RCGPNI response to the COVID-19 crisis

RCGPNI’s operational response to the pandemic was to close the NI office, furlough all membership support and governance staff and focus on providing policy research, information, guidance, press, campaigns, public affairs and administrative support to the Chair and DC Officers. Daily meetings were established with RCGPNI Chair, Deputy Chair, Policy and staff to update, discuss and take decisions. Weekly meetings with Executive were supported as was a one-off virtual meeting of NI Council in March to discuss the implications of COVID-19 centres. We also held a virtual meeting of NI Council on 16 June.

The RCGPNI Manager and Policy & Public Affairs Officer have engaged in daily meetings with RCGP colleagues across the nations to inform and build an accurate picture of developments and local responses and local information to the RCGP COVID-19 website. In addition, the office remains 'virtually' open with fully manned telephone support to answer any external queries and ensure that the essential maintenance of finance and governance are maintained and that members are supported regarding urgent enquiries.

Stakeholder engagement and influence

From the beginning of the crisis, RCGPNI has been at the forefront of government decision making. Within the Department of Health (DoH) we have been engaging with the Health Minister Robin Swann, the Permanent Secretary and Chief Executive of Health and Social Care Richard Pengelly, Dr Michael McBride, Chief Medical Officer (CMO) and Chris Matthews, Director of Primary Care. In addition, Dr Dorman has attended weekly meetings with Health and Social Care Board (HSCB), General Practitioners Committee (GPC) and significant stakeholders to influence decisions.

We have given evidence to the Health Committee twice on issues relating to the care and treatment of COVID-19 patients in primary care. The spread of the virus in care homes has remained high on the agenda for all involved and we were keen to ensure that the Committee had a good understanding of the implications around Advanced Care Planning, which was attracting a lot of negative press attention.

We stressed the need to move away from the emotive DNACPR during any sensitive discussion and called on the government to launch a public campaign on ‘starting the conversation’ with loved ones and end of life care. We also issued a joint press statement with Pauline Sheppard, Chief Executive of Independent Health and Care Providers highlighting the support of general practice in caring for patients in care homes.

As a member of the Primary Care Covid-19 Centres Clinical Leads group, RCGPNI was involved in the discussions to develop the centres as a primary care clinical approach towards ensuring patients with COVID-19 symptoms (hot) were separated from those with non-COVID-19 conditions (cold) in order to keep GP surgeries as free from the infection as possible. Weekly meetings have been taking place with the group which includes Dr Margaret O’Brien, HSCB Head of GMS Services and Dr Alan Stout, Chair of GPC NI. Although their establishment was difficult and controversial at times, the COVID-19 centres have proven to be hugely successful in dealing with the pandemic.
Figures available from the DoH show that general practice dealt with 23,441 COVID-19 related queries across Northern Ireland from 9 April to 6th May 2020. Of these, 3,702 Patients were triaged and referred to Primary Care COVID-19 Centres - of which 74% were provided with advice on self-management and 15% referred on to secondary care.

We have received commendation from the Health Minister, the Permanent Secretary and the Director of Primary Care on our rapid and flexible response to the pandemic.

Of note is the pro-active engagement of the Health Minister, Robin Swann, who receives regular updates from our Chair as to what is happening on the ground.

We also engaged with our colleagues in Northern Ireland Medical and Dental Training Agency (NIMDTA) regarding GP returner guidance and the General Medical Council around revalidation issues.

In addition, we have engaged strategically with other key stakeholders including BMA and HSCB on the benefit of reducing the administrative burden on GPs.

We have lobbied for stronger advice so that GPs have a clearer understanding of shielding implications for those with asthma or ME for example as we move out of the lockdown. There are implications too around Fit Notes and GPs receiving significant queries from patients who are very uncertain about how much longer they should shield.

As thoughts turn to the future of general practice we have been particularly keen to highlight the benefits of accelerating the roll out of multidisciplinary teams (MDTs), and in particular the introduction of mental health and social workers to help with the anticipated surge in mental health issues post COVID-19, in a province that has the highest level of mental health issues in the UK. The Minister for Health has now published his Mental Health Action Plan and COVID-19 Response, which takes our recommendations forward.

One of the main priorities of the College since the pandemic started (particularly in the early stages) was the inadequate supply of PPE. Secondly was the lack of testing for GPs and their families which was having a detrimental impact on their ability to return to work, if symptomatic, or to effectively deal with patients in a safe and secure environment.

Engagement was high between the DoH, RCGPNI Chair and the HSCB throughout. These issues to a large degree have now been resolved although some concerns remain over whether GPs should routinely ask asymptomatic patients to wear face coverings during face to face consultations. With the flu season a few months away, the numbers of people coming into GP practices will dramatically rise and guidance has been requested from the CMO on this matter.

RCGPNI Executive Committee members highlighted concerns early on during the outbreak with respect to the need to relax the constraints around the use of controlled drugs, which has now been implemented, and improved infection control which have been relayed to the HSCB and DoH. We have also been working closely with the Chairs of 17 Federations, the affiliation of NI Royal Medical Colleges, local Deanery and numerous individuals and members.

Our engagement with secondary care colleagues has been particularly successful throughout the pandemic and we have held regular meetings with local Royal Colleges including Surgeons (RCS), Physicians (RCP), Anaesthetists (RCoA) and Emergency Medicine (RCEM). Together we issued two joint media statements early in the pandemic calling for better collaboration to fight the virus and rapid deployment of PPE and testing of workers across all levels of the healthcare system.
RCGPNI, RCP and RCS gave joint evidence to the Health Committee in April. In addition, we have had a very positive experience working closely with secondary care colleagues in the COVID-19 centres, more notably, improved communication and a mutual respect for professions.

**Media presence**

Our media output has been prolific during the pandemic, and our links with local journalists remain very strong. During the past three months we have been highlighting the need for vital resources to support the work of general practice, in particular the need for PPE and GP testing; ensuring that frail and elderly patients are receiving the quality of care expected – the role of the GP in nursing homes and the need for care planning; highlighting the pressures that GPs have been under and the impact of COVID-19 on pharmacy. RCGPNI has given numerous live interviews on national television including the BBC and ITV; on Radio via BBC Ulster; significant on-line coverage and in the newspaper press (Belfast Telegraph and Irish News). We have been highly active on Twitter with almost 3,000 followers – an increase of 519 in the last six months (figures up from 2420 in December to 2939 May 2020) and Facebook followers rising to 780.

We have used our excellent working relationships with other Royal Colleges to reinforce our messages in the media and with local government, giving joint evidence to the Health Committee, issuing joint press statements and working closely with GPC NI to influence decision making via the local media. Recent RCGPNI generated press releases include a focus on mental health, GPs’ technology experiences during the pandemic and the value of GPs battling the virus on the frontline.

As part of a UK wide RCGP survey on technology experiences during the pandemic RCGPNI received an extended time frame to lobby members for their views. Access to basic IT hardware and software is preventing some GPs from carrying out remote consultations with their patients during the COVID-19 outbreak, according to the results of a Northern Ireland technology survey released today by the Royal College of GPs in NI. The April 2020 survey of just over 100 GPs in Northern Ireland found that 40% of GPs have not been able to practice remotely from home during the pandemic, with almost a third of these (31%) stating access to technology as the reason.

During this time, we have also had two successful campaigns on social media channels. In February we ran a GP member-focused Twitter campaign on wellbeing, highlighting the Take 5 Steps to Wellbeing approach that is endorsed by RCGP and in NI by HSCB and Public Health Agency and in April our Patient Group ran a successful campaign encouraging people to stay at home and protect the NHS.

**Member support**

As well as providing strong leadership to the members via its key stakeholder and media engagement the College has been supporting its members through the dissemination of information and guidance in a fast-changing environment, in allaying fears generated by the rapid set up of the new COVID-19 centres, acknowledging the pressure that they are working under and promoting the need for selfcare and wellbeing.

To keep our members as informed as possible we have been supporting both RCGP and locally developed GPNI (a website established by local GPs and healthcare professionals in response to the COVID-19 pandemic) with local information and speakers for webinars including a College YouTube live event on technology and a GPNI question and answer panel session on COVID-19 issues with the Chief Nursing Officer and GPCNI Chair.
Going online to build our relationships with GP members during this very stressful time has played a critical role throughout COVID-19, including weekly meetings with our Executive Committee members and engagement with NI Council members, First5s, rural representatives, our Members Forum and other stakeholders such as GP Federations.

We have also ensured that our NI Council members and sub committees of Council have been kept up to date with any changes on staffing and support available during this time. The most successful form of communication with our members at present is Dr Dorman’s weekly blog with an open rate of over 50% of the membership in NI.

Feedback on content is regular and extremely positive. Members are keen to hear the pertinent issues of the week and how the College is responding on their behalf. They also find the links to online resources very helpful such as the College COVID-19 Hub and more local information such as GPNI.

The blog also played an important role in appealing to GPs to support the COVID-19 Centres when proposed. In addition, in June 2020 RCGPNI held a series of virtual ‘roadshows’ with members to listen to their experiences of COVID-19 and to hear their thoughts on the challenges we face; what should happen in the future to better support GPs and our relationship with secondary care in the face of HSC reform.

Medical education and training

RCGPNI has been actively supporting this important area for a significant period of time. Our 2019 vision report for revitalised GP profession highlighted the need for greater medical school placements and we actively lobbied the NI Executive and the First and Deputy First Minister on a second facility in the North West. A GEMS at Magee College is now set to open in 2021. Dr Dorman is also driving home the importance of academic general practice with relevant DOH staff following a report led by Dr Paschal McKeown. The future of medical training is in flux due to the virus and at present, Dr Dorman and Vice Chair Dr Ursula Mason are engaging with medical leaders from HSCB, DOH, QUB, NIMDTA and UU on how to ensure GP placements and training can be delivered safely in a changed post covid world.