



WEEKLY NEWSLETTER 17.1.22

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1. Fit Note restart reminder

The Department for Work and Pensions suspended the requirement for fit notes for benefit purposes between 17 December 2021 and 26 January 2022. Claimants whose fit notes expire, and those who make new claims due to a health condition between 17 December and 26 January (and are still ongoing), will need to provide medical evidence from 27 January, and may therefore contact their GP for a fit note in advance of this date. These should be issued.

Fit notes for Statutory Sick Pay purposes will be required for absences which begin on or after 27 January and last for longer than 7 days. Individuals whose sickness began between 10 December and 26 January inclusive will continue to be able to self-certify their absence for up to 28 days.

2. Covid-19 vaccination webinar for healthcare workers:

Answering your questions on pregnancy and fertility. Please see attached document for further details.

To secure your place, visit:

<https://www.events.england.nhs.uk/events/covid-vaccination-answering-your-questions-on-pregnancy-and-fertility-for-healthcare-workers>

3. Guidance for employers - Vaccination as a condition of deployment (VCOD) for healthcare workers: Phase 2 – VCOD implementation

NHS England and NHS Improvement issued [Phase 2: VCOD Implementation Guidance](#) for organisations registered with CQC for the purposes of providing health care. This followed from the previous [Phase 1 planning and preparation guidance](#).



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The guidance and principles set out can generally be applied to organisations providing NHS-commissioned services, such as primary care services and to the independent sector, including general practice and NHS dental practices.

The approaches to formal processes detailed in this guidance may vary from organisation to organisation, depending on the facts and circumstances in each case, and as such, it is recommended that organisations seek their own legal advice on such matters. However, we encourage all registered persons (registered managers, registered providers) to read the guidance and [FAQs](#) to support you with compliance with the regulations.

4. Getting ready for patients to have access to their GP health records

From April 2022, patients with online accounts such as through the NHS App, will be able to read new entries in their health records. This applies to patients whose practices use TPP and EMIS systems. Further information on the programme is available through the [NHS Digital website](#).

To help GPs, practice staff and primary care commissioners support patients to access their GP-held records, we have a [series of webinars](#) which explain what this means for you, and what you will need to do next to prepare for this. Dates are available throughout January and February.

5. Requirements of the refreshed UESPO LIS

Please find attached the short action plan that practices are being asked to complete as part of the requirements of the refreshed UESPO LIS service offer to support your work directed towards the booster programme and the escalation of the Omicron variant.

Practices must complete the self-declaration spreadsheet as attached. The CCG informs us that to date a very limited number of practices have returned this information outlining how practices are proposing to prioritise and review patients on their learning disability registers for annual review. This is now becoming a priority for the regional and national teams who have become concerned by the low number of reviews currently being undertaken and are now asking the CCG to provide assurance regarding how these are being actioned at a practice level to support this vulnerable patient group.

On this basis, the CCG are now asking for practices to provide them with a short bullet point summary of what they are doing so that they can feed this information for assurance back to the national team. As always, it is also a good opportunity for everyone to demonstrate pockets of good practice and service innovation that can be shared more widely with all practice peers.

The attached is now expected by close of play on Friday 28th January 2022.

6. Reminder: Seasonal influenza and COVID-19 primary care staff vaccination recording 2021/22

As part of the 2021/22 Seasonal Influenza Vaccination Programme, primary care contractors (general medical services, pharmaceutical services, general dental services, and general ophthalmic services) and their frontline staff in clinical and non-clinical patient-facing roles will be eligible for an NHS flu



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vaccination this year. The adult seasonal flu Enhanced Service includes a requirement for general practice to return to the commissioner (NHSE), by no later than the **31 January 2022** and **30 April 2022** respectively, data on the number of primary care staff that they have vaccinated.

In addition, this data collection will seek voluntary information on the flu vaccination and COVID-19 vaccination status of practice staff. This data is being requested to help inform future planning to support encouraging vaccine uptake amongst the workforce, and for COVID-19 to support ongoing planning around workforce capacity and service provision.

For the COVID-19 vaccine, new regulations come into effect from 1 April 2022 which will require individuals undertaking CQC regulated activities in England AND engaging in face-to-face care with patients to be fully vaccinated against COVID-19. Further detail is available [here](#). These indicators request information on the number of staff employed or otherwise deployed in the practice who have either a) received a first and second dose of the vaccine; b) have a medical exemption or c) do not intend to get vaccinated by 31 March 2022. Data is requested for the following groups:

GPs: This includes all GPs employed or engaged within the practice, including GP partners, salaried GPs, GP locums, foundation doctors and GP registrars.

Direct patient care: This includes nurses, PCN staff employed or engaged through the Additional Roles Reimbursement Scheme (see full list [here](#)), and other allied health professionals, including those in training.

Admin/non-clinical roles: This includes practice managers, receptionists, estates, students, volunteers or any other ancillary roles deployed within the practice

For flu vaccination status this includes the number of practice and PCN staff who have received a flu vaccination via any route, with data being requested on the number of practice staff vaccinated for flu:

- Through the NHS scheme as primary care staff
- Through the NHS scheme as another eligible cohort
- Privately
- Via occupational health
- Via another route.

This service has been available in CQRS since 21 December 2021.

Information and Actions Required:

This is for the manual entry service of twenty-seven Management Information indicators.

The Region is commissioned to offer the service to the Service Providers who can accept the service in CQRS.

There is no declaration required for this service as it is for Management Indicators only.

You will be able to download a csv version of the data held within CQRS as per the current reporting process.

Should a Service Provider not return data for the voluntary information on practice staff vaccination status, then the service providers will need to input as 'zeros' and confirm accordingly to the commissioner



7. New: Update to IT Service Desk telephony system

The MLCSU IT Service Desk team transferred onto a new telephony system on 19 January, to help improve the call quality issues that service users have reported. There has been no change to the contact number for the Service Desk – this remains as 0300 5550212. There will be a few small changes when service users call:

When you first call the Service Desk number, you will be asked if you have an existing call reference number. If this is the case, please enter the numbers after the CSU prefix into your telephone keypad and press #. If you do not have an existing call reference number, please press # or continue to hold for the following options.

There is now an automated system, so you will notice a difference in how the menus are announced. Please remember that phone calls to the Service Desk should only be made for **urgent/critical issues**. This allows prioritisation of the issues impacting patient care. See examples below:

Password reset or account unlock for one of the systems we support (i.e. Windows login, NHS Mail, O365).

Whole site network or phones outage.

Clinical systems down.

VPN/VDI issues (stopping you from working).

Issues with clinical software that are impacting providing patient care.

Clinical hardware will not power on.

Most issues are resolved remotely where possible, either by phone or via a remote support session, as this is the quickest and most effective solution. However, there are some faults that will still require a site visit. In order for the Service Desk team to triage this efficiently, please provide as much information as you can at the point of logging your ticket.

Details outlining resources to help with various IT problems can be found [here](#).

8. Statement from BLMC - BSol Shared Care Record

Practices, will by now, have received an e-mail and documentation in relation to the BSol Shared Care Record.

We can confirm that the LMC has sought its own independent legal advice and confirm that our legal advisers are indeed content that the legal basis for practices to share data using this DSA is sound and that the potential for any legal or other risks to practices doing so is minimal.

We can also confirm that the LMC shared an earlier draft of the DSA with the BMA medical ethics department. Numerous comments and suggests by both the BMA ethics and our legal advisers were considered by the project board and incorporated into the revised DSA.

The LMC can therefore reassure practices, as much as it possibly can, in respect of participation in the project. Of course, this cannot completely mitigate any risks, but the probability is that such risks are no more likely and no greater than any risks that practices run through appropriate sharing of data by other means as part of their usual clinical practice.



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However, we are now receiving various queries from Practices and as such have already sought clarification from the CCG on these (please see below). We would therefore ask any practice who have any questions to forward them to the LMC on birmingham.lmc@nhs.net in order that we may raise these direct with the CCG. We clearly wish to support practices to understand the process. There is also a direct form of communication which you may wish to use instead: collaborative.care.record@nhs.net or call 0345 6461163.

Current queries and clarification from the CCG.

Is this contractual: this is not contractual but provides GPs with access to more extensive hospital portal information and helps protect practices sharing GP data, to replace the current Your Care Connected programme data sharing agreement.

Have patients been consulted: The public has been extensively consulted on the proposed Collaborative Share record. Feedback has been gathered and taken into account in the planning stages for the project.

How have the public been engaged: Public engagement has included patient focus events, shared care record website, posters, leaflets, and updated privacy notices. Patient should not be surprised by data sharing within the NHS. Indeed, GP practices have long been accessing hospital portals without public engagement or a data sharing agreement. In 2012 the summary care record was launched and in 2015 our Your Care Connected to share the GP record. Any patient who has opted out of Your Care Connect will not be sharing GP data via the Birmingham and Solihull Shared Care Record. More recently, during the pandemic, GPconnect has been turned on, to share GP data across the whole of England. Patients can further object to sharing of data via the Birmingham and Solihull Shared Care Record from the website www.livehealthylivehappy.org.uk/birmingham-and-solihull-shared-care-record. This will prevent GP practices from accessing hospital data and patients should always be encouraged not to object.

Please note our office contact times remain 10:00-16:00 and any queries on the day should be directed to birmingham.lmc@nhs.net as we are currently remote working so would be grateful if all contact were made via the nhs.net email.

Please note that the LMC are unable to accept calls or hold communications with patients, we are GP representatives, and we would respectfully ask that Practices do not advise patients to contact us. Could we also remind Practices that any copies of patient related correspondence MUST be anonymised as the LMC cannot accept patient identifiable data.

Helpful Links:

BMA COVID-19: toolkit for GPs and GP practices <https://www.bma.org.uk/advice-and-support/covid-19/gp-practices/covid-19-toolkit-for-gps-and-gp-practices> Comprehensive guidance for GPs, partners, and practice managers to manage employment and contractual issues and service provision during the coronavirus pandemic.



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GOVERNMENT WEBSITE: <https://www.gov.uk/coronavirus> for recent and upcoming changes, guidance & support.

NHS ENGLAND: <https://www.england.nhs.uk/publication/implementing-phase-3-of-the-nhs-response-to-the-covid-19-pandemic/>