

**Cabinet Secretary for Health and Social Care, Humza
Yousaf MSP**

Dr Andrew Buist, BMA Scotland

GP contractors
CC: Health Board Chief Executives
Via e-mail

15th December 2021

Dear Colleagues

I want to first of all thank you and all your valued colleagues for your continued resilience and ongoing commitment to supporting people during the pandemic. I recognise how challenging this has been and understand that you and many of your staff may be feeling particularly fatigued after over 20 months of the pandemic. I want to reiterate our thanks and appreciation to you all for supporting each other and working together as we continue to navigate through the pandemic.

As you will be aware there is community transmission of Omicron within Scotland. While there is still much to learn about this variant, we know the COVID booster programme is essential to minimising the risk it poses to us and the progress towards recovery we have made. We are having to accelerate the programme even faster and some Health Boards will have to temporarily prioritise COVID-19 boosters over seasonal influenza vaccinations.

Your Health Board may approach you to ask if your practice staff can be released from some of their duties to support the programme. They might also ask if your practice can provide any further vaccinations under the COVID Immunisation DES although we appreciate that this is not always a practical option for delivery even with a reduced waiting time post vaccine. If you can release your staff, or deliver vaccines directly where practical, I would ask that you do as the booster programme is currently our top national priority.

If you do release your staff to support the programme, terms can be locally agreed and these should include any planned reduction or suspension of less essential services using the Escalation Framework provided by Scottish Government at the beginning of the pandemic. I would also call your attention to the Joint statement from chief executives of statutory regulators of health and social care professionals which should provide assurance about decision-making in a wide range of situations.

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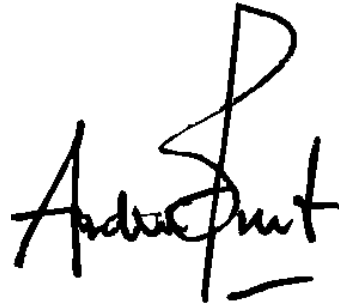


The attached annex:

- provides an update for general practice on the isolation policy;
- outlines our approach to post-vaccine observation times;
- highlights the flexibility of the escalation framework and notes its continuing application as well as the terms of the COVID Immunisation DES;
- reiterates that general practice nurses can participate in the Winter Vaccinations Programme at their substantive rates; and
- notes the Joint statement from chief executives of statutory regulators of health and social care professionals which reflects that regulatory standards are designed to be flexible and to provide a framework for decision-making in a wide range of situations.



HUMZA YOUSAF



Dr Andrew Buist

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Annex

Isolation Policy

1. The existing self-isolation policy for health staff who are household or passing contacts of Covid-19 positive cases, exempts them from the requirement to self-isolate for 10 days, where they are:
 - double-vaccinated;
 - where they are and remain asymptomatic,
 - where they undertake PCR test (which returns a negative test result before returning to work), and;
 - where they undertake daily LFD testing for the remainder of the 10 day period.
2. This policy will remain in place, subject to the following substantive update, staff must be double-vaccinated and have received a Covid-19 booster vaccination.
3. In accordance with the terms of this existing policy: staff are ordinarily expected to return to work and to comply with the testing requirements set out therein.

Observation Times

4. The FVCV Clinical Governance Group have considered a temporary reduction in post vaccination observation times in the context of the programme in Scotland and guidance from the Resuscitation Council (2021) on anaphylaxis, and have proposed reducing the observation time for all COVID-19 vaccines to 5 minutes minimum following administration of the vaccine, rather than removing this entirely, in line with the Resuscitation Council's guidance.

Escalation Framework

5. The [escalation framework](#) to allow the managed reduction of GP services, where locally appropriate, remains in place. Health Boards and primary care GP contractors may wish to give particular consideration to paragraph 8 of [PCA\(M\)\(2020\)02](#) which sets out that:

*Health Boards and primary care GP contractors should consider what, if any services and activities could be suspended in order to support **additional activity** during the situation. Local Enhanced Services (LES) are one example. Health Boards will need to enter into discussions with Local Medical Committees (LMC) to agree in each case whether any income normally associated with that activity should be protected, and whether it should be used to commission a defined activity to support the local response to the pandemic. LES funding (whether via protection or alternative practice-based activity to support the local response) must remain with practices.*

6. [PCA\(M\)\(2020\)02](#) noted that decisions relating to the temporary suspension of such services are not without significant clinical risk and advised that Health Boards should have a defined committee or other decision-making body to consider such actions in the context of local health priorities and needs.

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COVID DES

7. [PCA\(M\)\(2021\)09](#) set out the terms for general practices participating in the COVID-19 Vaccination Directed Enhanced Service (DES) whether for first, second, third doses or boosters as required. These terms still apply.

Provision of Support to Winter Vaccinations Programme

8. Scottish Government provided an update on the Winter Vaccinations Programme on 19 November. The letter set out that any existing staff who can offer additional shifts to vaccination clinics would be paid at their substantive rates of pay and receive applicable enhancements. These terms are also open to general practice nurses who can participate by signing up for shifts via their local board bank.

Joint statement from chief executives of statutory regulators of health and social care professionals

9. The regulators of UK health and social care professionals have reiterated their support for staff working together to tackle the ongoing pandemic and seasonal pressure on services. The [statement](#) recognises that in highly challenging circumstances, professionals may need to depart from established procedures in order to care for patients and people using health and social care services.

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