

England's GPs 'Left in the Dark' over COVID Vaccine Rollout

Exclusive: Doctors say there's no UK government plan in place; and that funding to transform surgeries into vaccine hubs is 'unrealistic'.

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Global Research, December 04, 2020

[openDemocracy](#) 3 December 2020

Region: [Europe](#)

Theme: [Science and Medicine](#)

England's GPs, who are expected to play a pivotal role in the roll out of coronavirus vaccines, say they are in the dark about how exactly they will fit into the government's plans, according to the British Medical Association (BMA).

Despite a key NHS directive on the government's mass vaccination plans being issued to England's 6,800 GP practices last month, the precise role of community doctors is now unclear.

Dr Richard Vautrey, chair of the BMA's GP committee, who last month said GPs were "exactly the right people to lead the COVID vaccination campaign", has now issued [an urgent appeal](#) to the government calling for "clarification and guidance".

OpenDemocracy has also spoken to several GPs who expressed concern about the lack of information they had received.

His appeal followed [regulatory approval](#) for the Pfizer BioNTech vaccine, the first such vaccine to be confirmed safe for use. Dr Vautrey said both NHS England and the government needed to spell out precisely the logistics of how practices will be involved in the first and subsequent phases of the vaccination programme.

According to a directive issued by the NHS at the beginning of November, GP practices – through their Primary Care Networks (PCNs), which groups practices together into administrative units – were told they would play the lead role in the distribution of vaccines.

It feels as though we are part of a massive public relations exercise, designed to make Boris Johnson's governance look as good as it can.

Although GPs are still expected to have a major role in the national vaccine roll outs, the complexity of storage and distribution of the Pfizer BioNTech vaccine means hospitals and specialist vaccine centres will instead play the lead role.

A number of GPs contacted by openDemocracy, many of them with experience of frontline medicine in both hospital and community settings, said GPs were being left "totally in the dark about what is now expected of us."

One doctor, who asked not to be named for professional reasons, warned:

“The contract issued at the beginning of November was essentially pointless and unnecessary. It was headline-grabbing and little else. GP practices were told the NHS and the government would not be repeating the mistakes of the track-and-trace debacle, which effectively sidelined experienced public health doctors and the most community-connected part of the NHS in favour of a new privately-run operation.”

He added:

“Leaving GP practices in the dark about what needs to happen and what they need to do to prepare for this unprecedented programme, risks them being set up to fail. And once again that could lead to GPs being sidelined in favour of an untested private sector operation.”

Another GP, also speaking anonymously, told openDemocracy that more information from the Department of Health and Social Care (DHSC) and the NHS was urgently needed.

“What are the nominated surgeries within each wider primary care network expected to have in place? What additional staff can be hired? What targets can be expected between now and March? These are all key questions, but at the moment we have no answers.

“It feels as though we are in a vacuum that’s part of a massive public relations exercise, designed to make Boris Johnson’s governance look as good as it can.”

Missing information

The [DES \(direct enhanced services\) contract](#), issued by the NHS in November, effectively told England’s GPs that they should begin preparations for a nationwide roll-out of approved vaccines. But detailed information on what they were preparing for was absent.

The Department of Health and the NHS were already aware of growing disquiet among England’s GPs. A [letter sent last month](#) to the Health Secretary, Matt Hancock, by the Doctors Association UK (DAUK) demanded that the additional costs of setting up vaccine programmes among GP groups needed to be met by the government. The letter also pointed out growing IT concerns, and the risks to other non-COVID patient care in GP practices.

Although the government has set aside a £170 million pot intended to be used in the transformation of surgeries and some pharmacists into specialist vaccination hubs, the DAUK letter said the government money being offered is too little and “unrealistic” for such a huge task.

This is not the kind of vaccine that could ever have been delivered by GPs.

The BMA, which described regulatory approval for the Pfizer BioNTech vaccine as an “incredible achievement”, nevertheless noted that the first approved vaccine represents “logistical challenges in terms of storage and immunising patients”.

The Pfizer BioNTech vaccine needs to be stored at minus 70 degrees centigrade, and

requires precise storage conditions not available at most PCNs.

The storage and distribution of the Pfizer BioNTech requires additional safety approval yet to be given. Only hospitals and specialist labs are expected to be able to handle the logistics of administering this vaccine.

Although subsequent vaccines expected to be approved – such as the Oxford AstraZeneca vaccine – will require less complex storage and distribution requirements, some GP practices who have indicated a willingness to participate in national roll-out plans, have told the BMA they are trying to make plans without any detail coming from the NHS or the DHSC.

A question of scale

Dr Chaand Nagpaul, BMA council chair, while welcoming news of the Pfizer BioNTech official approval, said the government and NHS England “must not underestimate the scale of the challenges” ahead.

Dr Nagpaul added: “We need to make sure staff have the resources and support in place to turn this scientific breakthrough into an operational success.”

Dr Vautrey said that following the DES at the beginning of November, practices had tried to put in place arrangements so that they were ready to deliver vaccines once they were made available.

However, openDemocracy has learned that many GP practices have warned the NHS and the DHSC that their preparations have been severely limited because they did not know exactly what they were supposed to be preparing for.

With the Pfizer vaccine coming in vials of 980 doses and needing to be stored at minus 70 degrees centigrade, with only 5 movements authorised over a 72 hour timeframe, a military-style distribution operation is needed.

Another GP practice head contacted by openDemocracy said:

“This is not the kind of vaccine that could ever have been delivered by GPs, who are by nature, small, mobile and part of a community. So the DES should have come with caveats, then planning and collaboration could have followed.

“But once again there is division and little collaboration. This has wasted time, energy and resources and delayed the best possible implementation. We need a National Health Service that is national and is ‘a health service’, not constituent parts all floundering through lack of information.”

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