Guidance on workload prioritisation during COVID-19 – pandemic level reducing

12 June 2020

In response to the COVID-19 pandemic, the BMA and RCGP prepared joint guidance to help practices across the UK prioritise clinical and non-clinical workload in general practice. The most recent version can be found [here](#).

The initial peak of the pandemic has passed in the UK, but COVID-19 is likely to remain a part of the health landscape for some time to come, with local flare-ups likely, and potential for a second national wave. This means that such blanket approaches to workload prioritisation are now less appropriate, although there remains a need to recognise the widespread impact responding to the pandemic has had on the general practice workforce and the need to maintain different ways of working for the foreseeable future. Instead, more flexible responses, which reflect the local context, are required. This responsive approach is visualised in the *COVID-19 Response Levels* flowchart.

As such, we now encourage practices, in discussion with local health and social care partners, local government and voluntary sector bodies, as capacity allows, to work towards restoring routine clinical services where this is possible. This should be done while minimising face-to-face contact, maintaining social distancing, and using Personal Protective Equipment as appropriate. It is important that all staff have had a risk assessment and appropriate mitigations are put in place, CCGs and regional NHSEI teams will have a role to support practices in this. Regulatory and NHS bodies will continue to provide updates to guidance on clinical and non-clinical administrative workload.

Going forward, localised or national flare-ups will at times necessitate the re-prioritisation of clinical and non-clinical activity. In such circumstances, clinical judgement should be used, based on the experience of recent months, in identifying which aspects of workload to de-prioritise. Previous guidance on clinical workload prioritisation may be used to inform these decisions.