Dear Colleagues,

Arrangements for primary care from 19 July 2021

Following the government’s recent announcement that England will proceed to step 4 of its COVID-19 response from 19 July 2021, this letter outlines our continuing expectations across primary care in relation to access, infection prevention and control, and continuing contractual/regulatory arrangements. It also confirms that a number of the standard operating procedures (SOPs) that have been in place since March 2020 will be withdrawn from 19 July 2021.

COVID-19 infection protection and control (IPC) guidance

In its COVID-19 Response: Summer 2021, the Cabinet Office confirmed that:

“Health and care settings will continue to maintain appropriate infection prevention and control processes as necessary and this will be continually reviewed. Guidance will be updated based on the latest clinical evidence this summer.”

Until further notice, the existing COVID-19 Infection Protection and Control (IPC) guidance continues to apply in healthcare settings. All primary care contractors should continue to follow this guidance. IPC face covering resources for NHS settings have also been published by Public Health England (PHE).

Contractors will be considering the implications for their services of the end of mandatory rules enforcing use of face coverings by members of the public.
The IPC guidance confirms that:

“Patients in all care areas should still be encouraged and supported to wear a face mask, providing it is tolerated and is not detrimental to their medical or care needs”.

Contractors continue to have our support in enforcing the IPC guidance.

Since January 2021 frontline healthcare staff have been eligible for the COVID-19 vaccination and the vast majority are now double vaccinated. Healthcare staff should continue to follow further advice on vaccination and the IPC guidance as part of their duty of care towards their patients.

**Contractual arrangements**

**Dental**
All existing contractual arrangements and conditions of payment protection continue to apply as detailed in our communication of [29 March 2021](#).

**General practice**
All contractors should continue to offer a blended approach of face-to-face and remote appointments, with digital triage where possible.

As per previous updates ([available here](#)) the majority of services that were previously suspended have now been reinstated.

The following provisions will continue under the DHSC’s [National Health Service (Amendments Relating to the Provision of Primary Care Services During a Pandemic etc.) Regulations 2020](#) until 30 September 2021:

- A suspension of the requirement that practices report to commissioners about the Friends and Family Test returns.
- A temporary suspension of the requirement for individual patient consent in certain circumstances, to encourage increased use of electronic repeat dispensing (eRD).
- A continuation of the temporary increase in the number of appointment slots that practices make available for direct booking by 111, up to one slot per 500 patients per day. These slots continue not to be appointments in the traditional sense, but practices should clinically review patients referred by 111 and contact the patient to arrange appropriate follow-up. Practices should make slots
available in line with demand, and for the majority of practices this will be fewer than one slot per 500 patients per day.

We will review these direct booking arrangements with key partners in the context of wider discussions on GP access, with a view to ensuring that they are not extended beyond the necessary period.

The relaxation of the requirement to offer medication reviews face to face under the Dispensary Services Quality Scheme will continue until at least 1 October 2021.

**Community pharmacy**

As per previous updates, community pharmacies need to fulfil all aspects of their terms of service for 2021/22.

The declaration of emergency requiring the flexible provision of pharmaceutical services by DHSC, has been extended from 30 June to 30 September 2021 – [https://www.nhsbsa.nhs.uk/pharmaceutical-services-advanced-and-enhanced-services-and-emergency-declaration-amendment-england](https://www.nhsbsa.nhs.uk/pharmaceutical-services-advanced-and-enhanced-services-and-emergency-declaration-amendment-england).

This allows contractors with adequate reason to request temporary opening hours (days or times) provided they give 24 hours' notice to NHS England and NHS Improvement.

**Optometry**

On 26 October 2021 we wrote to all optometry contract holders advising that financial support would cease over the period October to December 2020 and contracts would revert to activity driven payments from January 2021; this information continues to apply.

**Standard operating procedures**

In March 2020, we introduced a number of SOPs. Over time their content has either become standard practice, is covered in other guidance or will be redundant.

Therefore, from 19 July 2021 we will be withdrawing the following SOPs:

- General practice in the context of coronavirus (COVID-19) (Version 4.3)
- Community pharmacy in the context of coronavirus (COVID-19) (Version 4)
- COVID-19 guidance and standard operating procedure: For the provision of urgent dental care in primary care dental settings and designated urgent dental care provider sites (Version 4.2)
The following SOP will remain active for now:

- **Transition to recovery: A phased transition for dental practices towards the resumption of the full range of dental provision (Version 5)**

We will continue to keep this under review in the event of further changes to guidance, but in the meantime contractors should refer to appropriate guidance available on the NHS England and NHS Improvement and GOV.UK websites, and the websites of relevant professional and regulatory bodies.

Thank you all for the tremendous efforts you and your teams have made since the beginning of the pandemic to protect and serve your patients.

Yours sincerely,

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