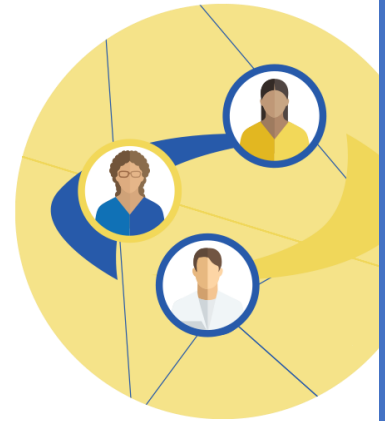


## Beds & Herts LMC Ltd: Weekly Update for Practices, Monday 2<sup>nd</sup> August 2021



### 1. NHS COVID Passes

You may have heard Nadhim Zahawi (vaccines minister) recently say in Parliament: "By the end of this month, UK nationals who have been vaccinated overseas will be able to talk to their GP, go through what vaccine they have had, and have it registered with the NHS that they have been vaccinated. The reason for the conversation with the GP is to make sure that whatever vaccine they have had is approved in the United Kingdom." (See [Hansard 22/7/21](#))

We have had an update on this from the GPC and, despite what was said, GPC heard last week that this isn't actually current policy and no decisions have been made at a policy level (yet) about the way forward. Currently, to get a COVID vaccine pass you need to have had your vaccines in the UK. There is data sharing between the four nations and the crown dependencies (Guernsey/Jersey/IoM) and a bulk upload of data between Wales and England (about 60k records) has occurred last week which should potentially allow many thousands of people to now get passes who couldn't a few days previously. There is a centralised service that is providing data for these passes.

England is aligning with the EU's Digital COVID Certificate and the certification keys are currently shared with a number of countries. The longer-term aim is to do this at an EU level once the appropriate agreements are in place. GPC's understanding is also that recovery (after a positive PCR swab) plus a single vaccine (as is the case in the EU) will allow provision of a pass, however, due to data quality issues lots of positive PCR swabs have not been flagged as being of PCR origin and so can't be used to show recovery (as they are indistinguishable from lateral flow tests - it seems the database with the results in didn't record enough information). This would potentially affect younger people who've had COVID and have only been able to have their first vaccine.

Up until a few weeks ago the QR code form of the COVID pass could contain two vaccine records in the one bar code. However, there are now two separate QR codes if you've had two vaccines, one for each. The NHS app shows both, and the PDF download now has two QR codes as well. This allows capacity for a booster (in which case you'd get a QR code per vaccine). This again aligns with what the EU are doing.

If patients have had vaccines but they aren't showing up the first port of call is with the PCN that did the vaccine. If a record is correctly put into Pinnacle it should flow where it needs to. There were problems with users not saving records after they had been brought up. There is a data quality service due to go live at some point in August that may be able to help with these issues.

With regard to people bringing proof of vaccination in another country to GP practices, aside from coding they've had a vaccine to help with recall, there is no system/policy in place to get them a pass at the moment.

## **2. GP payments and pensions system update**

As we approach the end of the second month of its use, we continue to see an unacceptably high level of issues being raised about the new online portal. BMA/GPC continues to liaise with PCSE several times a week but the progress is frustratingly slow. The BMA survey for GPs in England to provide their experiences of the new system will remain open until 13 August. If you haven't already, the BMA is keen for you to please [fill in the survey](#) so that they have further evidence of the full extent of the issues and can hold PCSE to account. Note that this survey is not a forum for individual issues – [please raise these with PCSE directly](#).

BMA/GPC also intends to release a survey of practices in England at the start of September which they hope to use as a 'snapshot' of progress after three months of its use. There will be further information on this in the coming weeks but, again, the purpose is to help to hold PCSE accountable for their performance.

There has been continued coverage of this issue in [Pulse](#).

**Beds & Herts LMC will be meeting with PCSE and other LMCs and CCGs from East of England on Tuesday 3<sup>rd</sup> August as the first of what will be a regular forum. We will raise with them all the issues that practices have been bringing to our attention of the last few weeks.**

## **3. Improving the NWRS (National Workforce Reporting Service)**

NHS Digital has [improved the way they collect primary care workforce data](#) with a view to making the new NWRS is easier to use, and as simple and efficient as possible to help minimise the burden placed upon practices and primary care networks.

From July, users should access the new NWRS via the [Strategic Data Collection Service](#) (SDCS) - using the same login you use to complete other data collections, such as the General Practice Annual Electronic Self-Declaration (eDEC). Visit the [SDCS Data Submission site](#) to check that you have access to the new system. If you have never used SDCS, [you will need to register for an account](#).

It is important to understand staff capacity in the health service - this information helps shape GPC's negotiating strategy and how investment, training and resource is directed across the primary care workforce. It is therefore critical for GPC that the information you submit to NHS Digital about your staff is accurate and complete. Provision of workforce data is also a contractual requirement for practices and PCNs as it is crucial for understanding changing capacity across the primary care workforce.

To find out more about the changes to the NWRS, Practice and PCN Managers can [join one of NHS Digital's webinars](#) which are running twice weekly until end of August.

## **4. DVLA telling patients to contact their GP to check if they can drive**

*Section 88 of the Road Traffic Act 1988*

During COVID many drivers' licences have expired. The DVLA initially gave extensions so that drivers could continue to drive and work. For many drivers however, this extension is coming to an end.

Some Drivers are now being told by the DVLA to ask their GP if they are “fit to drive” so that they can continue to drive under Section 88 of the Road Traffic Act 1988 (RTA 1988). The DVLA has produced a leaflet which explains RTA 1988.

GPs are not usually qualified, and may not be indemnified, to advise patients whether or not they are fit to drive. In normal circumstances a practice may provide a factual report for the DVLA so that their expert medical advisers will decide upon fitness. If a GP were to provide an opinion that their patient was ‘fit to drive’, and then an accident were to occur, the GP may be liable. This would not be covered by the Clinical Negligence Scheme for General Practice, as this is not NHS work.

If a GP were to say that a patient was not fit, then that could equally potentially adversely affect the long term doctor-patient relationship.

For these reasons, if there may be any doubts about whether a person is fit to drive, the GP should decline to provide this assurance. We recommend writing to the DVLA explaining that as a GP your place is not to provide an opinion as to an individual’s fitness to drive per se, but that you may be offer to provide factual information about your patient’s health, with their consent.

Practices may wish to publish an explanatory note on their websites or noticeboards, so that patients are forewarned that this is what your policy is.

If a GP chooses to produce a bespoke report prepared for the patient to be sent to the DVLA on their behalf a reasonable fee may be charged, as this is not NHS work.

*(With thanks and acknowledgement to Cambridgeshire LMC)*

## **5. GP appointment data demonstrates workload pressure**

The latest [GP appointment data for June](#) has been released. The data shows a 3.5m increase in the number of appointments provided during June this year compared to June 2019 (26.7m compared to 23.2m), with an additional 4m COVID vaccination appointments delivered on top of that. Taken together the total number of appointments during June was approximately 31.1m.

The appointment figures continue to demonstrate the immense pressures that GPs and practice teams are under with the ever-increasing workload generated by the pandemic and NHS backlog. Figures like these have become all too familiar but to see them in the summer when the workforce should normally be able to take time out to rest and recharge after such a difficult year is very concerning. BMA/GPC will be highlighting to the new incoming NHSE/I chief executive that there is a critical need to alleviate the severe pressure GPs and their teams are under.

[Read the BMA response here.](#)

## **6. Supporting general practice campaign**

In the coming weeks, the BMA will be sending to practices materials and tools you can use to explain to your patients the pressures general practice is facing. The monthly appointment data clearly shows the need for this as all practices experience unprecedented pressures which are increasingly hard to deal with. There is no evidence that these pressures are going to lessen in the coming months as we face what many are predicting to be a very difficult winter.

## **7. RCGP report echoes BMA call to tackle general practice pressures**

The RCGP has published a [report](#) reinforcing many of the key public messages regularly made by the BMA in recent months including that general practice is now 'at breaking point'. It proposed a five-point recovery plan to prevent GPs and other members of the practice team from burning out and ensure patients can continue to receive the care they need, well into the future. The RCGP described the pressures within general practice as unsustainable and said that they must be urgently addressed as we move beyond the 'emergency' pandemic period. During this time, GPs have to deal with the aftermath of COVID in their local communities, including long COVID, and the additional mental and physical health problems it is causing in patients of all ages.

They call for much more work to be done by the Government on recruitment and retention of GPs and the wider workforce. There is an urgent need for investment in premises so staff have space to work safely while providing care for patients. In addition, [workload pressures must be reduced](#), including the removal of unnecessary bureaucracy, and GPs need to have a strong voice in the new ICS arrangements.

## **8. Guidance to support GP practices obtain a sponsorship licence**

The BMA and NHS England and NHS Improvement have published guidance to support GP practices obtain a sponsorship licence to recruit a GP from outside of the UK or a UK medical graduate switching from a Tier 4 visa. After hearing from GP practices, it will address the questions that are often raised and is designed to support GP practices to complete the online registration process and identify the right documents to send to the Home Office. Please note this does not replace the official [Home Office guidance](#).

You can access the guidance on the following [link](#)

## **9. Annual Conference of England LMCs 2021 – Call for Motions**

The Annual Conference of England LMCs is being held on 26<sup>th</sup> November 2021 and is an opportunity to create policy for the GPC and BMA to action for the following year.

Representatives from Beds and Herts LMC will be there and we rely on local GPs to tell us what they want their LMC to put forward for national debate. So please take the opportunity to voice your concerns and make suggestions by emailing us on [lmadmin@bhlmc.co.uk](mailto:lmadmin@bhlmc.co.uk) by Friday 27<sup>th</sup> August.

Suggested motions will be worked up by the office team alongside the LMC Reps and need to be submitted to the BMA by noon on 9<sup>th</sup> September for consideration by the BMA Agenda Committee.

The BMA encourage submission of motions under one of the following headings:

- Covid 19 Health Policy
- Covid 19 Vaccination Programme
- Primary and secondary care interface
- Digital
- NHS 111
- PCN DES
- ICS
- GPC England / Conference of England LMCs/LMCs in general /GPDF
- Practice based contracts
- Workforce
- Workload

- Premises
- Regulation
- Clinical (prescribing, dispensing, and pharmacy)
- Wellbeing
- Other

### **10. Hertfordshire Diabetes Education**

Hertfordshire Diabetes Education is pleased to announce that they are running two webinars in September in lieu of their usual annual conference. For more details and how to register, select the links below.

#### **Thursday 16 September 2021, 12.45 - 15.00pm**

- Type 1 diabetes presentation in children
- Remote management and diabetes care
- Freestyle Libre
- The National Diabetes Prevention programme

Register here: <https://www.eventbrite.co.uk/e/hertfordshire-diabetes-education-webinar-tickets-163976394811>

#### **Tuesday 21 September 2021, 12.45 - 15.00pm**

- SGLT2 inhibitors
- Public Health Insights into diabetes and COVID 19
- Clinical aspect of emergency diabetes care
- GLP1 analogues

Register here: <https://www.eventbrite.co.uk/e/hertfordshire-diabetes-education-webinar-tickets-163983919317>

### **11. Level 3 Children and Adult Safeguarding Webinars for Primary Care in Hertfordshire & West Essex, September 2021 to March 2022**

Beds & Herts LMC Ltd and Herts & West Essex ICS invite primary care colleagues in Hertfordshire and West Essex to a series of Level 3 Children and Adult Safeguarding webinars starting in September 2021 through to March 2022. You are welcome to attend a variety of dates. Registration is free but you must be working in primary care in Herts & West Essex to be eligible.

[Select here: Downloadable Flyer for more information and how to register](#)

[Or visit webpage here](#)

### **12. Business Fundamentals Programme for GPs in Herts and West Essex, October 2021 to March 2022**

Applications are now open for the Business Fundamentals Programme in Herts and West Essex, organised by Beds & Herts LMC Ltd and funded by the Herts & West Essex ICS Training Hub.

The programme is aimed at those who are new to partnership or those considering partnership and would therefore suit GPs, clinical partners and aspiring partners. We also welcome applications from those who are able to demonstrate an interest in the operations of general practice, developing the practice, strategic planning, leadership and/or partnerships.

7 half day modules delivered online over 6 months, October 2021 to March 2022.  
Application deadline: Friday 20<sup>th</sup> August, 5pm.

[Select here: Downloadable flyer for more information and how to register](#)

[Or visit webpage here](#)

**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 [lmadmin@bhlmc.co.uk](mailto:lmadmin@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.](#)

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