

Primary Care Resilience Guide

Practice Resilience Guide
South East Region
For STPs and CCGs

General Practice

This Resilience Guide has been developed to help support STPs and CCGs across the South East region by promoting the resilience support available in the South East region on one platform including key guidance documents, helpful hints and tips and further information on NHS programmes as well as local area initiatives.

We know that practices do not exist in isolation from one another and the impact of one or two issues can quickly have a 'domino effect' within local areas and Primary Care Networks, therefore, this resilience guide is meant to extend support for the STPs and CCGs to call upon to use for not only the most at-risk GP Practices they work with but also to their neighbouring practices that may be at risk of struggling if a practice in the vicinity becomes unable to cope.

Building resilience allows CCGs and STPs to reduce the risks to practices working at capacity, supporting them to better respond to the workload pressures that are widely recognised in general practice.

National Access support available

In response to the COVID-19 pandemic NHS England and Improvement confirmed funding of **£150m nationally to support capacity expansion** in primary care and **£120k per system to support the development of flexible GP pools**.

CCGs and STPs can draw on national support for those Practices and PCNs requiring support in improving access with the National Time for Care Programme. The programme offers the 'Access Improvement Programme' that includes tailored support based on a quality improvement methodology. The team can also support in stabilising practices at risk, offering transformational support and exploring new models of care if appropriate.

Support is available to individual practices as well as being available on a greater scale to Primary Care Networks (PCNs).

Support is delivered through local resilience teams, access to experienced GPs and other practice staff skilled in helping to address practice management, recruitment issues, and supporting capacity to plan and implement changes.

Practice Resilience Guide

General practice has been under unprecedented pressure during the COVID-19 pandemic and now offering the vaccination programme. It has had to undergo rapid transformation throughout to respond to this pressure, its workforce has had to rapidly adapt to new ways of working, whilst managing increasing pressures on the service.

Guidance material produced to support the primary care workforce with this transition has been vast and published via varying sources. Often the challenge is finding what you need across the multiple sources available. This pack aims to make that a little easier for CCGs and STPs by bringing together a plethora of materials in one place in order to support their area practices. All links in the pack have approved content from the listed organisations and regular review and updates will be provided.

Alongside this resilience resource pack, we recommend practice teams register for access to the national Future NHS site, which continues to share up to date advice and guidance and offers the opportunity to share challenges and best practice with colleagues on their members forum. You can request free access via the link below.

If you have any feedback on how this document can be improved, we'd love to hear from you. Send us an email at england.seprimarycaretransformationteam@nhs.net

Join the Primary Care Future NHS site [here](#)

**While every effort has been made to include accurate and up-to-date information about legal requirements, IT infrastructure and other resources such as hyperlinked websites, knowledge and understanding are constantly evolving and being updated. Therefore, use the content of this support pack to learn more about how you can adopt or enhance your use of digital healthcare and weigh up the choices, information and guidance for your own circumstances. The content is not a substitute for national advice and guidance from professional or regulatory organisations. Inclusion of named agencies, websites, companies, services or publications in this book does not constitute a recommendation or endorsement.*

Practice Resilience reporting – Daily Sit-Reps



In early January 2021, the NHSE/I South East regional team were tasked with setting up a reporting process that could give a consistent picture of GP resilience across the region, thereby allowing for accurate and timely interventions supporting CCGs and STPs to be able to support individual practices and ensure the stability of Primary Care across the South East.

Template Completion



- Daily sit-rep returns are mandatory.
- The template is completed for the previous day and returned to ICC by 12 noon daily.
- Remember, the date on the sit-rep should show as the previous day.
- Analysts pull all South East systems data together and share with Primary Care Transformation Leads in NHS England & Improvement by 2pm daily.
- Transformation Leads will work with CCGs/STPs who in turn will support those Practices ragged Red and Amber.

Building Resilience



- SCW CSU are engaged to undertake trend analysis work to gain richer insights into the data including daily appointment data where available.
- Transformation Leads will work with CCGs/STPs to understand themes and the solutions required.
- Please continue to work with Practices to ensure that the data they provide for the National Workforce Reporting Service (NWRS) is correct.
- Please feedback comments and suggestions on the template to your CCG/STP Transformation Lead.

The Resilience Guide



- The Resilience Guide will be continually updated to provide you and your Practices with the most up to date information available.
- With regards to local initiatives, please keep us up to date with these to enable us to share these via this Resilience Guide.

NHS Employee Support

The NHS achieves extraordinary things for patients, but safety and health and wellbeing matter just as much for our people. If we don't look after ourselves, and each other, we cannot deliver safe, high-quality care. COVID-19 has spurred the NHS on to put much greater focus on this, which we must continue and build on.

The pandemic has already had a significant physical, mental and psychological impact on our people – and this will continue for some time to come. Many people are tired and in need of rest and respite.

The support being provided offers concise tips, resources and signposting to help you find the right support for you and your teams for right now and beyond and will help deliver resilience in practice.

We recommend that CCGs and STPs promote support services available to their teams and practice staff in order to ensure everyone's well being.

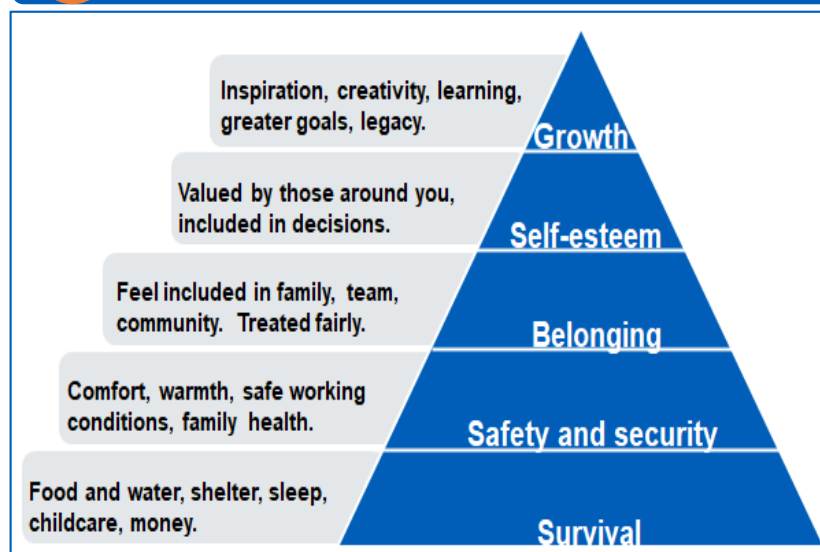
Looking After our People programme



The South East Leadership Academy has developed a Looking After our People platform in order to continue to support how we must all continue to look after each other. The platform helps you identify what you need to support you in your journey and can be found [here](#)



Needs are different for everyone



NHS People Plan

This plan sets out actions to support transformation across the whole NHS. It focuses on how we must all continue to look after each other and foster a culture of inclusion and belonging, as well as action to grow our workforce, train our people, and work together differently to deliver patient care. The principles underpinning this action through 2020/21 must endure beyond that time.

You can find the plan [here](#)

Learn how Dr Rakesh Koria, GP lead for Acute Response Team in East Kent is sharing knowledge for a different mindset in health and social care can be found [here](#)



Ask for support | Talk to someone | Get practical help

The Mental Health and Wellbeing hubs were established in January 2021 in recognition of the rapidly growing need to support health and care staff. In July 2020 58% of staff surveyed met the criteria for anxiety, depression and PTSD. While the level is not currently known, it is expected that this rate has since increased.

Rapid referrals can be made by individuals and line managers either to your own hub or a neighbouring one if you would prefer. Contact a hub through one of the links below or speak to your line manager. Find more information [here](#)

Resilience Guide for STPs and CCGs



This Resilience Guide has been developed to help support STPs and CCGs across the South East region by providing resilience support available and providing one platform to find and access key guidance documents, helpful hints and tips and further information on NHS programmes as well as local area initiatives. You can navigate through the resource pack using the icons below, and hyperlinks have been embedded in the document to take you to key guidance and helpful resources hosted online.

How to use this guide:  Returns you to home page  Returns you to the previous page

Workforce



[LOCUM Clinical Support – GP Flexible Pool](#)

[GP Locum Booking online platform case study](#)

[Access to National Workforce Supply Routes for PCNs](#)

[Alternative Workforce Solutions](#)

Mutual Aid



[Mutual Aid](#)

[Joint Working](#)

[Sharing Best Practice](#)

[Sharing Best Practice 2](#)

[Services supporting practices – Advice and Guidance](#)

[Business Continuity plans](#)

Advice & Guidance



[National GP Advice](#)

[COVID-19 Vaccination Programme](#)

Additional IT Equipment



[Provision of Additional Computer Equipment](#)

Workforce



GP Flexible Pools

What is the initiative?

STPs in the South East have applied for and received £120k each for the realisation of temporary GP pools, to be delivered at pace to engage and deploy local GPs flexibly in an ongoing way to support their local primary care, including PCN extended access services.

As an optional enabler to the pool, a Framework of approved suppliers has been put in place which will offer further support to local CCGs/STPs in deploying their workforce.

The use of digital solutions can improve the visibility of capacity and demand through the posting of shifts by practices/PCNs and is intended to provide local areas with a more easily available solution to deploy as they seek to match sessional capacity to need.



Locum Clinical Support



Framework approved suppliers

System	Provider	1	2	3	4	5	6	7	8	9	Provide Clinical Capacity	Known use within SE Region	1	2
													Web App	Mobile App
Binary Health	Hyre app	✓	✓	✓	✓	✓	✓		✓		✓	TBC	3	4
Lantum		✓		✓	✓	✓		✓	✓	✓	✓	TBC	Symptom Checker	Triage
Locum Tap	Patchwork	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	TBC	5	6
Midlands & Lancashire CSU	Find me a Locum			✓	✓	✓			✓	✓	✓	TBC	Video Consultation	Appointment Booking
My Locum Manager	MLM Flex			✓	✓	✓			✓	✓	✓	TBC	7	8
Pairoo				✓	✓	✓		✓	✓		✓	TBC	One-Way Messaging	Two-Way Messaging
													9	
													Signposting	In development

Benefits

- ✓ Increased CCG confidence in the management of increased primary care demand
- ✓ Offer an improved service to manage demand in the system
- ✓ Help improve health and wellbeing of staff and increasing resilience of general practice
- ✓ Support increased public confidence and enhanced health and wellbeing of patients resulting from sustainability of services and improved access

Link [here](#) for GP Flexible Pools Guidance. Digital Framework guidance access by emailing: digitalsupplier.framework@nhs.net

Next Steps

- ✓ To support the COVID-19 response, vaccination roll out, and the implementation of the Primary Care Flexible Staff Pools locally, a framework of six approved digital suppliers are now available.

The framework contains digital suppliers offering digital solutions, to be utilised by PCNs and practices, to match additional GP workforce capacity with primary care demand and facilitate flexible staffing pools. Solutions can also facilitate clinician approval, (including onboarding checks), and payment processes, further reducing the admin burden for practices.
- ✓ The Framework for Digital Solutions for the Deployment of sessional clinical capacity in Primary Care is available [here](#).

National Association of Sessional GPs within Buckinghamshire, Oxfordshire & Berkshire West (BOB) Case Study

Case study to support STPs and CCGs with their practices on a free platform for how to manage a GP Locum Online booking platform.

The National Association of Sessional GPs (NASGP) is an online platform matching practices with spare capacity in the system.

This case study offers practices Locum support by enabling PCNs to book locums to specific sessions, and at the same time enables locum GPs the autonomy on how they work, whilst also taking care of the administration and forms required for employment all in one place.



The LocumDeck booking platform is offered free for practices & PCNs to use.



GP Locum Booking online platform



High Level SOP

-  Online platform matching practices to available GP locums
-  Locum Chambers provides additional support to GP Locums

Benefits

- ✓ Saves agency fees
- ✓ Quick access to available workforce on a sessional basis
- ✓ Free for practices / PCNs to use

Case Study: BOB ICS GP Locum Chambers

Buckinghamshire, Oxfordshire and Berkshire West ICS (BOB) and Frimley ICS have successfully worked with NASGP to develop a GP Locum Chambers platform, providing additional support to Locum GPs to enable them to work more efficiently and effectively in their flexible locations. Development is currently underway on a Nurse Locum Chambers on the same platform.

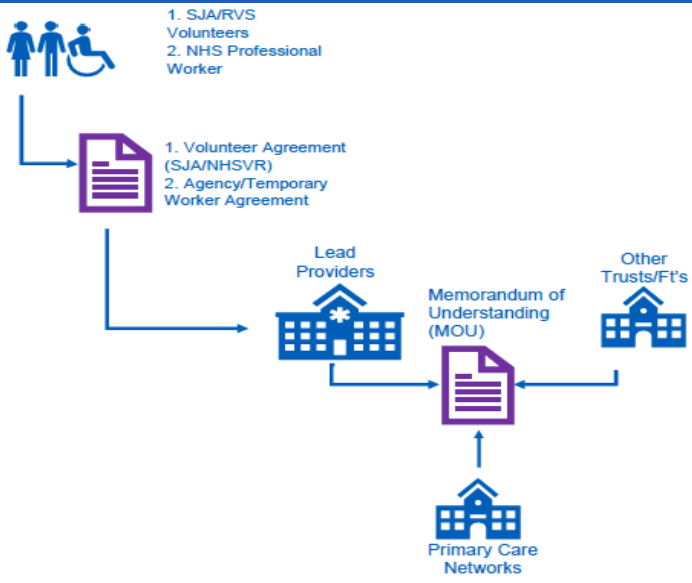
Project outline: To achieve 150 GP locums registered by Q4 (first year) with a consistent coverage across the ICS measured by:

- Developing a professional community with shared learning, spread best practice and integrate into clinical governance structures
- Simplify engagement between GPs, practices and services; ensuring continuity at a regional level, skill mix, workforce development and ultimately, improvement in patient care
- Become self-sustaining so that it can continue to run after first year's funding ends
- Provide a platform for retiring GPs or those on a career break to easily do a few locum shifts
- Retain current locum GPs

You can access additional information [here](#)

Access to National Workforce Supply Routes for PCNs

The National Workforce Supply Routes have been established to provide additional capacity over and above local workforce teams. The routes allow PCNs to access both clinical and non-clinical staff and volunteers, via a designated lead organisation in each Integrated Care System (ICS).



Support for General Practice Access



High Level SOP

- i** National Workforce Supply routes include NHS Professionals, ST John Ambulance, Occupational Health providers, Bring Back Staff Teams, NHS Volunteer Responders
- i** National guidance has been developed to support CCGs and STPs that sets out detailed instructions which PCNs will need to access the National Workforce Supply Routes. Found [here](#)

Benefits

- ✓ Each STP has a designated Lead Provider which will act as a workforce hub for the other providers in the local area, including PCNs.
- ✓ The Lead Provider will work with all providers offering workforce support, such as:
 - Communications with local providers and PCNs.
 - Completion of regional workforce reporting.
 - System level Workforce Planning and Gap Analysis.
 - Liaison and Drawdown of National Workforce Supply Routes.
 - Management of Rostering Systems (for Volunteer or National Workforce Supply Routes).
 - Oversight and delivery of statutory and mandatory training

Next Steps			
CCGs could advise PCNs to contact the Lead Provider for their STPs to place a request for volunteers or temporary workers from the National Workforce Supply:			
Sussex community FT	Sussex Health and Care Partnership	Lead Employer contact: Caroline Haynes, HRD	Caroline.haynes3@nhs.net mark.power1@nhs.net
Central Surrey Health	Surrey Heartlands	Lead Employer Contact: Laura Rivet, Director of People	laura.rivet@nhs.net jane.chalmers1@nhs.uk
Frimley Park Hospital	Frimley Health and Care ICS	Lead Employer contact: Eleanor Singleton Smith, Acting HRD	eleanor.shingleton-smith@nhs.net tina.white@nhs.net
Workforce Bureau Provider: Solent NHS Trust	Hampshire and IOW	Solent NHS Trust COO: David Noyes/ Workforce Bureau Lead: Jo Perry	jo.perry1@nhs.net david.noyes@nhs.net
Kent Community Health NHS Foundation Trust	Kent and Medway	Lead Employer contact: Louise Norris	Louise.norris@nhs.net



Alternative Workforce Solutions

CCGs and STPs are able to advise their PCNs that as well as the digital framework suppliers outlined in slide 8, there are additional Workforce Capacity Options available to PCNs. Some listed here are examples of those that have been used previously or currently by systems in the South East.

Additional solutions to be added as appropriate.

General Practice Access Local Examples



Locums Nest Surrey Heartlands

Offers building of a digital bank of locums, rostering staff, reduced reliance on agencies and saving time & money and more information can be found [here](#)
For further information or queries, contact the Locums Nest team at hello@locumsnest.co.uk

Lantum Surrey Heartlands

System offers the opportunity to build compliant rotas online, access live staff availability 24/7, App to be able to communicate with staff and automatically fill gaps with smart-matching algorithm. Additional information [here](#)

Nye Health Oxfordshire

Nye Health is a simple NHS-compliant browser-based telephone and video phone system. This enables GPs to carry out remote consultations. This means that GPs can be employed anywhere in the country, and can work securely from home providing remote healthcare. Find out more information [here](#).

Location Medical Services Surrey Heartlands

Location Medical Services Ltd offers a range of medical staff support options including nurses, paramedics and medics. Whilst usually supporting events they can be approached to consider other viable options. Additional information can be found [here](#)

Practice Plus (formerly Care UK) Surrey Heartlands

A menu of options is being developed but includes:

- Support via a dedicated phone line for emergency cover to a practice
- Home visiting service
- Potentially a site-based service in one of their out of hours facilities (subject to site availability & location). The benefit of this service is their ability to access patient records via GP connect and e-prescribing.
- If you are interested in pursuing this further, please contact your local head of primary care who can facilitate the discussions around potential suitable options.

For additional information access the Surrey Heartlands CCG General Practice Resilience Support Package [here](#)



Mutual Aid



Mutual Aid

Focused menu of support
will adopt a tiered approach.

It is recognised that **collaboration** is an invaluable source of support in response to resilience issues and may be sufficient in the first instance.


Examples of **mutual aid** are provided for specific scenarios – for example where additional capacity/ resources are required in response to resilience issues.



These items are for CCGs and STPs to share where appropriate with their area practices in order to enhance existing offers.

Processes and Guidance



Guidance and resources currently available

-  **Mutual aid and the transfer of COVID-19 vaccines between Hospital Hubs, Vaccination Centres and Local Vaccination Services**

[This](#) is a policy for use by healthcare professionals and senior managers across the NHS who are responsible for the transfer and handling of COVID-19 vaccines.
-  **Memorandum of Understanding for staff sharing** which practices can use if there is capacity for support available from other sites e.g., where capacity may be released or additional capacity purchased can be found in the Surrey Heartlands CCG General Practice Resilience Support Package [here](#)
-  **MOU** between an NHS Trust and PCN's for the provision of staff for the vaccination programme can be found [here](#)



Joint working

An example of good practice in joint working is being provided to help support CCGs and STPs promote new ways of working with their respective practices.

During the COVID-19 pandemic, established joint working in Leeds and Derbyshire has proven invaluable.

These relationships have enabled mutual aid and rapid resolution of problems and misunderstandings through direct conversations.

The availability of PCN clinical directors to broker conversations between community teams and their local GP colleagues has been a great facilitator - where in previous times, similar issues would have been escalated via the CCG, taking weeks to resolve and damaging relationships.

Local leaders have been seen to role model successful partnership working by agreeing a pragmatic way forward to continue weekly multidisciplinary team meetings during the COVID-19 response.

Joint Working between Primary Care and Community Services





How it has worked in Leeds and Derbyshire

- ✓ The organisational development programme, **Leading Across Boundaries**, from the East Midlands Leadership Academy, has also played a significant part in starting that cross-organisational conversation.
- ✓ In Derbyshire an informal GP alliance was created that enables a unified, constructive GP voice in system conversations. A **Clinical Director for Integration** has been appointed, who is an ex-GP with the credibility to lead the integration work, provide honest brokerage and challenge both the community trust and general practice colleagues to work together in new ways
- ✓ In Leeds, a **GP Confederation** was established consisting of 80 members of staff from primary care and medicines optimisations. They co-located head office functions and shared joint appointments of some senior leaders including the medical director and director of workforce.

Top Tips

- ✓ Take the time to genuinely understand both partners' perspectives and commit to building trusting relationships over the long term.
- ✓ Build relationships across senior teams, and where appropriate look at joint appointments. Co-locate where possible and don't underestimate the benefits of 'corridor conversations,' albeit some of these may now be virtual.
- ✓ Constructively challenge each other without questioning the intentions or motives for doing this, other than to move the integration and transformation journey forwards.
- ✓ Accept that it is impossible to achieve 100 per cent consensus within the primary care community, but that managers can provide a facilitative and supportive role to create greater consensus in system-wide conversations.
- ✓ Adopt a flexible and open mindset, working with colleagues to drive quality and safety improvements. Avoid command-and-control leadership models.
- ✓ Celebrate successes along the way, communicating benefits to all stakeholders.

-  **The full case studies can be found on the national Future NHS site via the following links;**
[Leeds case study](#) The strong foundations of partnership working in Leeds enabled a cohesive response to COVID-19 across the city and demonstrates the agility of partnerships built on trusting relationships.
-  [Derbyshire case study](#) Derbyshire they are on a journey towards integration, which is heading in a positive direction. Relationships are good, which brings efficiency benefits. However, system leaders agree there is still a long way to go. With every forward step, more obstacles are revealed and must be navigated.



Examples of South East best practice

Great work is being done in the South East region. CCGs and STPs can use this as guidance to help support and develop best practice in their areas where appropriate.

NHS England and Improvement work with health and care systems to develop integrated, person-centred solutions that ensure patients see the right person, in the right place, first and every time.



Sharing Best Practice



West Kent Common Ailments Scheme (WKCAS)

Aims to provide patients registered with access to medication for the treatment of common (minor) ailments, characterised by acute onset of symptoms, via pharmacy services. The Scheme will be provided through community pharmacies on the Kent Pharmaceutical List and will offer patients access to self-care advice. Find out more information on the scheme [here](#)



Community Pharmacy Consultation Service Project

The NHS Community Pharmacist Consultation Service is a community pharmacist led clinical service established across England managing referrals for minor illness conditions. The aim of the service is to create a GP referral pathway at PCN level to improve access for patients with higher acuity illnesses by diverting appropriate consultations to trained community pharmacists. Find out more [here](#) and contact Charlotte Rippin with any queries at england.se.primarycare@nhs.net



GP Referral to NHS Community Pharmacist Consultation Service

The aim of the service is to improve access to primary care by referring patients requiring advice and treatment for certain minor illness conditions, from a GP practice to a community pharmacist, ensuring that patients have access to the same levels of care, close to home and with an emphasis on self-care. Find out more [here](#)

National case study examples

CCGs and STPs are advised to encourage practice to utilise the FutureNHS Collaboration platform.

The FutureNHS Collaboration Platform is a web based tool which supports people from across the health and social care sector to work together more effectively. The platform enables people to share, learn and connect with others, to deliver high quality integrated health and care services for patients and service users.

FutureNHS is helping to deliver the NHS Long Term Plan, supporting local systems and partnerships to work more collaboratively and connecting teams across silos, departments and organisations.

You can access the Futures site via:
FutureNHS Collaboration Platform

Sharing Best Practice 2



NHS Futures



Patient Management in Primary Care: Local Response to COVID-19 (Birmingham)

In response to the challenge a team consisting of NHS managers, Commissioners and GPs came [together to deliver](#) a COVID Referral Centre (CRC) designed to support patients, primary care and protect demand in secondary care as well as ensure access.



Witley surgery – boosting patient access

Around two-years ago Dr Triska learned that a senior partner at Witley Surgery was going to retire, resulting in the loss of six partner sessions. This prompted him to [explore options](#) to boost patient access and satisfaction without adding to the GP burden.

Other sources



Primary Care Network: Bootle PCN partners ‘buddy up’ to support patient safety

[Longstanding links](#) and mutual trust between the Bootle primary care network (PCN) partners allowed them to act at speed to protect patient safety when the coronavirus pandemic hit.



Joint working between primary care and community services during COVID-19: a case study of Derbyshire’s integration journey

Significant time and energy has been invested into [developing positive relationships](#) between general practices, community services, social care and the voluntary sector. This has involved several initiatives, starting with CCG development, continuing through ‘place’ and now with PCNs.



Services supporting practices

Digital First is centred around putting clinicians, staff and patients at the heart of transformation through pathway redesign and building adoption across systems. In addition, the programme of work provides an opportunity to work towards achieving expectations set out within the GP Contract, Long Term Plan, PCN Network Contract Directed Enhanced Service and Planning Guidance.

The programme has focused on delivering accelerator footprints in health economies to support the development of new models of care in collaboration with commissioning leaders.

The Digital First Programme is able to support STPs and CCGs through their digital journeys.

Contact us for any additional queries at england.dfpcse@nhs.net







Advice and Guidance

digital first



Support for practices

-  **Digital Supplier Matrix** – A selection of Digital First suppliers have been identified as having the capability to offer medical services (i.e. clinicians who can offer additional clinical capacity to practices). This provides an opportunity for these suppliers to support general practice resilience by offering short term clinical capacity to undertake clinical services can be found [here](#)
-  **Remote working** – Digital technology has enabled a rapid transition to remote working in response to the pandemic, allowing GPs and practice staff to continue to provide care for their patients when they need it most. Tools to help with remote working can be found [here](#)
-  **Electronic referral service** – Whether you're using e-RS for the first time, or an existing user wanting to make the most of the service, NHS Digital provides a range of material for [referrers](#) (such as a general practice), [providers](#) (a hospital or clinic) and [commissioners](#). Find advice and guidance [here](#)
-  **Proxy Access for Medications** – GP practices can now work with care home staff to set them up to order online medication for the care home patients. Full guidance on how to set up proxy access for medications management in care homes can be found [here](#)



Redmoor Health – Tactical support for practices during Covid-19 has been commissioned for STPs and includes strategic planning – OC/VC/Total triage inclusive of OC demand model, COVID patient communication strategy, website and social media support, operational support where needed and a support centre to help practices with queries. To find out more visit the website [here](#)



In order to support practice staff in being able to easily access information the South East Region Digital First programme has developed a [guide](#) to support practices in making the best use of digital technology by providing one platform to find and access key national resources across NHS programmes.

Business Continuity plans

All NHS organisations have a duty to put in place continuity arrangements, under the Civil Contingencies Act 2004 and the Health and Social Care Act 2012.

The NHS England Core Standards for Emergency Preparedness, Resilience and Response (EPRR) set out these requirements for all organisations. This means that services should be maintained to set standards during any disruption, or recovered to these standards as soon as possible.

National content has been developed to support CCGs and STPs in delivering this piece of work.

Guidance and resources



Below you will find national content to support



BMA has developed a toolkit to help support practices with re-deploying of staff, working in hubs and furlough and can be found [here](#)



BMA Service provision section of the toolkit advises that under the GMS contract, practices have a responsibility to provide services to your registered patients and it is for practices to decide how best to do so. COVID-19 does not in any way negate this requirement. Learn more in the guidance [here](#)



Business Continuity prompts – [guidance](#) produced by Birmingham and Solihull CCG. A series of prompts to ensure that all practices take into account both their own and wider Primary Care resilience.



NHS England Emergency Preparedness, Resilience and Response (EPRR) – Business Continuity Management Toolkit – guidance [here](#)



Example of CCG Business Continuity Policy – Buckinghamshire CCG [Business Continuity Policy](#) (March 2020)

Advice & Guidance



National GP advice

Under the GMS contract, practices have a responsibility to provide services to your registered patients and it is for practices to decide how best to do so. COVID-19 does not in any way negate this requirement.

General practice has rapidly, and rightly, changed its working patterns in order to cope with this national emergency, and demand on general practice for routine care has changed.

You can access the Futures site via:

[FutureNHS Collaboration Platform Primary Care Workforce](#)

Advice and Guidance



Guidance and resources currently available



In response to the COVID-19 pandemic, the GPCE and RCGP have published updated joint guidance to help practices to [prioritise the clinical and non-clinical workload](#) in general practice.



Support to General Practice

[Supporting General Practice in 2021/22](#)

NHSE&I and the British Medical Association (BMA) General Practitioners Committee (GPC) England published a letter to General Practice on 21 Jan 2021, setting out further measures to support general practice in 2021/22.



BMA advice is that **all non-urgent work be postponed** until further notice, a list of what this includes can be found [here](#).



Care Homes

Practices have been asked to ensure delivery of consistent, weekly 'check ins', to review care home patients identified as a clinical priority for assessment and care. Below is National guidance to deliver programme:

❖ [Care Home Vaccination Guidance](#)

❖ [COVID-19 Vaccination in Older Adult Care Homes – the next stage Letter 13 Jan 2021](#)

❖ [Care Home Supplement Payment Guidance](#)



COVID-19 vaccination programme

This section provides national guidance for your practices. Produced to support in delivering COVID 19 and the Vaccination Programme and provides detail about what the service in England involves, what is expected of practices, what practices will get to support this work, and guidance for practices on what to do now.

You can access the Futures site via:

[FutureNHS Collaboration Platform](#)
[COVID – 19 Vaccination Programme](#)

Advice and Guidance



Primary Care guidance for COVID vaccine management & deployment

In order to support practices due to limited time frames to make some key decisions on preparations and delivery of the vaccine, NHS COVID Primary care guidance can be found [here](#)

Standard operating procedure COVID-19

This standard operating procedure describes the operating model and design requirements for safe delivery of COVID-19 vaccines in the community and can be found [here](#)

Enhanced Service Specification COVID-19 vaccination programme

Enhanced Service Specification: COVID-19 vaccination programme 2020/21. Updated 7th Jan 2021 agreed between NHS England and the British Medical Association (BMA) General Practitioners Committee (GPC) can be found [here](#)

COVID-19 infection prevention and control (IPC) Guidance

Guidance has been developed and includes appendix for dental, mental health and learning disability settings, IPC guidelines and more can find the guidance [here](#)

DHSE PPE Portal

Eligible health and social care providers can order free PPE through the DHSE portal to meet the increased need that has arisen as a result of the COVID-19 pandemic and can be found [here](#)

COVID-19 Vaccination Programmes NHS Futures site

NHS has agreed with the BMA General Practitioners Committee that a vaccination service will be nationally commissioned as an enhanced service (ES). Find out more on the programme [here](#)



Additional IT Equipment



GP Resilience – Provision of Additional Computer Equipment

GP resilience is at significant risk in light of the pandemic; there is greater call on operational primary care services.

Where clinicians are self-isolating, the challenges with business continuity is greatly increased and further compounded where personally owned computer equipment is not available for use to support delivery of care.










The volume of existing NHS assets will not be enough to deliver an adequate business continuity response should there be a requirement for GPs and other primary care clinicians to work from their homes or other temporary outposts in high numbers.

The NHSEI South East team has identified a stockpile of approximately 120 high-powered additional devices to bolster current volumes which may be used to support business continuity measures.

If you require additional information, please email england.dfpcsoutheast@nhs.net

Support and Guidance

Summarised below are three options each with pros and cons in terms of the functionality they provide and additional information and cost can be found [here](#). In each case, GP IT service delivery partners will need to 'build' each device to ensure that they are managed, supported and secure in line with local technology and service standards. Service delivery partners should be used to source further equipment suppliers if required.

 Remote Clinical Desktop	 Localised device with 'remote access' to surgery network	 Remote Desktop Connectivity (RDC) to surgery PC
<div></div> <p>NHS Digital solution that provides secure remote access via 'remote clinical desktop' downloadable app.</p> <p>It is Interoperable with SystmOne, EMIS, Vision 3, Docman 10, AccuRx (for booking) and Adastra and allows access to Microsoft Office (where purchased for the device), some Spine services including e-Referrals Service and the Electronic Prescription Service.</p> <p>There is no software license costs (CALS) and no consulting room PC is available</p> <hr/>	<div></div> <p>Allows staff to use the regionally provided devices to access all their business and clinical systems as if they were at the surgery. They would use the device with remote access capability (commonly referred to as RAS) to connect to the surgery network in the same way corporate back-office laptop users currently work from home. Many GPs have this capability with laptops already.</p> <p>Consulting room PC is available as well as access to surgery business documents where hosted externally</p> <hr/>	<div></div> <p>Connects to the user's own surgery desktop to take control of the practice desktop remotely allowing for desktop environment at the surgery to be presented to the user on the new device.</p> <p>RDC has provided a speedy provision to returning GPs using their own personal devices across the SE who were appointed en-masse.</p> <p>There is no software license costs (CALS), access to surgery business documents and access to Office software</p> <hr/>
<div></div> <p>Access to business files stored outside of the clinical systems will not be available.</p> <p>No Office software unless purchased (e.g. N365 for specific users and no access to surgery business documents</p> <p>Find out more here</p>	<div></div> <p>This option will require use with an additional device to connect back to an existing network and a 'Client Access License' (CAL).</p> <p>There is no office software unless purchased e.g. N365 for specific users.</p>	<div></div> <p>Due to surgery desktop being utilised, RDC reduces the consulting room as the PC cannot be used by anyone else while in use and there is a RDC license cost</p> <p>It is used to a lessening extent by GPs to enable them to work flexibly away from the surgery, often out of core hours.</p>

Items to consider




Computers in storage


'Build' device: local config


Delivery to out-post


User signs into RDC