



WEEKLY NEWSLETTER – 23rd March 2021

EXTRAORDINARY COVID-19 UPDATE

- ❖ [£120m additional funding for general practice](#)
- ❖ [COVID Vaccination Programme Cohort 9](#)
- ❖ [Deadline to opt out of second phase of the CVP](#)
- ❖ [Ongoing support for general practice](#)
- ❖ [Reduction of vaccine supply in April](#)
- ❖ [MHRA confirms that people should continue to receive the AstraZeneca vaccine](#)
- ❖ [Shielding for clinically extremely vulnerable to end](#)
- ❖ [COVID-19 Local Vaccination Services waste management](#)
- ❖ [Home delivery of medicines and appliances during the COVID-19 outbreak](#)
- ❖ [Overworked doctors must be allowed to rest and recover so we can keep patients safe, BMA warns](#)
- ❖ [Vaccine dose data](#)

1. **£120m additional funding for general practice (England)**

Following significant pressure from GPC England, the BMA have now secured an additional £120m for general practices 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.

Please see the attached letter (Enc.1) written to help practices consider their options about their involvement in the vaccination programme phase 2.

2. **COVID Vaccination Programme Cohort 9**

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).



3. Deadline to opt out of second phase of the CVP

As we reported last week, the BMA have agreed amendments to the [CVP Enhanced Service Specification](#), including an extension to allow practice sites to administer vaccinations to patients between the age of 18 and 50. Existing practice sites will be able to opt-out of delivering the second phase of the vaccination programme.

Following significant lobbying based on concerns from practices, the BMA have secured an **extension to the previous deadline** for practices to inform their commissioner of their intention to opt-out of this second phase of the programme. If necessary, practices now have a few more days, to decide whether to opt out of the second phase.

Practices that wish to vaccinate cohorts 10-12 should advise their local commissioner how many vaccinations they could administer each week, to ensure local capacity is in place. There will continue to be a choice of provider for the local populations and no expectation that practices or PCN grouping has to deliver vaccinations to its entire population in cohorts 10-12.

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

PCN grouping could also amend its Collaboration Agreement if individual practices within that PCN grouping wanted to increase or decrease their involvement in the administration of vaccinations to cohorts 10-12.

[Additional workforce](#) remains in place to support practice site to deliver the vaccination service, and local commissioners are encouraged to consider their approach to local service commissioning and take appropriate steps to release capacity to support with COVID-19 vaccinations.

4. Ongoing support for general practice

The BMA have continued to encourage NHSE/I to maintain the vital ongoing support for practices from April onward, with a renewed call for ongoing income protection for QOF, DESs/LESSs and other contract elements. The BMA are pleased therefore, as highlighted above, to have secured the continuation of funding (£30m per month since November 2020) to support practices to continue with their pandemic response.

Without these protections and support, many practices are telling us they may no longer be able to deliver the vaccination programme, let alone take on the second phase (for patients in cohorts 10-12).

The BMA also believe CCGs should maintain income protection arrangements for local enhanced service and other local schemes. This is crucially important to enable practices to continue with the successful delivery of this nationally important vaccination programme.

5. Reduction of vaccine supply in April

NHSE/I published [a letter](#) last Thursday setting out the next steps on uptake and supply of the COVID vaccinations, over the next six weeks. Although vaccination supplies are increasing this week, there will be a reduction of supply from the week beginning 29 March for about four weeks due to reductions in national inbound vaccines supply. The letter also encourages vaccination sites to continue their efforts in maximising uptake in cohorts 1-9.



6. MHRA confirms that people should continue to receive the AstraZeneca vaccine

The [MHRA made a statement](#) last week confirming that the available evidence does not suggest that venous thromboembolism is caused by COVID-19 Vaccine AstraZeneca. This follows a detailed review of report cases as well as data from hospital admissions and GP records. The MHRA's advice remains that the benefits of the vaccines against COVID-19 continue to outweigh any risks and that the public should continue to get their vaccine when invited to do so.

7. 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](#).

8. COVID-19 Local Vaccination Services waste management

It is vitally important that vaccination sites segregate all waste into the proper waste stream. Doing so reduces pressures on the waste services infrastructure, reduces the impact on the environment, significantly reduces costs, and ensures compliance with relevant waste regulations. All waste should be disposed of into the allocated consumables and stored securely on site or transferred to another site as required (e.g., roving vaccinators) following each vaccination session. The principles of the [COVID-19 waste management SOP](#) should be followed.

9. Home delivery of medicines and appliances during the COVID-19 outbreak

NHSE have [written a letter](#) to community pharmacies and dispensing GP practices to confirm that the Community Pharmacy Home Delivery Service and the Dispensing Doctor Home Delivery Service will be commissioned from 16 March 2021 to 30 June 2021 (inclusive) for anyone living in England who has been notified by Test and Trace to self-isolate. The [service specifications and guidance](#) for the service has also been updated accordingly.



10. Overworked doctors must be allowed to rest and recover so we can keep patients safe, BMA warns

Doctors must be allowed to rest and recuperate from the exhaustion of working throughout the pandemic if we want to have safe patient care in the future.

In a new report, *Rest, recover, restore: Getting UK health services back on track*, the BMA argues that the pandemic has left the health service running on empty, with staff burnt out, disillusioned, and even considering leaving the NHS as a result of the intense pressures and stress of the past year. The report points out that pushing doctors to 'get the NHS back to normal', without giving them the respite and support they need, will not only result in increasingly high absence rates and staff reducing their hours, but also threaten patient care and safety.

Against a backdrop of current workforce shortages, patient demand outstripping staffing levels, and tens of thousands of clinical and non-clinical vacancies in hospitals and a shortage of GPs, the need for a strong and healthy workforce is obvious. As a result, the BMA has set out a series of recommendations to UK Governments to ensure that services resume safely for both staff and patients, including:

1. All Governments and system leaders across the UK to have an honest conversation with the public about the need for a realistic approach to restoring non-Covid care, and support for systems to tackle the backlog.
2. Health, safety, and mental wellbeing of the workforce to remain a top priority.
3. Additional resourcing to help tackle the backlog.
4. Measures to expand system capacity.
5. Measures to expand the workforce and retain existing staff.

The report and press statement can be found [here](#).

11. Vaccine dose data

Over [25 million people in the UK](#) have now received their first dose of the COVID-19 vaccine, and the latest [data report](#) shows that as of 18 March 23.2 million doses of the COVID-19 vaccine have been given in England. Please see attached (Enc.2) a weekly covid-19 data update produced by the BMA 19.03.2021.

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 can not accept patient identifiable data.



Supporting the Business of General Practice

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.

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.

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/>