

26 March 2020

For general practice in Kent and Medway:

COVID-19 Update 4

COVID-19 updates and your questions

This is the fourth update provided by the Kent and Medway CCGs to give you information that can help practices cope with the unprecedented situation caused by the COVID-19 pandemic.

We have introduced a new format that we hope will make this update more manageable and useful.

NB The information in these updates is up to date when sent out but it is always important to check that this reflects the most recent guidance by following links.

New Kent and Medway CCG COVID-19 GP email address

Thank you for of those using the central COVID-19 inbox that was set up so GPs and practice staff in Kent and Medway can raise COVID-19 related questions and issues: Wkccq.qpsCovid19@nhs.net

By channelling all COVID-19 enquiries from you and your colleagues to this inbox we will lessen the amount of email traffic and provide more co-ordination, clarity and consistency of communications. We will review if this approach works and modify it if necessary.

Remember please do not share confidential patient information through this email. It is also not for clinical advice.

We acknowledge this is a difficult time for all those staff working in primary care and we would like to thank you for all of your hard work and dedication in this challenging time.

Caroline Selkirk Navin Kumta



Clinical

Referral guidance from East Kent Hospitals University NHS Foundation Trust

Owing to the current COVID-19 situation there is now immense pressure on the NHS & our usual referral systems will need to be adjusted to prioritise those most important services:

- Andrology Service Due to the worsening COVID-19 situation and under the advice of The British Fertility Society and the Association of Reproductive Clinical Scientists, we will be suspending our andrology service. This will cease from today (26th March 2020) initially for 12 weeks, however we will update you if there are any changes.
- **ERS** GPs are asked not to refer into routine ERS (outpatients) without a serious reason and to use their judgement for this. Please consider using your normal Advice and Guidance route for advice where needed.
- Routine planned operations have been cancelled and we are using the independent sector to support us with treating our cancer and urgent patients.
- 2ww referrals will continue as usual but GPs are asked to be very strict about meeting the relevant criteria.
- EKHUFT Gynae diagnostics has severe staffing difficulties due to COVID-19 and request that no more referrals are made for non-urgent Ultrasounds. Patients that are already booked will be phoned, cancelled and told to rebook if needed. New referrals will bounce back to GPs for re-referral at a later date or to alternative provider. The urgent early pregnancy US scans will continue.
- Laboratory samples, including haematology and biochemistry should only be requested where a significant treatment change may be required. Please consider minimising sending any faecal samples as these may contain active COVID-19 virus.
- All non-emergency endoscopies are suspended, and all bowel cancer screening is paused.
- Cardiac tests All requests will be triaged all non-urgent echocardiograms and ambulatory ECGs will be placed on hold. Rapid access chest pain clinics will continue for high risk patients as per triage.



Referral guidance from Maidstone and Tunbridge Wells

- GPs are asked not to refer into routine ERS (outpatients) without a serious reason and to use their judgement for this. Please consider using KINESIS for advice where needed.
- 2ww referrals will continue as usual but GPs are asked to be very strict about meeting the relevant criteria.
- GPs requested <u>not</u> to send Paediatric patients to ED, instead please contact on call registrar at Woodlands and they will advise further approach
- **Diagnostics** GPs not to refer for radiology, NOUS nor MRI without good/urgent reason.
- MTW Gynae diagnostics there are severe staffing difficulties due to COVID-19 and we request that no more referrals are made for non-urgent Ultrasounds. Patients that are already booked will be phoned, cancelled and told to re-book if needed. New referrals will bounce back to GPs for re-referral at a later date or to alternative provider. The urgent early pregnancy US scans will continue.
- MTW laboratory samples should only be requested where a significant treatment change may be required. Please consider minimising sending any faecal samples as these may contain active COVID-19 virus. DMARD monitoring should continue where possible.
- Haematology has asked for requests to be restricted to FBC. Any other tests
 will need to be agreed with the haematology lab. Patients on Warfarin many
 patients can be switched safely to a DOAC
- **Biochemistry** should only be requested where a significant treatment change may be required.
- Endoscopies of any type please defer until further notice all routine symptomatic referrals and all bowel screening is suspended.
- Cardiac tests all requests will be triaged. All non-urgent echocardiograms and ambulatory ECGs will be placed on hold. Rapid access chest pain clinics will continue for high risk patients as per triage.

Other Trusts information will follow.



Mental Health

An update from Dr Afifa Qazi, Executive Medical Director and Consultant Psychiatrist at KMPT, on Secondary Mental Health Services

Over the last few weeks, we have had an unprecedented volume of referrals to our single point of access (SPOA) and our community mental health teams (CMHT); these increased in February by 1,000 referrals. We have increased our staffing levels in the SPoA but despite this the service is struggling to cope with the extra demand. On triaging the referrals received, it is obvious that many of these are related to anxieties around the COVID-19 infections and do not necessarily require input from secondary mental health services.

In order for us to deliver care in this increasingly pressured environment to the most needy it would help us hugely if the referrals to the SPoA and CMHT's were made after giving some consideration to the symptom profile and severity, and referrals made only if it is felt that the person is displaying signs and symptoms of mental illness that cannot be managed safely without a referral to KMPT services.

We would hugely appreciate your support and understand you are under considerable pressure yourself to deliver in the face of a very demanding situation. We are in the process of setting up a telephone support line for you all and I will be in touch with the number as soon as this is up and running.

In the meantime, some people may find the guidance, advice and tips on the NHS site useful while they stay at home. Public Health England has tailored the national Every Mind Matters campaign to provide advice and tips on how to manage anxiety during the COVID-19 pandemic. It may be useful to signpost people from your websites to Every Mind Matters using resources available on their Campaign Resource Centre.

Clinical guides

Clinical guides for use during the COVID-19 pandemic are being produced by the NHS. The ones for the management of ophthalmology patients and for cancer patients are now available.



Infection Protection Control

Testing

Please note that NHS 111 services are not arranging swabbing appointments so please do not direct patients to call 111 to book appointments. Due to shortages of tests in the community their use is prioritised to investigate outbreaks, ie where several cases are connected, especially in a particular setting such as a care home.

The LMC have reinforced the urgency of the need for testing of GPs and their staff and the distribution of PPE. They have shared the letter the BMA has sent to the Prime Minister on the subject.

Primary Care Sites

Following a request made at the national level, we are looking at new ways of making ensure patients with or without COVID-19 can continue to be seen as safely as possible. To do this we have been in discussions with Primary Care Networks Clinical Directors and system partners to review how we are currently providing services.

As the numbers of people infected with corona virus grows amongst both staff and patients it is proposed that we need to put in place a larger home visiting team supported by a number of 'Hot' COVID-19 primary care sites.

The CCG on your behalf will continue to work with local council's and the wider emergency response to make sure that these services are well supported, that they are implemented safely (including PPE) and at speed.

Your PCN clinical directors are working with our local and primary care teams to agree what that would look like in each locality. Once these services have been designed by local clinicians we will be communicating with you all directly to agree your practices role in the local service.

Personal protective equipment advice

We are working in a clear command and control structure and we are implementing the advice which is circulated from our government. There have been slight differences in the advice from PHE and WHO that has been issued. NHSE & I have now issued the following statement in relation to this and the rationale for the decision:



Public Health England (PHE) and World Health Organisation (WHO) advice is well-aligned. Please note that WHO reference to a gown does not specifically refer to a fluid-resistant gown as indicated by the additional requirement for an apron in aerosol generating procedures.

	PHE	WHO
Non-aerosol generating procedures e.g. care	Fluid resistant mask	Fluid resistant mask
within 1m of patient	Gloves	Gloves
	Eye protection	Eye protection
	Apron	Gown (not specified fluid resistant)
Aerosol generating procedures (AGP)	FFP3 respirator	FFP3 respirator
	Gloves	Gloves
	Eye protection	Eye protection
	Long sleeve disposable gown (fluid resistant)	Gown plus apron unless gown fluid resistant

Local IPC Teams will be able to provide specialist advice on the rationale behind the guidance and how it can be applied safely. Contact: ek.ipc@nhs.net



Medicines

Pharmacies

You will all know that pharmacists are dispensing at a rate unheard of since the creation of the NHS. It would be extremely helpful if GPs did not say that prescriptions will be ready immediately to patients, or their representatives, as this will not be possible. Please tell patients, or their representatives, to go in after two or three hours (if very urgent) or preferably to leave to the next day.

Pharmacists are also noticing that there is an increase in prescribing for more than a 28-day supply. Please observe the NHSE's email of 5 March which clearly states, "Practices should not change their repeat prescription durations" and that 28-day prescribing is the recommendation from NHSE. Please observe this as it will help pharmacists maintain stock levels for all patients.

Like GP practices your pharmacy colleagues are dealing with a lot of understandably anxious and sometimes angry people. The actions taken above may help reduce the level of abuse pharmacy staff suffer and that would be much appreciated.



Administration

Daily NHS Primary Care Bulletin

Apologies the link provided yesterday to sign up to this bulletin did not work. Sign up here: https://www.england.nhs.uk/email-bulletins/general-practice-bulletin/

NHS Volunteers

Following an appeal by government on Tuesday night over 400,000 people have signed up to become an NHS Volunteer Responder within 24 hours. Volunteers will be able to help with tasks such as delivering medicines from pharmacies; driving patients to appointments; bringing them home from hospital and regular phone calls to check they are ok.

You may also have heard that more than 11,500 retired staff are returning to work, including 2,660 doctors and 6,147 nurses. 18,000 medical students are also joining the NHS workforce early. It is not yet clear how these staff and volunteers will be deployed but we will let you know when we hear.

Stay Home Save Lives Campaign

Resources to promote this vital campaign are now available on the <u>Campaign</u> Resource Centre. Please use on your websites and social media platforms.

Public Health England office in Horsham closed

Public Health England office in Horsham has adopted a full working from home model. There will be no staff in the office to process any paper lab reports or notification that are sent by fax or post. If they receive results via SGSS they do not require the paper lab report from you.

Everything should now be sent by email to phe.sshpu@nhs.net with anything urgent phoned through on 0344 225 3861.

Death certificates

Last week the LMC informed you about processes relating to death certificates. If you need a letter from the Kent and Medway Senior Coroners that confirms the information the LMC have put it on their website:



https://www.kentlmc.org/deathcertificationreferraltocoronercovid19informationforgpsandhospitaldoctors20thmarch20.

Vulnerable Patients.

Here is a link to the letter that the NHS has sent to a list of vulnerable patients: https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/03/atrisk-patient-letter-march-2020.pdf

COVID-19 information in other languages

The UK Government has released translated guidance for self-isolation and social distancing in the following languages: Arabic, French, Mandarin, Cantonese, Polish and Welsh. The links are here:

https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance

https://www.gov.uk/government/publications/covid-19-guidance-on-social-distancing-and-for-vulnerable-people

Doctors of the World has also produced NHS COVID-19 advice for patients in more languages, with further languages being added all the time. Currently available in Albanian, Dari, French, Pashto, Portuguese, Mandarin, Hindi, Urdu, Bengali, Arabic, Spanish, Turkish, Vietnamese, Farsi from here: https://www.doctorsoftheworld.org.uk/news/coronavirus-information/#

The Soldiers' and Sailors' Families Association (SSAFA) have also made available a number of documents in Nepalese produced by Rushmoor Council. They are available here:

http://www.kentandmedwayarmedforcesnetwork.nhs.uk/gurkhanepalese-community-resources/



Finance

Emergency Practice Funding

A set of answers to questions (FAQs) you may have are currently being developed, we expect it to be ready shortly.



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Please ensure your IT lead in practice reviews the information below so that you are using all support available. If you don't have a lead, ask a member of your PCN, or the CCG for support.

We understand that practices may wish to test out their own solutions as data controllers but please check the latest Information Governance guidance before you do this. You may also check what we are doing to support practices which may provide you with a better, faster and safer solution as we are making progress in some areas – see below.

IT Webinars

NHS run regular IT webinars. Each webinar has a short 10-15 minute presentations followed by an opportunity for questions. Subjects covered include:

- Reducing footfall in the practice
- Total Triage first model
- Advice and options for registering patients remotely
- Case study on GP Practice responding to the COVID challenge

Please register here:

COVID-19 Making the most of online services 31/03

COVID-19 Making the most of online services 02/04

If you book a ticket you will be sent the webinar details 24 hours before it starts.

Online Triage

Good progress is being made with 38 sites live in total. There are still many more practices to go. Please contact Sean sean.key1@nhs.net & andrew.gove@nhs.net for assistance.

Laptops

The 600 laptops that have been sourced with NHS England this week will now be rolled out over the next two to four weeks. We will be setting up sites for priority users to collect them from. Your practice will be contacted when they are ready for



distribution. If you are able to collect them from a distribution point it will mean they are deployed more quickly.

VPN tokens for 'provided devices'

We urgently need a check of all work supplied laptops currently in use, so we know where to deploy VPN tokens for remote working for West, DGSS, Medway and east Kent (excluding Thanet where there is up to date lists) and EKHUFT supplied laptops. NEL will be sending an email directly to practices with a short form to complete. Any questions please contact: nelcsu.pcps.calendar@nhs.net

Remote working using your own devices

We are putting all-out efforts with NEL on finding a secure solution for remote working and using your own devices.

A GP IT Sub-Group was convened today with Practice, LMC, CCG and NHS Trust leads. NEL have recommended to the CCG the use of 'Away from my Desk'. This has the potential to be combined with technology which gives virtual smart card capability to enable electronic prescribing. https://secure.awayfrommydesk.com Roll out is likely to be at least two weeks due to the national demand for the product. We will keep you updated.

This week we have reviewed **Team Viewer** with CCG IT leads, NEL and an IT Director from an acute trust. It is unclear how secure the device is and whether it meets cyber security standards and NHS Information Governance requirements. There are also practical concerns about roll out at pace. We are aware some practices are using the free trial version which allows remote working.

We have asked NEL to complete a Data Protection Impact Assessment so that practices can take an informed view should they wish to use the product. For the avoidance of doubt the CCG is not formally recommending the use of this product. https://www.teamviewer.com/en

iPlato text messaging

Iplato credits are now live. There are approx. 15 texts per patients. We will be issuing guidance on how to deploy blanket messaging to patients without using up all the credits too quickly.