



## Bedfordshire & Hertfordshire LMC Ltd: Weekly Update for Practices, Monday 22<sup>nd</sup> March 2021

### 1. Beds & Herts LMC Ballot – closing date 24<sup>th</sup> March 2021

#### For the urgent attention of:

- **Partners and Salaried GPs in Watford & Three Rivers**
- **Salaried & Locum GPs in Bedfordshire**

Following the recent nominations for the LMC committees, the number of candidates nominated in the Watford & Three Rivers constituency and the Bedfordshire Salaried/Locum constituency, has exceeded the number of vacancies in each of these areas, and therefore we have to hold a ballot.

Ballot papers have been sent out to all those eligible to vote in the respective constituencies; all Partners & Salaried in Watford & Three Rivers practices; and all Salaried or Locums in Bedfordshire practices.

If you are in one of the above constituencies and have not received a ballot paper, please contact [sueholloran@bhlmc.co.uk](mailto:sueholloran@bhlmc.co.uk). If you have received a ballot paper, please note the closing date to vote is **Wednesday 24<sup>th</sup> March at 12noon**.

### 2. Covid vaccination and next steps

Last week all the CCGs in Beds and Herts held their Primary Care Commissioning Committees which are attended by staff from the LMC. The enormous commitment of GPs, Practice Managers and all the general practice staff in working flat out over the last few months on the vaccination programme was widely reported and recognised by everyone on these committees. As well as running the vaccination sites, practices have also made huge efforts to vaccinate people in groups that are harder to reach, going out of their way to make sure everyone who needs a vaccine is given an opportunity to have one. At our recent Herts Liaison meeting a particular thanks were given to the St Albans PCNs who worked with Herts County Council in successfully vaccinating patients in several traveller and gypsy communities, and at the PCCCs we heard about other PCNs/practices who have been working with councils to vaccinate homeless patients and other vulnerable groups. Given the shortcomings of the service specification you are working under, the shortages in vaccination supply, and all the other hurdles you have faced in making this work, we think it is a huge testament to the dedication, imagination and collective strength of general practice and GPs as independent contractors.

We are aware that some practices will choose not to continue with the programme once they have completed cohorts 1-9, and others will decide to extend their contract to vaccinate cohorts 10-12. These decisions will be made by individual practices and PCNs according to their specific circumstances and should be respected. There is no doubt that even if lockdown is lifted in the summer it will still be a long road to get to something that feels normal, and it

won't be long before practices are getting ready for the next flu season, the next winter and potentially the next round of covid vaccination. **Your LMC continues to tell commissioners at all levels that general practice remains under extreme pressure, plans for what is now called "restoration and reset" must be reasonable and fair, and patient expectation must not be raised by unrealistic promises of what "business as usual" means.**

### **3. £120m additional funding for general practice**

Following significant pressure from GPC England, an additional £120m for general practices has been secured from April. Whilst the funding will be available to all practices it will be weighted towards those practices involved in the vaccination programme

The extension of the General Practice Covid Capacity Expansion Fund will be from 1 April to 30 September 2021. £120 million of revenue funding will be allocated to systems, ringfenced exclusively for general practice, to support the expansion of capacity until the end of September. Monthly allocations will be £30m in April and May, £20m in each of June and July and reach £10m in August and September.

The [attached](#) letter gives the details.

### **4. COVID-19 vaccination programme**

People [over 50](#) (JCVI cohort 9) are now being invited to book an appointment via the [National Booking Service](#) to receive a COVID vaccination. Practices groups should continue to focus on vaccinating patients in the lower cohorts first, in particular those with underlying health conditions (cohort 6).

If some practices within the local vaccination group want to continue delivering vaccinations to cohorts 10-12 but others do not, the group should discuss with their local vaccination leads whether this can be managed with modified supplies to enable some continuation in the programme.

### **5. Shielding for clinically extremely vulnerable to end**

It has been announced that [clinically extremely vulnerable \(CEV\) people in England will no longer need to shield from 1 April 2021](#)

The Department of Health and Social Care are writing to CEV patients informing them of this and that they can begin to follow the national restrictions alongside the rest of the population. However, the letter does advise to continue to take extra precautions to keep themselves safe, even after they receive both doses of the COVID-19 vaccine.

Practices are reminded to continue to add and remove patients, as appropriate, from the Shielded Patient List, as it may be necessary to identify this cohort in the future. Information on how to do so is available on the [NHS Digital website](#).

### **6. General Medical Services (GMS) Ready Reckoner 2021/22**

GPC has been working with NHSE/I on the production of a [ready reckoner](#) which has now been published and is intended to provide an indication of the changes in income streams that may affect a GMS practice and primary care network (PCN) from 1 April 2021.

## **7. Implementing the 2021/22 GP contract changes to personal medical services and alternative provider medical services contracts**

NHSE/I have published [this document](#) which sets out the approach to the funding changes that will be applied to Personal Medical Services (PMS) and Alternative Provider Medical Services (APMS) contracts. Commissioners will update local PMS and APMS contracts as soon as possible, applying the funding changes identified in this guidance with effect from 1 April 2021.

## **8. Medicine Delivery Service**

A Community Pharmacy Home Delivery Service during the COVID-19 outbreak was originally commissioned throughout England from community pharmacies (and a similar service from dispensing doctors) on 10 April 2020 to ensure delivery of medicines to eligible patients who should not present in the pharmacy. This service may continue to be commissioned as necessary nationally or for patients living in local outbreak areas. Read more [here](#), including the revised Service Specifications.

## **9. NHS Digital Research Session Request – NWRS (National Workforce Reporting System)**

NHS Digital is currently carrying out research focused on improving the NWRS and wishes to engage with users to understand current experiences and potential opportunities. GPC believes that the workforce data GP practices and PCNs share via the NWRS is absolutely essential to ensuring there is an accurate national primary care workforce picture, prudent workforce planning can take place and General Practice can ultimately recruit sufficient and safe levels of staffing. NHS Digital staff would like to speak to people who use NWRS in both practices and Primary Care Networks.

Participants would be asked to join a Microsoft Teams meeting for 30-60 minutes and tell NHS Digital colleagues about your job, work practices and what that entails in relation to NWRS. They would also find it helpful if you could share your screen, and talk them through how you use NWRS and comment on some design ideas they have.

There will be two NHS Digital staff on the call with you: a User Researcher and a Designer. They are ready to speak to willing participants now, so willing GP practice and PCN staff can get in touch and take part in this research by contacting [Katherine.tyte@nhs.net](mailto:Katherine.tyte@nhs.net)

## **10. Senior female GPs Leadership webinar**

In celebration of International Women's Day this month, GPC is pleased to present senior female GP leaders, talking about their leadership and career journeys, in a [webinar to be held 7– 8.30pm on Thursday 25 March](#).

A lack of females in senior medical leadership positions is recognised as one of the underlying factors contributing to the gender pay gap, and this latest webinar forms part of a series of work from the GPC education, training and workforce policy group. Speakers include:

Dr Samira Anane (GPC Education, Training & Workforce Policy Lead)

Dr Nikki Kanani (Medical Director for Primary Care, NHSE/I)

Dr Helena McKeown (Chair of the BMA's Representative Body)

Dr Farah Jameel (GPC England Executive Team, GPC Negotiator and Chair Camden LMC)

Dr Margaret Ikphoh (RCGP Council, Associate Director of Primary Care Hull Medical School)

Dr Katie Bramall-Stainer (CEO Cambs LMCs, Deputy Chair UK LMC Conference, BMA Council)

Click [here](#) to sign up

Please submit advance questions for the Q&A session to [Cscott@bma.org.uk](mailto:Cscott@bma.org.uk)

**Updates** - If you have missed any of our regular bulletins for practices, please visit the [Weekly Updates](#) section of our website.

**BHLMC Job Board** - Advertise your practice vacancies with us on our Job Board on the website [here](#). If you are interested in posting an advert please contact [lmcadmin@bhlmc.co.uk](mailto:lmcadmin@bhlmc.co.uk) for more information.

**Locums** - If you are a Locum and would like to receive mailings and updates from Beds & Herts LMC Ltd please register via the [online form](#) and we can add you to our database.

**Wellbeing for GPs:** [Visit our webpage.](#)

Contact Us:  
Beds & Herts LMC, Tel: 01438 880010  
Email: [lmcadmin@bhlmc.co.uk](mailto:lmcadmin@bhlmc.co.uk)  
Website: [www.bedshertslmcs.org.uk/contact\\_us](http://www.bedshertslmcs.org.uk/contact_us)

