

There have been a few updated [CQC Mythbusters](#) over the last couple of months, so here is an overview of those that are linked to the COVID-19 pandemic and the vaccination programme.

- Nigel's Surgery 17: Vaccine storage and fridges in GP practices
- Nigel's Surgery 100: Online and video consultations and receiving, storing and handling intimate images
- Nigel's Surgery 99: Infection prevention and control in General Practice
- Nigel's Surgery 36: Registration and treatment of asylum seekers, refugees and other migrants
- Nigel's Surgery 37: Immunisation of healthcare staff
- Nigel's Surgery 89: Immunising people with an underlying medical condition

Nigel's Surgery 17: Vaccine Storage and Fridges in GP Practices

Practices must "ensure the proper and safe use of medicines, where the service is responsible". In addition to [general information and guidance common to all COVID-19 vaccines](#) from the Specialist Pharmacy Service, this CQC [mythbuster](#) gives guidance on:

- The management of vaccines
- Vaccine fridges
- The cold chain policy
- Temperature monitoring
- Data loggers

During a CQC inspection, inspectors will expect to see evidence of maintenance of the cold chain. You will be asked to show how you follow the PHE recommendations, which includes receipt of vaccines into the Practice until administration to the patient. Inspectors will usually ask to see evidence of the log of fridge temperatures, maintenance checks and your policy for what to do if a temperature breach occurs. Inspectors may also check fridges to see if vaccines are being stored appropriately.

Nigel's surgery 100: Online and video consultations and receiving, storing and handling intimate images

The coronavirus (COVID-19) pandemic rapidly increased the use of online and video consultations in general practice to help with social distancing, reducing unnecessary travel and protecting the most vulnerable.

This [mythbuster](#) not only gives guidance on receiving, storing and handling clinical images, it also provides links to the [GMC](#), [Royal College of Nursing](#) and [NHS England](#) with guidance and key principles on how to conduct intimate examinations by video, and the use of chaperones.

It's important to remember that specific consent to receive and store a patient's photograph is necessary, irrespective of whether it's the clinician's idea or the patients. Patients should be told how their clinical records, including photographs, will be securely stored and that they won't be used for any other purpose without their express permission. These discussions and decisions must be recorded in the patient's record.

Nigel's Surgery 99: Infection prevention and control in General Practice

All Practices should have an effective Infection Prevention Control (IPC) policy which is relevant, accessible to all staff, regularly updated and includes the contact details of the local IPC specialist team.

In addition to the usual IPC issues such as healthcare waste, general clinical waste, medicines waste, sharps, hand hygiene, carpets, curtains and window blinds this [mythbuster](#) provides a link to the latest UK [COVID-19: infection prevention and control \(IPC\) guidance](#) which contains updates to the care pathways to recognise testing and exposure.

Nigel's Surgery 36: Registration and treatment of asylum seekers, refugees and other migrants

This [mythbuster](#) explains that during inspections the CQC will look at how you provide care to vulnerable people including asylum seekers, refugees and other vulnerable migrants.

Public Health England's [migrant health guide](#) states immigration checks aren't needed for overseas visitors if they are only tested, treated or vaccinated for COVID-19. This means COVID-19 vaccines offered by the NHS are freely available to everyone, regardless immigration status, and patients aren't required to prove their entitlement to free NHS treatment when accessing COVID-19 vaccination services.

Nigel's Surgery 37: Immunisation of healthcare staff

There are reports that a fifth of healthcare workers in England have still not received their first COVID-19 vaccination and the BMA urges staff to take up the vaccine, particularly those in ethnic minorities.

This [mythbuster](#) highlights the COVID-19 vaccine is an important protective measure for both staff and patients and all staff should be offered and encouraged to have any of the approved COVID-19 vaccines in line with the latest government guidance. Guidance on COVID-19 vaccines can be found in the [Green book chapter 14a](#).

Nigel's Surgery 89: Immunising people with an underlying medical condition

Public Health England (PHE) immunisation schedules for the UK population are based on Joint Committee of Vaccination and Immunisation (JCVI) recommendations, with specific recommendations for immunisation of people with an underlying medical condition.

This [mythbuster](#) describes what the CQC expects GP practices to have in place, such as:

- A reliable system for adding appropriate clinical codes to patient records
- Carrying out regular searches to make sure vaccination and boosters have been offered to relevant patients
- Following PHE guidance on ordering, storing and handling vaccinations
- Making sure nurses who are not qualified as independent prescribers are using Patient Group Directives (PGDs), and ensuring they are used appropriately

It also explains how GP practices should be supporting immunisation programmes, including the COVID-19 vaccination. Under the [Enhanced Service Specification COVID-19 vaccination programme 2020/21](#) patients not registered with a GP or those without an NHS number are still eligible to be vaccinated, and they don't need to prove their entitlement to free NHS treatment when accessing COVID-19 vaccination services.

The QCS suite of policies cover all of the above CQC mythbusters.