



## Bedfordshire & Hertfordshire LMC Ltd: Weekly Update for Practices, Monday 10<sup>th</sup> January 2022

### 1. Self-isolation and access to PCR and lateral flow tests

The self-isolation advice for people with COVID-19 has changed, and it is now [possible to end self-isolation after 7 days](#), following 2 negative lateral flow test (LFT) taken 24 hours apart.

The same [advice also applies to Health Care Professionals](#), however, there continues to be reports of lack of access to PCR and lateral flow tests, which is likely to be due to the rapid spread of the Omicron variant. It is crucial that the promised new supply of kits are offered to key workers such as health and social care staff as a priority. The [Health Security Agency announced](#) last week that from 11 January, people who receive positive lateral flow device test results for COVID-19 will be required to self-isolate immediately but won't be required to take a confirmatory PCR test. Here is also a helpful [link and flowchart](#) that is being kept up-to-date.

Although the UK Health Security Agency has provided a contingency supply of LFTs from its prioritised stock for NHS health or social care staff, we have been told that they are aware of the current supply issues and will provide additional contingency over the coming days.

For employing organisations to access LFT contingency supply for priority testing, if unable to access testing through other routes, the regional contact point is the East of England COVID-19 Incident Coordination Centre which can be contacted at [england.eastofengland-covid19@nhs.net](mailto:england.eastofengland-covid19@nhs.net)

### 2. Positive lateral flow tests to start flowing imminently to GP systems

BMA/GPC has told us that, given the Government's policy change on COVID testing, it has been agreed that self-reported positive lateral flow tests will start to flow to GP systems. This might occur as soon as this afternoon.

The wording on the results will not yet mention that they are self-tested and self-reported lateral flow tests. It may take up to four weeks for such wording to become approved and get incorporated into the IT infrastructure.

Results will get allocated automatically to the correct patient but an administrative task will need to occur to file them. Practices handle this differently. For some the practice manager might file them, for others a member of the admin team. Some GPs have also been looking through results too.

A number of issues have been raised and will be looked into:

1. Possible fraud and contamination of the medical record.

BMA/GPC concerns have been raised that this could occur given the self-reported nature. To record a result the code from the test strip needs to be uploaded (or rung in via 119). Each code can only be used once. This could lead to problems if people guess a code (it has a simple checksum digit which could be brute-forced) as it would then invalidate someone else's test.

2. The effect on those for whom a positive PCR result would trigger treatment.

It is still the case that those who have been contacted already and who would benefit from therapeutics will still need to send in a PCR swab.

It is the positivity of this PCR result that triggers the treatment offer. The understanding of BMA/GPC is that uploading a positive lateral flow will not start this process going.

3. Recovery certificates.

Since November, when England joined the EU scheme formally, NHS X/Digital started issuing recovery certificates from Day 11 (via the app or the website) for anyone who had a positive PCR test. This can exempt the holder from further PCR testing, as any test may be positive for weeks or months after infection. The understanding of BMA/GPC is that self-reported lateral flows do not have the same legal basis and so recovery certificates will not be provided. Patients testing positive may wish to source their own private PCRs if they have imminent travel plans that require a PCR test (or exemption through recovery) prior to travel. BMA/GPC stressed that they do not want patients asking GPs for such letters based on a self-reported positive lateral flow as we won't be able to help.

We are sharing this information with you now, as it has come to us today. We do not know the full ramifications of these changes. We will update practices when there is further clarification/as issues come to light. However, if as a result of these changes being implemented you become aware of any additional issues not mentioned above, please make us aware so we can raise them nationally.

### **3. NHSEI Guidance on assessment of COVID 19 patients in General Practice**

With high numbers of symptomatic COVID patients, NHSEI has now released some guidance on assessment, monitoring and treatment of symptomatic patients in General Practice and 111, which you can find [here](#). The guidance seeks to pick up the items below and explains them in more detail.

### **4. Pulse Oximetry @ Home, Covid Virtual Wards (CVW) and Hospital at Home**

#### Pulse Oximetry @ Home

The COVID Oximetry @home pathway is a commissioned service and there is good evidence to support this model. The latest version of the National Standard Operating Procedure can be found [here](#). We are in ongoing discussion with the CCGs about these services locally. Please do let us know if there are any issues about your practice's role in this or how you are supported to deliver this priority.

### Virtual Wards and Hospital @ Home

BMA/GPC has written to NHSE/I highlighting their concerns about the lack of capacity and support in the community to provide safe care for patients being discharged early or not being admitted. We are in ongoing discussions with the CCGs about local proposals.

NHSE/I has published reference guidance on [Supporting patients and bed capacity through virtual wards and COVID Oximetry @home](#) and BMA/GPC is contributing to national discussions where possible.

### **5. New COVID-19 treatments**

New treatments are available for highest-risk patients infected with COVID. These drugs have been shown to reduce hospitalisation and may reduce death and will be available for the highest risk patients.

The practice role in this is to get eligible patients in contact with a covid medicines delivery unit (CMDU) when they are positive for COVID if this has not already been done by another service. Access to medicines could be lifesaving for this cohort of patients and time is of the essence. You can read more [here](#)

### **6. Hospital discharge and support for general practice and community care**

After BMA/GPC had repeatedly raised concerns about capacity constraints impacting patient safety in the community, NHSE/I has produced a letter on [Preparing the NHS for the potential impact of the Omicron variant and other winter pressures](#). It is disappointing that the priority in this letter, which is to 'maximise capacity across acute and community settings, enabling the maximum number of people to be discharged safely and quickly and supporting people in their own homes' doesn't seem to provide any credible details on how additional capacity in the community was being created to cater for this new activity.

BMA/GPC has since [written to NHSE/I](#) formally to highlight their concerns about lacking capacity in the community. BMA/GPC is particularly anxious about the wider impact on patients being discharged early into the community, given significant capacity constraints in all parts of the system and wholly inadequate support across both general practice and community care teams, to meet the ongoing care and treatment needs of patients.

As your LMC, we have raised this issue with local commissioners and will continue to press for progress. We would be happy to assist you in any discussions you might want to have with the CCGs about ideas you might have and plans you might be making for the necessary support that will need to be made available to meet patients' needs. It is incredibly important that NHSE/I ensures that provisions designed to support one part of the system do not destabilise another.

### **7. Webinar for all Health Professionals - Fertility, Pregnancy, and Vaccination**

Please find below a link to a webinar entitled Fertility, Pregnancy, and Vaccination which is taking place on **12<sup>th</sup> January (5.30-6.30pm)**.

The webinar is open to all Health Care Workers including those working in Dental practices, GP surgeries, Opticians and Pharmacies. This will be an opportunity to access information provided by leading professionals regarding covid vaccination prior to, during and after

pregnancy, and to aid decision making regarding accessing of covid vaccination and to support choice based on factual, evidence based information.

[Fertility, Pregnancy and Vaccination – your questions and concerns answered \(england.nhs.uk\)](https://www.england.nhs.uk/health-topics/fertility-pregnancy-and-vaccination-your-questions-and-concerns-answered/)

### **\*Herts & West Essex Colleagues\***

#### **8. Interested in being a GP Mentor in Herts & West Essex? Engagement Webinars: Weds 19<sup>th</sup> January, 2pm or Mon 24<sup>th</sup> January, 7pm**

The purpose of this event is to enlist 10 GP mentors with a minimum of 8 years' experience, in addition to working three sessions per week in General Practice in Herts and West Essex to offer mentoring to New to Practice GPs.

All mentors will be required to deliver mentoring for 2 years, with the expectation that they will complete the ILM5 Certificate within the first year. Once the initial 6-week introduction to coaching training has been completed, each GP mentor will begin mentoring with New to Practice GPs or other mentees matched by Beds & Herts LMC.

For more information and to register your place, please [click here](#).

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#### **9. Education Update Webinars**

##### **\*FREE\* CQC Update Webinar, Tuesday 1<sup>st</sup> March, 12.00 - 1.00pm**

This CQC Update is organised by Beds & Herts LMC and delivered by [DKJ Support Services](#), who specialise in bids and compliance in primary care. The webinar is suitable for GPs and Managers working in general practice in Beds, Herts, West Essex and Milton Keynes.

The CQC process will be explained as it currently stands including the new monthly assessments and what to expect in April 2022.

##### **Agenda:**

- CQC in the past: What worked and how you can bring this to the new world of CQC inspections.
- CQC in the present: Looking at the current themes CQC inspectors are looking at including data, searches and questions that are being asked. A focus on the monthly assessment and how this can invoke an inspection. A look at the change in focus for CQC.
- CQC in the future: What do CQC inspections look like for general practice from April 2022 and what you should be prepared for.
- Q&A

[For more information and how to register your FREE place, view here](#)

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## **\*FREE\* Mental Health Updates for GPs, Thursday 3<sup>rd</sup> March, 1.00 – 4.45pm**

This event is organised by Beds & Herts LMC and delivered in collaboration with [Hertfordshire Partnership Foundation Trust \(HPFT\)](#). The webinar is aimed at GPs working in Hertfordshire. GPs from outside Hertfordshire are welcome to attend but please be aware there will be references to Hertfordshire referral pathways and localised services.

**You are welcome to attend 1, 2 and/or 3 sessions within the same webinar.**

### **Agenda:**

12.45 - 1.00pm	Registration, Welcome, Housekeeping, Opening Comments
1.00- 2.00pm	<b>Presentation 1: An Introduction &amp; Overview to Eating disorders</b> - diagnosis, complications and management
2.00 - 2.15pm	Comfort Break (delegates are welcome to leave and join)
<b>2.15 - 3.15pm</b>	<b>Presentation 2: An overview of Borderline Personality Disorders</b>
3.15 - 3.30pm	Comfort Break (delegates are welcome to leave and join)
<b>3.30 - 4.30pm</b>	<b>Presentation 3: Supporting Women with Perinatal Mental Health Disorders in Primary Care</b> <ul style="list-style-type: none"><li>- Spotting perinatal specific presentations</li><li>- Managing perinatal mental health risk and when to worry,</li><li>- Treatments of perinatal mental illness including prescribing in pregnancy and lactation.</li></ul>
4.30 - 4.45pm	Closing Comments

[For more information and how to register your FREE place, view here](#)

**News** - For the latest news, information and weekly updates for practices, please visit the [Hot Topics](#) section of our website.

**BHLMC Job Board** - Advertise your practice vacancies or search for jobs on our [Job Board](#). 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 LMC updates, please register via the [online form](#) to be added to our database and mailing list.

**Workforce Wellbeing & Support** [Visit our webpage.](#)

### **Contact Us:**

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