnosis and Management of Group A Streptococcus Infections](#).

## Healthier Together Website

Many of our practices have been making increased use of the [Healthier Together website](#) over the last couple of weeks. It contains specific advice for parents in a traffic light format about when to be concerned for their child and what action to take. There is specific advice on a [Strep A](#). Sharing a link to the website can be a helpful safety netting step at the end of a consultation.

If you are not currently signposting parents to the website, you may wish to view it and consider this for the future.

Some practices in Hampshire & the IOW have access to an app that allows parents to direct book appointments should the app advise it. Please complete this [form](#) to register your Hants & IOW practice to the Healthier Together app. If you have any queries or require further support, please contact [ahmadc@cenigma.net](mailto:ahmadc@cenigma.net)

## GPCE Advice to Practices on Strike Action Being Undertaken Across the NHS

Many professional groups are undertaking industrial action this winter as part of contractual negotiations and disputes with government and their employers. Whilst practice staff are not in dispute with their employing practices, some of these actions will impact on GPs and practices. The background to these disputes is very similar to pressures that GPs will recognise as currently impacting on them and their practices. Erosion in real terms pay, lack of effective workforce planning, deteriorated terms and conditions, failure to provide sufficient training places, and a disregard for the wellbeing of an exhausted and demoralised workforce apply to all NHS profession groups.

Government and NHS England have recognised that strikes will inevitably disrupt patient care, whilst unions have committed to preserve emergency care so as not to put patients at risk.

Practices may receive requests to help support secondary care or community services at times of industrial action. Examples may include:

- GPs or practice staff working in ED/urgent care
- Practice nursing staff undertaking work ordinarily done in hospital
- GPs supporting ambulance services whether with home visiting or at call centres

We would strongly advise practices to carefully consider the implications and impact on the care of their own patients if becoming involved in these plans. By depleting our practice workforce to support these services it will risk harm to our patients in general practice, potentially increase their waiting times, put practices at contractual risk by reducing the service that they are able to offer, and have GPs and practice staff working

beyond their competence in roles they would not ordinarily fulfil. This is in addition to potentially undermining the cause of our clinical colleagues in their trade disputes, and the likelihood of their support of any potential future action by members of the BMA

GPs and practice staff are faced with unmanageable demand for our services and skills, and practices are finding it increasingly difficult to provide safe care. The care of the patient is our primary concern, and it is vital that we devote ourselves to doing this within our practices, and not artificially shoring up other parts of the NHS, which are impacted by industrial action.

More information can be found here <https://www.bma.org.uk/what-we-do/get-involved/supporting-the-profession/how-to-support-and-show-solidarity-with-your-nursing-colleagues>

## Flu Vaccine Supply for Children (two years to less than 18 years)

With the recent rise in the number of young children being hospitalised with flu, and since receiving anecdotal feedback that, in some cases, parents are not being able to access the flu vaccine that is suitable for their child, we would like to remind practices that unless medically contraindicated or otherwise unsuitable, the nasal spray, LAIV, is the vaccine of choice for the childhood influenza programme. It is easy to administer and is considered better at preventing the spread of flu.

If the parent of an eligible child declines LAIV because of the porcine gelatine content, they can request an alternative injectable vaccine and are advised to speak to their child's nurse, doctor or school aged immunisation service. After these conversations, if the nasal spray cannot be used, [the child should be given the injectable QIVc](#).

Providers should therefore ensure that they have sufficient stock of QIVc to be able to make this alternative offer where required. As in previous years, all flu vaccines for the 2022/23 children's flu programme are available to order by NHS programme providers in England via UKHSA's [ImmForm](#) website.

## Reminder - COVID-19 and Flu Staff Vaccinations

All frontline health and care professionals, including primary care staff working in general practice, are eligible for a free COVID-19 vaccination.

If you are a frontline primary care employee, then your employer should also offer you a flu vaccination through their occupational health arrangements. However, if you are a self-employed primary care professional then you may need to make your own arrangements to access a flu vaccination. If you are eligible under the NHS scheme due to your age or clinical risk, as outlined here, then you can access a flu vaccination from your general practice or a community pharmacy.

Resources are available on the [Campaign Resource Centre](#) to promote both the flu and COVID-19 vaccination to both patients and staff.

## COVID-19 Vaccination Appointments in the NHS App

Eligible people can now book their COVID-19 jab using the NHS App. The National Booking Service has been added to the NHS App so that your patients can book or manage their COVID-19 vaccine appointment on the go, from their mobile device.

Discover more useful [general practice help and guidance](#) on the different features of the NHS App.

## Accelerating Citizen Access to GP Data - Update

NHSE have said that more than 250 practices have prepared so their patients will automatically be able view their prospective record entries online. NHSE also [published a letter from 2 December](#) providing an update on the automatic switch on of prospective access for patients and reaffirms guidance on access to record information for staff who send information **into** general practice.

The latest advice from the BMA is that those practices who wish to proceed with the programme and haven't sent in a template letter, should await further communication from their system supplier. If a practice **does not**

wish to proceed, they should send in the BMA's template letter (at <https://www.bma.org.uk/advice-and-support/gp-practices/gp-service-provision/accelerated-access-to-gp-held-patient-records-guidance>) if they haven't done so already.

Prospective access will be set to occur from the date a practice goes live, rather than fixed to being 1st November.

The [FutureNHS channel](#) is dedicated to this topic and contains a wealth of resources and information.

## Improvements made to the 'Register with a GP Surgery' Online Service

Following feedback from participating GP practices, a number of improvements have been made to the 'Register with a GP surgery' online service. Features now help patients to successfully match with practices and reduce avoidable registration rejections, which includes catchment area checks at the point of registration to notify both patients and practices of their boundary status. Changes to 'Find a GP' also support patients to filter by catchment. Other online service improvements include auto matching to the Personal Demographic Service to reduce the need for practice staff to perform this task manually.

If you would like to use the service in your practice, read the information available in the NHSE [resource hub](#) and then [self-enrol using your personal business account](#), or email the onboarding team at [england.register-gp-surgery.support@nhs.net](mailto:england.register-gp-surgery.support@nhs.net).

## Funding offer for Trainee Nurse Associate (TNA) places in General Practice

Health Education England is offering additional funded places for TNAs in General Practice starting in March 2023. This Primary Care apprenticeship programme is fully supported with funding:

- £4,000 per year per TNA
- Up to £15,000 apprenticeship levy
- PCNs will be able to claim 100% of the TNA salary

In addition, TNAs spending 50% or more of their time working with people who have a learning disability and/or autistic people will be eligible for additional funding – totalling £7,900 per apprentice.

To apply, contact [nationalnursingandmidwiferyteam@hee.nhs.uk](mailto:nationalnursingandmidwiferyteam@hee.nhs.uk) by Monday 9 January 2023.

## Mental Health & Wellbeing

Reports of NHS staff suffering with Mental Health is 46% higher than the average for all sectors. NHS professionals understand that while working in the NHS is very rewarding; it can at times be demanding which is why they have set up a health and wellbeing hub. The hub provides resources, ideas and guidance to help you manage your mental health and wellbeing: <https://www.nhsprofessionals.nhs.uk/health-and-wellbeing>

In the current climate of increasing pressures on our healthcare system, NHS workers potentially face significant stresses. Our NHS People have introduced a confidential staff support line, operated by the [Samaritans](#) and free to access from 7:00am – 11:00pm, seven days a week.

This support line is there for when you've had a tough day, are feeling worried or overwhelmed, or maybe you have a lot on your mind and need to talk it through. Trained advisers can help with signposting and confidential listening.

Call: 0300 131 7000 or text FRONTLINE to 85258 for support 24/7.

## Wessex Support Hubs for Practice Staff

Banes, Swindon & Wiltshire: [BSW Wellbeing Matters service](#)

Dorset: [The ICS staff wellbeing service – Here For Each Other \(joinourdorset.nhs.uk\)](#)

Hants & IOW: [HIOW Staff Support Hub](#)

### Diagnosis and Management of Common Rashes

Tuesday 18<sup>th</sup> April 2023 12:30 – 14:00

Wessex LMC Members £25pp

Book Online: <https://www.wessexlmcs.com/events/14290>

Aimed at GPs & Allied Health Professionals in Primary Care. This session aims to give delegates a greater understanding of identifying common rashes and when referrals are necessary.



It is thought that skin problems make up to 20% of GPs' clinical workload but barely 1% of their training (if that). The subject can be intimidating, with over 1,000 known rashes (maybe 4,000 if all variants are considered) but it can be simplified for the working GP by taking a systematic approach and concentrating on the five common skin problems. These are: eczema/dermatitis in all its forms, psoriasis, infections (fungal, bacterial, viral and infestations), acne and urticaria. The GP who is confident with these 5 everyday skin disease groups will do very well indeed, and it is not that difficult if you understand the basic underlying disease principles and a few simple rules.

Common rashes will be considered with a brief look at the underlying biology, history and examination and rational therapeutic approaches. Uncommon variants, special cases and when to refer will be discussed. The occasional skin emergency needing urgent referral will also be considered, and educational resources mentioned.

*We will be recording this session and it will be available to purchase afterwards [here](#)*

### All you need to know – Being a Caldicott Guardian

Thursday 16<sup>th</sup> March 2023 09:30 – 12:30

Wessex LMC Members £50pp

Book Online: <https://www.wessexlmcs.com/events/14448>

The online session is designed to set out the key aspects of the Caldicott Guardian's role, both for staff who are new to the role and 'old hands' who may not have received any formal Caldicott Guardianship training.

In this session we will cover:

- The role and expectations of the Guardian, with a focus on primary care
- What can go wrong, including new threats
- Putting the Caldicott principles into practice
- What does the Guardian need to know about data protection laws
- Interaction between the Guardian and the Data Protection Officer
- Sharing information
- Supporting the rights of data subjects



*Please note this session is not being recorded*

Regards

The LMC Team

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