

Public Health GP Bulletin

Issue 75: 4th February 2022

About this bulletin:

The bulletin contains important Public Health information relating to Section 7a Screening and Immunisation programmes commissioned by NHSE/I. Content may include requests for information and deadlines affecting payments, as well as updates on issues relating to GP contracts.

Current issues and back copies of the bulletins and attachments are available on the NHSE/I website here. If you have any questions or wish to provide feedback, please contact the Integrated Public Health Team at england.swscreeningandimms@nhs.net

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ICARS COVID-19 Newsletter

We are pleased to bring you the latest updates from our ICARS service. This newsletter is attached to your email along with the following associated documents:

- C1577 Extending the post-thaw expiry date of specific batches of Spikevax® (also known as COVID-19 vaccine Moderna) for adults
- MDH5 Extending the post thaw expiry of Moderna (Spikevax) v1.001.02.2022
- MVH9 Extending the post thaw expiry of Moderna (Spikevax) at PCN designated sites v1.0 01.02.2022 (003)

PPV23 locally procured vaccine and deadline for reimbursement claims to be submitted to NHS BSA

Following the move to central supply of PPV23 vaccine from 1 June 2021, practices should ensure that any remaining locally procured PPV23 vaccine has been administered in the first instance by 31 March 2022. Practices can currently submit claims for reimbursement of locally procured PPV23 vaccine administered, up to and including the 31 March 2022.

From 1 April 2022 onwards, the following will apply:

- Any locally procured PPV23 vaccine administered after 1 April 2022 will no longer be eligible for reimbursement and the NHS BSA will not process these claims;
- All practices should only be using centrally supplied PPV23 vaccine for immunising the ir eligible population; and
- Practices should order centrally supplied PPV23 vaccine via the ImmForm website.

Information has been shared in the Primary Care Bulletin (20 January 2022 (Issue 172)

IMPORTANT ADVICE FOR GENERAL PRACTICE EMPLOYING LOCUM NURSES TO UNDERTAKE CERVICAL SCREENING

This is a reminder to practice managers to ensure any locum nurse employed by the practice has a valid sample taker code on the South West Sample Taker Register prior to undertaking any cervical samples within the practice. If nurses take samples without a valid or unrecognised out of area code then this would result in the laboratory reporting the sample as inadequate resulting in the individual requiring a repeat screen.

It is both the responsibility of the locum nurse and the Practice to ensure the individual nurse has a valid code.

If the locum nurse has previously worked in the South West then they should have a valid code on the register already. If you have a query regarding whether a sample taker's code is on the register you can email the register in order to check.

The email address for the register is Cervicalsampletaker.scwcsu@nhs.net.

Alternatively if the sample taker does not have a valid code on the South West sample Taker register but has undertaken all of the relevant training required to undertake cervical screening and can demonstrate their qualification/competency then you can add them following the steps detailed in the attached sample taker register guide.

Please see attachment:

Cervical Sample Taker Register V2

Mandatory flu data upload reminder

Please see attached document: Mandatory flu data upload reminder

Diabetic eye screening appointment - guidance regarding residential / nursing home residents

Dear General Practice Colleagues

Please find the following two documents attached.

- The Diabetic Eye Screening Transport Booking Service User Checklist, For Nursing / Residential Homes
- The Rockwood Frailty Scale visual guide

The purpose of these documents is to support you when determining whether a Residential / Nursing home resident can safely attend a diabetic eye screening appointment.

In summary, service uses who are either a 1, 2 or 3 in the Rockwood scale can attend without any additional support.

Those service who would be classed as a 4, 5 6 or 7 on the Rockwood scale will need additional support and we would suggest that you contact your local diabetic eye screening provider, to ensure that the service can meet their needs appropriately.

Service users who are 8 or 9 on this scale are most likely not suitable for diabetic eye screening, however, we would advise that you discuss this with their diabetic eye screening provider and other health professions involved in their care.

Please see attached documents:

- GP Checklist
- Rockwood Frailty Scale