



# Londonwide LMCs

The professional voice of London general practice

## Mword Issue 68 - Dr Michelle Drage's latest update for GPs and practice teams

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Dear Colleague This has been an awful week for general practice. I'm sure you can't have missed the high profile media reporting of the letter from NHSE/I about face to face consultations. Needless to say we at Londonwide are responding to NHSE/I, and endeavouring to direct the anger and dismay many of us have expressed, to the highest national levels. And for the sake of clarity, we have issued the following statement: "London's GPs and practice teams are dismayed at the media coverage on Sunday and Monday this week referencing pre-released briefings from NHSE/I about face to face appointments in general practice. Our colleagues have been working flat out to keep their services as safe and accessible as possible during the Covid-19 pandemic. NHS England in its Covid-19 Standard Operating Procedure mandates all surgeries to undertake virtual triage of patients as their first point of contact, to minimise the numbers of patients having to be physically brought into surgeries to be examined, and to operate NHS infection prevention control measures. Contrary to media myths and over-dinner discussions, London's practices are not closed. To enable safe face to face appointments when clinically needed, necessary entry restrictions at the front door and measures to control footfall and circulation to ensure the safety of our staff and patients – just as in hospitals - do not mean practices are closed. Far from it." As I often say, as the only body recognised in successive NHS Acts dedicated solely to supporting you and your practices, we are by your side during this nasty pandemic. Our own Londonwide LMCs Living Guide continues to set out what you should and shouldn't do, and I encourage you to continue to use it. There will, I am certain, be further updates as we enter the pandemic's next oscillation. And so, between directions on face to face appointments, problems with test and trace, managing the new and debilitating long-term effects of Covid-19, the 'NHS Recovery', even more workload dumping from all sides, some opaque digital first developments, and the delivery of the largest seasonal flu programme in ever, today I want to share with you:

Face to facing off.

Putting NHSE/I to the test.

London Recovery Board – our suggestions to the Mayor.

Cancer.

Digital first – face to face last?

And finally, flu.

1. Face to facing off. As I've said above, we were all dismayed at the media coverage on Sunday and Monday this week referencing pre-released briefings from NHSE/I about face to face appointments in general practice. Whilst the commitment to, and expressed belief, in the value of face to face appointments is important, it was disheartening to see broad anecdotal references to patient dissatisfaction paint a misleading picture of the hard working GP community whose diligence through the pandemic has often come at considerable personal cost to yourselves and your families.

In addition to the statement above, we have written to the authors of the letter highlighted in media reports taking issue with the timing, the tone, the way in which that NHSE/I has chosen to raise supposed concerns about patient problems, and pointing out the detrimental impact the letter will have on the morale of the committed GPs and practice staff whose work over the past six months has been heroic. Those GPs, nurses, practice managers and other staff are YOU, and you can read our letter here. And you can see a quick summary of the actual contractual requirements around face to face appointments here. GPC Chair Richard Vautrey has also written to NHSE/I CEO Sir Simon Stevens and you can read the letter here.<sup>2</sup> Putting NHSE/I to the test. Increased testing has revealed that Coronavirus is circulating widely and escalating, with primary care staff among the most likely members of the population to be infected, and the potential that they in turn become vectors for spread, many GPs and their teams face an ethical situation where going to work with even minor respiratory symptoms may risk infecting colleagues, and countless vulnerable patients. As parents and partners, healthcare professionals are equally bound by Government infection control guidelines regarding isolation if possible Coronavirus symptoms are exhibited in our households. Without adequate fast track testing for healthcare professionals, commonplace winter cold symptoms could lead to the collapse of general practice services. And all that that would bring with it. With demand for GP services growing even as hospitals are further limiting access to specialisms and A&E, it is even more critical that GPs, GPNs and all practice staff are given access to testing to enable them to work and help patients as the second wave of the pandemic begins to grow. Read our latest statement here. <sup>3</sup> London Recovery Board – our suggestions to the Mayor. Earlier this month the Mayor’s team asked us to give our thoughts on the intended work of the London Recovery Board, chaired by the Mayor and outgoing London Council’s Chair, Peter John. We made the point that GPs understand the specific needs of their local communities and have a long history of planning and delivering services to meet these needs, taking into account potential barriers to access, such as language and literacy, and ensuring delivery models are socially and culturally acceptable. We understand neighbourhoods and promote social inclusion. And in many areas, the practice is a community asset providing not just bricks and mortar value to the local geography, but essential social capital through the human assets evidenced through patient advocacy, community and service collaboration on population health planning, and the engagement and support of some of the most vulnerable community members. We have offered to pass back any further comments and suggested a meeting involving our team and counterparts at London Councils to discuss collaborative working and how we might take forward the Mayor’s important health inequalities and community development agenda. You can read our response here. Let me know your thoughts. <sup>4</sup> Cancer. We all know how hard the past few months have been, juggling new safety measures whilst ensuring that patients are still best served by general practice. Our communications team have been speaking to some of London’s GPs with a special interest in cancer about their experiences of helping patients through the pandemic. Keep your eyes peeled for the results on our social media channels at the start of October, Breast Cancer Awareness Month. And huge thanks to everyone who gave their time. <sup>5</sup> Digital first – face to face last? In the week that saw face to face appointments come to the fore in spectacular fashion, it is unsurprising to see our increasingly Janus-like NHSE/I promoting physical appointments in correspondence to GPs, whilst commissioning increased virtual primary care services. We are hearing rumours of plans to follow through on ideas floated in the 2018 and 2019 consultations on Digital First measures in primary care, with talk of increased use of APMS contracts in “under-doctored areas”. Based on our experience in London, we are concerned that APMS contracts are notoriously unstable and poor vehicles for the provision of the continuous and effective health care relationships beneficial to patients and staff. Considering the benefits of stable and continuous patient care and a sustainable and stable workforce, we believe that commissioners would see improved patient outcomes through increased investment and support for GMS contracts which are nationally negotiated, and provide long term stability for patients and staff. We are raising what appear to be national plans with GPC, but please let us know of anything that you hear on the ground. And our recent Londonwide statement on Digital First can be seen here. <sup>6</sup> And finally, flu. Our tireless Lead MD and my Deputy Chief Executive Dr Lisa Harrod-Rothwell and her team have pulled together a fantastic resource to help you navigate the very special circumstances for this year’s flu programme. It will be landing in your in-boxes imminently, and you will find it, and all of our new guides and resources, here. As ever I welcome your feedback at [mword@lmc.org.uk](mailto:mword@lmc.org.uk), and as I said earlier, know that my team of experts and leaders here at Londonwide LMCs will always be by your side. Keep well. Stay safe. With best wishes

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