

## Welcome to this week's news and updates from the NHS

Remember the NHS is a system that also is affected by other systems.



## Key Points so far in 2021

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- **UK Chief Medical Officers** have published a letter clearly outlining their support for vaccinating using one dose for as many people as possible.
- **NHSE** published guidance is for Integrated Care Systems and Sustainability and Transformation Partnerships, Primary Care Networks, Practices, Federations and other local partners, to implement at pace a General Practice COVID Capacity Expansion Fund enabler. The aim is to set up newly established arrangements to support the provision of flexible pools of engaged and employed GPs to deploy across local communities.
- **MHRA** have issued guidance post-Brexit for applications that are planned to be submitted to the UK (for example, a Marketing Authorisation for the UK or GB market), they will need to submit the information through the MHRA national portals.
- **NHSE** have confirmed that patients with cancer will be offered a blood test that detects a particular form of a gene which means that someone is less able to break down chemotherapy drugs in their body.
- **Public Health England** and app evaluation company **ORCHA** are working together to identify digital health products capable of supporting the NHS Health Check programme.
- **NHS Greater Glasgow & Clyde, Glasgow City Council and Macmillan Cancer Support** have published the first report from a five-year evaluation of Glasgow's 'Improving the Cancer Journey' programme.
- **MHRA** have published how marketing Authorisation Holders (MAHs) may seek recognition in Great Britain, of a Marketing Authorisation (MA) approved in Northern Ireland.

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## COVID-19 News

NHSE *confirmed* that GPs in England have until 5 February to claim for personal protective equipment (PPE) purchased during the COVID-19 pandemic.

NHSE has *published* details of the NHS COVID-19 Data Store, which companies are involved and what the data is used for.

UK Chief Medical Officers have *published a letter* clearly outlining their support for vaccinating using one dose for as many people as possible. Additionally, the JCVI and PHE have published details on the effectiveness of a single dose of either the Pfizer/BioNTech or Oxford/AstraZeneca vaccine. NHS England has written to CCGs to outline a package of support to help CCGs and PCNs in the rearrangement of appointments for the second COVID-19 vaccine.

## Other NHS related News

NHS England and NHS Improvement (NHSE&I) have *confirmed* that the Discharge Medicines Service (DMS) will not become an essential service for contractors until 15th February 2021. They have published guidance on the service and from 15th February 2021 NHS Trusts will be able to refer patients for provision of the DMS at their community pharmacy if they would benefit from extra guidance around new prescribed medicines.

Gov.uk have *published* timelines for the Department of Health and Social Care's annual report and accounts plan for 2020 to 2021.



**NHSE** published [guidance](#) is for Integrated Care Systems and Sustainability and Transformation Partnerships, Primary Care Networks, Practices, Federations and other local partners to implement at pace a General Practice COVID Capacity Expansion Fund enabler. The aim is to set up newly established arrangements to support the provision of flexible pools of engaged and employed GPs to deploy across local communities.

**NHS and NICE** have implemented a novel antibiotic pilot reimbursement model which 'de-links' payment from volume of use. The pilot is aimed at making the market for novel antibiotics more predictable and sustainable. The [scheme](#) was launched in 2019 and aims to reimburse companies for antimicrobials based on 'value rather than volume'. The idea of the payment approach is to move away from paying for individual packs of antimicrobials and to make an annual payment based on the health benefits to patients and the value to the NHS instead. Currently, two treatments have been [selected](#) to move to an innovative health technology evaluation process. It is anticipated that these products will be made available to patients via the subscription-based payment model from early 2022.

**MHRA** have issued [guidance](#) post-Brexit for applications that are planned to be submitted to the UK (for example, a Marketing Authorisation for the UK or GB market), they will need to submit the information through the MHRA national portals.

**NICE** - in an [interview](#) with Pharmaceutical Journal, the NICE CEO Gillian Leng seemed to suggest that QALYs may be on the way out. This also relates to the work that the Medicines and Healthcare products Regulatory Agency (MHRA) are doing with their Innovation Passport for designated drugs to speed up the approach to approving them (see below).

**MHRA** - now [formally starts the Innovative Licensing and Access Pathway \(ILAP\)](#). The ambition of this new licensing and access pathway is to reduce the time to market for innovative medicines. The ILAP combines the MHRAs globally recognised strengths of independence and high standards of quality, safety, and efficacy, with improved efficiency and flexibility, readying the MHRA for a new era in medicines approvals in the UK. Central to realising this ambition is how the ILAP provides a single integrated platform for sustained collaborative working between the MHRA, partners and the medicine developer.

**NHSE** have **confirmed** that patients with cancer will be offered a blood test that detects a particular form of a gene which means that someone is less able to break down chemotherapy drugs in their body. The rapid new test will help patients decide whether to go ahead with treatment, opt for a lower dose or use a different method of tackling tumours. The blood test detects a particular form of a gene which means that someone is less able to break down chemotherapy drugs in their body. As many as 40% of those who get tested are expected to benefit from starting on a lower dose or have a different treatment altogether.

**Gov.uk** – promotions on food and drinks high in fat, salt or sugar (HFSS) in retail outlets will be restricted from April 2022. The **new rules** designed to support the nation to make healthier choices, will prohibit retailers from offering multibuy promotions such as 'buy one get one free' or '3 for 2' offers on these products.

**British Pregnancy Advisory Service** is **setting up** England's first not-for-profit IVF clinic in London. It plans to undercut private clinics and charge only the true cost of treatment, which it estimates will be between £3,000 and £3,500 each IVF cycle, not including drugs.

**Gov.uk** – Health Minister Edward Argar MP, on behalf of the Department of Health and Social Care has **written to the health and social care sector** on what the UK-EU Trade and Co-operation Agreement means for health and social care. It reinforces that this does not remove any of the requirements to act now to prepare for new customs and border arrangements when the UK leaves the single market and customs union.

**Gov.uk** have published **updated** Information about the rights and pledges in the NHS Constitution and what these mean for NHS patients and staff.

**Gov.uk** **abolished** the 'Tampon Tax' with a zero rate of VAT applying to women's sanitary products coming into effect from the 1st January 2021.

**The Professional Record Standards Body (PRSB)** has **published** guidance to help prescribers use genetic information effectively. The guidance sets out how information about a person's genetic makeup can be shared with prescribers working in any care setting and patients themselves. As a result, this means that patients receive medications that are safer and more effective because they are personalised.

**AHSNs** – **applications for phase 3 of the Pathway Transformation Fund (PTF)** opened on Monday 4 January. The fund supports NHS organisations increase adoption of the 2020/21 Rapid Uptake Products RUPs, which are:

- Lipid Management: High Intensity Statins, Ezetimibe and PCSK9 inhibitors.
- Measuring fractional exhaled nitric oxide (FeNO) concentration in asthma: products NIOX VERO and NObreath.
- Biologics for treating severe asthma: Reslizumab, Benralizumab, Mepolizumab and Omalizumab.

The PTF can help providers overcome practical obstacles to introducing these products, such as:

- Support set-up costs such as training and accreditation of staff.
- Pathway redesign and/or business support expertise.
- Providing funding for specialist nurses and clinical staff needed to implement a new part of the procedure.
- Covering double running costs.

**NHSE** – from 31 July 2020, the interim COVID-19 care home service will **transition** into the more comprehensive Enhanced Health in Care Homes service as described in the Network Contract DES. To avoid disrupting the positive relationships that are developing between general practice, community services providers, and care homes, NHSE intend to amend the **Network Contract DES** so that – by exception – the clinical lead role for the service may be held by a clinician other than a GP. This is provided they have appropriate experience of working with care homes and with the agreement of the practices in the primary care network, the clinical commissioning group and the relevant community provider. They are encouraging PCNs to engage personalised care roles – social prescribing link workers, health and wellbeing coaches, and care coordinators – as these roles will be able to support the COVID-19 response through embedding personalised care approaches.

**Intensive care Society** have **published** a guide on 'Understanding Intensive Care Staffing, Occupancy and Capacity' – this is evidence for any doubters of the numbers that the media publish during this COVID-19 crisis.

## NHS Appointments/Resignations/Retirements

**Rotherham Doncaster and South Humber NHS Foundation Trust (RDaSH)** have appointed **Jo McDonough**, as the Director of Strategy. Jo is currently interim Director of Strategy.

**Mid and South Essex Health and Care Partnership (covering the five clinical commissioning groups (CCGs) across mid and south Essex)** have appointed **Mark Barker** in the new role of Chief Finance Officer (CFO). Mr Barker was previously CFO for South East Essex CCGs and took up his new role in January 2021.

Northampton General Hospital NHS Foundation Trust that includes Kettering General Hospital have *appointed* Andy Callow as Group Chief Digital Information Officer and Deborah Needham as Hospital Chief Executive for Kettering General Hospital NHS Foundation Trust.

NHS Hertfordshire and Worcestershire CCGs/ICS have appointed *David Mehaffey* as Director for Integrated Care Systems.

Gov.uk have *published* the New Year Honours list which includes many NHS staff.

## Health Technology and Information Update

'Advanced' is working with researchers at The University of Manchester and AI specialist Spectra Analytics to *develop an AI capability within Docman10* that will process clinical correspondence in primary care. Together, they are creating AI tooling for its new version, Docman10X, to automatically read patient letters, and only show letters to GPs which AI thinks need further action.

Public Health England and app evaluation company ORCHA are working together to *identify digital health products capable of supporting the NHS Health Check programme*. The digital solutions will be tested in a small-scale pilot in early 2021. The organisations are calling on developers of digital health products that could support the aims of NHS Health Check to take part in the trial.

South London Health Innovation Network (HIN) has won *£200,000 funding* to roll out Coordinate My Care (CMC) to ensure health and social care professionals have access to patient's urgent care plans. The care plan is designed to share the most important, up to date clinical information about the patient, including who to contact in an emergency.

## Celtic Nations News



### 1. Celtic NHS News

#### SCOTLAND

NHS Greater Glasgow & Clyde, Glasgow City Council and Macmillan Cancer Support have *published* the first report from a five-year evaluation of Glasgow's 'Improving the Cancer Journey' programme. Improving the Cancer Journey (ICJ) was launched in 2014.

ICJ is a community-based service supporting people affected by cancer in Glasgow, Scotland. It supports people by providing structured individualised assessment and care to all local people diagnosed with cancer. This forms part of NHS England's *menu of evidence* based interventions and approaches for addressing and reducing health inequalities.

 **WALES**

Swansea University Health Board, Cardiff and Vale University Health Board and the Hywel Dda University Health Board are to receive *more than £10m* in Welsh Government funding this year and next, to install new solar energy measures and help them improve energy efficiency across their estates, resulting in carbon and financial savings.

 **NORTHERN IRELAND**

MHRA have *published* how marketing Authorisation Holders (MAHs) may seek recognition in Great Britain, of a Marketing Authorisation (MA) approved in Northern Ireland. This route – the Unfettered Access Procedure (UAP) – is available to MAs approved in Northern Ireland via European procedures (centralised, mutual recognition or decentralised procedures) or via the Northern Ireland National route. Conditions for eligibility of the UAP are that the MAH must be established in Northern Ireland, and that the product to be placed on the market in Great Britain must be a *Qualifying Northern Ireland Good*.

## Celtic Nations – NHS Appointments/ Resignations/Retirements

Scottish Government have appointed *Mairi Gougeon* as the new Minister for Public Health and Sport. She will play a key role in tackling the pandemic with responsibility for Coronavirus (COVID-19) testing across Scotland, with the Health Secretary taking the lead on the delivery of COVID-19 vaccinations.

Scottish Government has *appointed* Caroline Lamb as Chief Executive of NHS Scotland and Scottish Government Director General Health and Social Care, Dr Gregor Smith as Chief Medical Officer and Professor Amanda Croft as Chief Nursing Officer.

## URCE thoughts

*The redesign of hospitals has been prophesied many times before. Will the COVID-19 pandemic really change existing care models? I would argue that we won't use the term 'hospital' in twenty years I guess – healthcare at an office tower is ending. The hospital will become a **digitally connected community** rather than a circumscribed physical space. The care models of the future will bring care to us (homes and neighbourhoods) and these models already exist and just need to proliferate.*

*Please take care and have a safe and happy one*

**Urce**