



## Friday Fast Five+: Beds & Herts LMC Ltd Weekly Update for Practices

### 1. **Bank Holiday opening**

As you will be aware, following recent changes to the GMS contract, NHS England have confirmed that practices will be asked to remain open during the two Easter bank holidays. While this has been announced nationally, there has been little detailed information as to what is expected of general practice during these days.

We have been working with both the local CCGs and HUC to develop a local solution that will make the best use of the available resources, considering the impact on practices, Extended Access and Out of Hours provisions. We believe that a local plan and patient pathway will be agreed on Monday and communicated to all practices. While nothing has been agreed yet, it is likely that all practices will be asked to provide a service to their patients, but possibly with a reduced clinical capacity compared to their normal Monday to Friday service. It is highly likely that both Extended Access and OOH services will continue as planned, and so clinicians who currently have booked shifts within these services should avoid cancelling them if at all possible.

NHS England have confirmed that there will be funding for practices opening on the bank holidays and this is currently being negotiated with GPC. Again, we hope to receive clarity on the funding arrangement early next week.

### 2. **PPE**

[Updated guidance on PPE](#) was published on Thursday 2 April.

The message is that PPE should be used for all patient contacts in primary care and this now includes eye protection. Patients should also wear masks.

There are more details on COVID-19 infection prevention and control [here](#). This includes a [table](#) summarising the use of PPE in different clinical settings.

Thank you to everyone who responded to the BMA/GPC survey on PPE that we circulated earlier in the week. Your responses told us that most practices have received some PPE – but not enough – and that there is still confusion about future deliveries. We have passed on the detail of the responses to the BMA/GPC and this will help them to have a better understanding of the national picture and to be able continue to press for better action on PPE.

### 3. **CQC Update: Confirming death in a care home**

The CQC has received a number of queries about who can confirm death in a care home, in cases where the death was expected. The general agreement has been that, in cases like this, any competent adult can confirm the death. The CQC expects a competent adult to be an individual with the **knowledge, skills and competencies** required to be able to confirm the death.

However, there is a distinction between "**confirmation that life is extinct**" and "**certification of death**".

It is '**confirmation that life is extinct**' which needs to be done before a funeral director can remove a person's body from a care home.

In summary, the law:

- ✗ does not require a doctor to confirm death has occurred or that "life is extinct"
- ✗ does not require a doctor to view the body of a deceased person
- ✓ does require the doctor who attended the deceased during the last illness to issue a certificate detailing the cause of death

If a death is expected, it is recommended that staff in the care service discuss and agree on arrangements with the GP in advance.

This would mean that when the death occurred, staff could contact the Funeral Director to arrange the removal of the body and ensure that the GP with whom the person was registered is notified as soon as practicable. The GP can provide a death certificate later.

#### **4. Letter for care homes**

We have drafted a [template letter](#) that you may find useful to give to your care homes. This includes the information above about deaths and also about changes in how you will be providing services for care home residents.

#### **5. Excess Death Provisions**

The Coronavirus Act of Parliament gained Royal Assent on 25 March 2020, and the commencement order for the clauses relating to death certification and cremation forms was signed on 26 March 2020. Guidance and information for medical practitioners on these clauses are set out in the [NHS document](#).

#### **6. End of life discussions**

As the hospitals struggle to cope with increasing numbers of patients needing ventilation, they have requested that GPs make sure that as many patients as possible have, where appropriate, DNACPR orders in place and plans drawn up documenting if patients should not be admitted to hospital in the event of becoming very unwell with Covid-19. These discussions need to be done individually in line with the [joint statement](#) but can be done virtually where appropriate.

#### **7. Indemnity arrangements**

We have received several queries from practices about whether the national indemnity scheme will cover them for new ways of working during the Covid-19 pandemic. Please see this joint letter from DHSC, NHS Resolution and NHSEI about this confirming that indemnity arrangements will cover all Covid-19 related work. [CEM CMO 2020 013.pdf](#)

If you are a Locum and would like to receive mailings and updates from Beds & Herts LMC Ltd please [click here](#) to complete the online form with your details and we can add you to our database.

[Resources for GP Wellbeing](#) - The LMC Pastoral Care Service plus additional resources to support your physical and mental wellbeing.

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