

9 April 2020 For general practice in Kent and Medway

COVID-19 Update 8

This is the eighth update provided by the Kent and Medway CCGs to provide local information to help practices cope with the unprecedented situation caused by the COVID-19 pandemic.

Highlight:

A new free NHS staff wellbeing support helpline **0300 131 7000**, is now available from 7.00 am – 11.00 pm seven days a week.

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. The NHS guidance for primary care can be found here.

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



IT

IT support over bank holiday weekend

Computer issues?

The NEL Standard Desk Service is available on 03000 424242 8am-8pm Monday to Friday (including bank holidays) and 8am-1pm on Saturday (closed Sunday) for all users.

Connectivity Issues?

If there are issues with connectivity with the Health and Social Care Network (HSCN) please call 0344 573 4695 with your postcode and full site details. If you can advise if there are any specific issues such as power loss or an issue with the connection to HSCN, an application or the internet it will help us diagnose your issue. This number will be answered 24 hours a day, 7 days a week by someone who can help address your connectivity issue.

Working away from your practice

Thank you to all those practices who have completed the forms sent out with the last two updates. 941 GPs and practice staff from across Kent and Medway requested to be registered with Away from My Desk. All were authorised yesterday.

Using your own devices for remote working

If you are not one of the 941 and want to use Away From My Desk so you can work away from the practice, please make sure your practice has completed the form attached to the last two updates entitled "Kent & Medway CCG AFMD Requests" and return it to: kentandmedway@awayfrommydesk.com

To activate Away From My Desk

Once authorised you will receive a token through UPS delivery services in a bright blue envelope - please keep it safe.

You will then receive an email with clear instructions about how to use the token so you will be able to access your work computer remotely using your own device.

If you have any issues you can contact Away From My Desk helpline on 01173250060 option 1 for tech support (see below for out of hours support) or by emailing support@awayfrommydesk.com

Out of hours support: from 5pm – 8pm on weekdays and 8.30am to 8pm on Saturdays and Sundays (including this bank holiday Friday and Monday), all calls go directly to a voicemail. This asks you to leave your name, number and short



description of the problem. Voicemails will be answered on a first come, first served basis by 8pm on the day they are received (including all of Easter weekend).

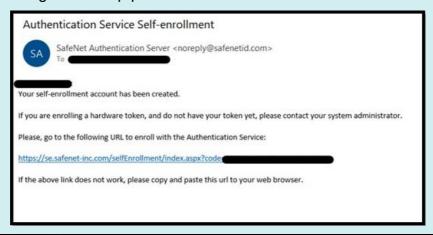
VPN tokens for work devices

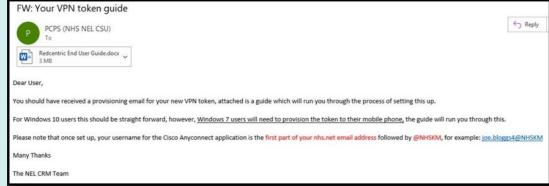
We have also had a good response to our request for an accurate record of all work issued laptops so, if necessary, we can deploy a new token (known as a VPN) to staff so that they can use the laptop away from the office. If your practice has not yet filled in the form attached to the last two updates entitled "DEVICES CHECKED FORM" please do so and return to: nelcsu.pcps.calendar@nhs.net

Activating remote access VPN tokens

Using the information provided on the form, RedCentric remote access VPN tokens are distributed to specific users of work laptops where BT tokens have expired/and or you are on a priority list.

You should receive two emails once your token has been assigned. The first will be from 'SAFENET' (see example below) and will include a link that you need to click to enable your token, the second (see example below) will be from the NEL PCPS team and includes a guide on registration and getting your VPN up and running. If you encounter any issues please reply to your email from PCPS (nelcsu.pcps.calendar@nhs.net) and a member of the team will contact you to help guide you through the setup process.







Access to GP patient record extracts through EMIS – Action Required

This applies to all EMIS Web practices, other than those in West Kent where CPMS (an alternative system to MIG) is used.

South East Coast Ambulance Service (SECAmb) have now successfully completed Medical Interoperability Gateway (MIG) access testing and are expected to go live with this service shortly. In order for GP patient record extracts to be made available to SECAmb via the MIG every EMIS Web practice will need to activate a data sharing agreement (DSA) named "Kent GPs to South East Coast Ambulance Service MIG data sharing agreement" within the EMIS Web Data Sharing Manager.

Please activate this DSA within EMIS Web as soon as possible to avoid any delay in SECAmb being able to view patient records from your practice. If you require support in activating, please contact andrew.gove@nhs.net

No action is required at practices using Vision.



Clinical

Ethical Guidance on COVID-19 and Primary Care

The Royal College of General Practitioners are <u>publishing ethical guidance</u> to help primary care staff make the challenging decisions during the COVID-19 pandemic. It seeks to answer frequently asked questions (FAQs) by members using an ethical prism. The FAQs will be updated as new guidance is added, events emerge, and new questions arise.

Guide to End of Life Care during COVID-19 pandemic

You may have already seen the joint statement by the BMA, CQC, RCGP, Care Provider Alliance which highlights the importance of a personalised approach when putting advance care plans (ACPs) in place, for older people and those who are frail or have serious pre-existing medical conditions.

All the COVID-19 evidence shows that more people than usual will become ill and may deteriorate quickly. This makes it particularly important to ensure that individuals have ACPs in place as ACPs allow for individualised decisions about whether it is appropriate to consider managing deterioration in the existing care setting, rather than suggesting conveyance to hospital.

This urgent work will require already over stretched, trained colleagues, to hold difficult and sensitive conversations, in order to create records of ACPs, which are accessible to all. Many of you may have already started this work and for those who have not, please use the coming days to do as much of this work as possible.

Here is some relevant useful guidance:

A guide to Commuity Palliative, End of Life Care and bereavement Care in Covid-19 pandemic, prepared by the RCGP and Association for Palliative Medicine March 2020.

The E- learning for End Of Life Care for All (e-ELCA) course is available to all staff:

"The key principle is that each person is an individual whose needs and preferences must be taken account of individually. By contrast blanket policies are inappropriate whether due to medical condition, disability, or age. This is particularly important in regard to 'do not attempt cardiopulmonary resuscitation' (DNACPR) orders, which should only ever be made on an individual basis and in consultation with the



individual or their family." Ruth May, Chief Nursing Officer, England and Professor Stephen Powis, National Medical Director NHS England and NHS Improvement.

Delirium and COVID-19

The British Geriatrics Society has <u>published guidance</u> due to reported difficulties in managing patients with delirium who test positive with COVID-19.

Delirium, the clinical expression of encephalopathy, is important in the context of COVID-19, because (a) delirium may be a symptom at presentation and/or during management, and (b) the behavioural changes commonly seen in delirium, particularly agitation, may make management including delivery of care and reducing the risk of cross-infection more challenging.

COVID-19 related treatment of people with learning disabilities and autism

The NHS has published specialty guidance on the management of people with learning disabilities and autism in the context of COVID-19 pandemic to which clinicians are strongly recommended to refer: https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/03/C0031_Specialty-guide_LD-and-coronavirus-v1_-24-March.pdf

Due to the need for clarity in relation to the use of the Clinical Frailty Scale (CFS), NICE have issued new guidance. The guidance makes it clear that the CFS should not be used in younger people, people with stable long-term disabilities (for example, cerebral palsy), learning disability or autism.

Referral Advice

We are aware that the major changes to referral processes are making it very difficult for general practice to operate. We are seeking a better way of giving you access to this information but in the meantime, you will find updates below from providers who have notified us about changes.

Kent & Medway Cancer Alliance guidance on suspected cancer referrals

Detailed guidance regarding suspected cancer referrals is being produced across the South East region to support primary care services during the COVID-19 response period. A brief overview of the key messages is provided below:



- The COVID-19 pandemic will have a severe impact on hospital trusts' ability to provide normal services for the assessment and treatment of patients with suspected cancer.
- National guidance states that for now, primary care activity relating to cancer referrals should continue as normally as possible.
- We would therefore recommend that GPs continue to follow the NICE Guidance (NG12) on referrals for suspected cancer to help them make shared decisions with patients about the need to refer to secondary care for investigation of potential cancer.
- If a patient chooses not to be referred during the pandemic, they and their GP can agree a sufficiently robust safety-netting process to ensure that a referral can be sent at a later date.
- If a patient is willing to be referred, the normal processes should be followed.
- While GPs are expected to continue making 2 weeks wait (2WW) rule referrals, acute trusts have been given latitude in how these referrals are handled.
- As is the case in primary care, the patient's first appointment is likely to be via telephone triage.
- We anticipate that access to some diagnostic tests will be limited but patients may be sent straight to test following triage, if capacity and safety permit.

Pre-referral guidance to GPs:

- Please make sure that the patient's mobile and home phone numbers are upto-date and included on the referral form.
- It would be incredibly helpful if, at the point of referral, GPs prepared patients for the likelihood of their initial 2WW appointment taking place over the phone with a specialist clinician.
- It is more vital than ever that a full clinical history is provided alongside the results of any pre-referral tests, where possible.
- Please make patients aware of current NHS pressures and that they may not be investigated within the usual timeframes.
- Referrers should inform patients that if they develop any symptoms of COVID-19 (including a fever and/or new persistent cough) while waiting for a face to face hospital appointment or test, they need to contact the hospital and make a different appointment at a later date, after the required period of self-isolation is over. In this scenario, patients should remain within secondary care's safety netting mechanism (i.e. the PTL or Patient Tracked List), so they can be contacted again, after their period of isolation is completed.



Suspected cancer referral pathways and processes will remain under regular review during this pandemic and any changes will be communicated to primary care colleagues as quickly as possible. Thank you for your continuing support of patients at this challenging time.

East Kent community rheumatology

Connect Health, the East Kent community rheumatology provider, are sending letters to all patients under their care this week. The letter explains whether they should be shielding, in self-isolation or maintain social distancing based on their rheumatological condition and medication. It also explains what is meant by these terms. A copy of the letter can be accessed via the following link: http://www.connecthealth.co.uk/wp-content/uploads/2020/04/Rheumatology-COVID19-guidance-East-Kent.pdf



Communications

Kent and Medway CCG COVID-19 GP email address

Thank you for continuing to use the central COVID-19 inbox to raise COVID-19 related questions and issues: Wkccg.gpsCovid19@nhs.net.

Public information resources for GP Practices and Pharmacies

Updated resources for use in various healthcare settings are now available on the Campaign Resource Centre. These include:

- Posters providing information about the symptoms of coronavirus and instructing patients that have symptoms not to enter the building.
- New 'safe distance' posters for use in healthcare settings to remind patients to keep a safe distance of 2 metres.

You may well have seen the latest phase of HM Government's Stay Home, Save Lives Coronavirus campaign "Act like you've got it", which has now launched across TV, radio, outdoor, social media and print. There are now also Stay Home resources specifically for:

- The Bank Holiday Weekend
- Social assets

These can be used by you on your websites and social media.

Hot site messaging for websites

A number of practices have requested support for wording for their websites (and iplato text messaging) to notify patients about primary care treatment centres as they come online.

A template text has been developed to support those PCNs who wish to use standard text on their websites, along with an accompanying iplato message, to direct patients to the information if felt to be needed.

As the sites are appointment-only, opening hours are not included and no active promotion of the sites/centres is required. Suggested text for websites:

"Primary Care Treatment Centre at XXXXXXXXXXXXXX



An **appointment-only** primary care treatment centre has been set up at XXXXXXXXXXX to support our local communities through the COVID-19 outbreak.

The centre is just one of the changes we, as GP practices, are making to ensure the safety of our patients and staff during the pandemic.

As many of our patients as possible will be assessed via video and telephone appointments, avoiding unnecessary risk and travel.

On the occasions when our patients with coronavirus symptoms need to see a clinician face-to-face, they will be given an appointment to come to the centre either by their GP or by 111.

The facility is not a testing centre or a walk-in service. Anyone who turns up at the site without an appointment will not be seen.

The centre will enable us to work with our colleagues in practices in the XXXXXXX Primary Care Network (PCN), which is a group of GP surgeries in the XXXXXX area working together, to split patient care across different sites.

It will mean that the normal primary care needs of patients who have COVID-19 symptoms can be met at the centre, while our other local GP practice premises aim to remain virus free.

MESSAGE FROM PCN CLINICAL	DIRECTOR OR	PRACTICE'S	LEAD GF	CAN
BE ADDED HERE:	31	,		

Suggested iplato text message: (to link to text as published on practice website)

Our xxxxxxxxxx site is to provide appointment-only services to patients with coronavirus symptoms, or in a self-isolating household. See (ADD LINK TO PRACTICE WEBSITES IN HERE) for details.



Infection Protection Control

Hot and cold sites guidance

The Guidance and Standard Operating Procedures for Kent and Medway hot and cold sites has been revised. The amendments include updates to the PPE information in Appendix 3, medicines management service specification, CCAS pathway and NHS 111 / COVID-19 Clinical Assessment Service and GP interface. The links have also been amended where national guidance has been updated.

As the sites are by appointment-only, we are not publicising their individual locations or opening times. This will hopefully help avoid large numbers of patients turning up hoping to be seen without an appointment. Also, as the go live dates differ across Kent and Medway, we don't want to raise patient expectations in areas where they don't yet have a hot site. We would be grateful for your cooperation in this matter.

COVID-19 Testing

As you may be aware, COVID-19 testing services for GPs/primary care health care workers and other NHS and social care organisations across Kent and Medway has begun. This will continue to be expanded in the days to come as service provision is ramped up.

There are agreed standard operating procedures and policies in place to cover all the three areas - east Kent, west Kent, and north Kent and Medway. This expanded access will enable staff (and household index cases) to be tested from day 2/3 of their COVID-19 like illness. This might be different from previous preliminary local guidance but now they have all been updated to standard practice in discussion with virology expertise. The updated SOPs and arrangements are in line with PHE and Her Majesty's Government's advice on self/household isolation stay at home guidance as well as healthcare worker and hospital setting guidance.

Separate guidance on how to access testing will be cascaded separately.



Medicines & Prescribing Guidance

Diabetes

Here is the <u>current guidance from NHS England</u> on the clinical management of people with diabetes during the coronavirus pandemic. The Primary Care Diabetes Society have also produced a specific <u>fact sheet</u>.

People with diabetes, in addition to the expected respiratory symptoms of COVID-19, are at increased risk of metabolic decompensation whilst trying to self-manage their diabetes at home; so it is essential to make sure that:

- patients have adequate supplies of medication
- patients have an increased supply of monitoring equipment, especially important for those who require Ketone monitoring equipment
- patients in receipt of Freestyle Libre (FLASH Glucose Monitoring) may have their 6 monthly clinical review for the device significantly delayed, during this time please continue to prescribe the device until instructed otherwise by their Diabetes Team

MHRA Statement on Chloroquine and Hydroxychloroquine

The Medicines and Healthcare products Regulatory Agency (MHRA) has issued a reminder to UK clinicians that Chloroquine and Hydroxychloroquine are not licensed to treat COVID-19 related symptoms or prevent infection. Clinical trials are ongoing to test chloroquine and hydroxychloroquine as an agent in the treatment of COVID-19 or to prevent COVID-19 infection. These clinical trials are still not complete, so no conclusions have been reached on the safety and effectiveness of this medicine to treat or prevent COVID-19. Until there is clear, definitive evidence that these treatments are safe and effective for the treatment of COVID-19, they should only this within clinical trial. Source be used for purpose а https://www.gov.uk/government/news/chloroquine-and-hydroxychloroquine-notlicensed-for-coronavirus-covid-19-treatment

MHRA: COVID-19 and Antihypertensive Medication

The MHRA has mirrored the advice from the European Society of Cardiology stating that there is no evidence from clinical or epidemiological studies that treatment with ACE-I or ARBs might worsen COVID-19 infection. More information available



https://www.gov.uk/government/news/coronavirus-covid-19-and-high-blood-pressure-medication

FSRH Clinical Advice to Support Provision of Effective Contraception during the COVID-19 Outbreak

The Faculty of Sexual & Reproductive Healthcare (FSRH) has produced guidance to help primary care clinicians support women with their contraceptive needs during the coronavirus pandemic. The guidance covers hormonal contraception including; POP, CHC, Depo Provera, IUD, IUS, implants, new contraception starters and emergency contraception. Access the full guidelines https://elearning.rcgp.org.uk/pluginfile.php/149058/mod_resource/content/1/fsrh-clinical-advice-to-support-provision-of-effective-contraception-covid.pdf.pdf

Latest NICE COVID-19 Rapid Guidelines

In response to COVID-19 the National Institute of Clinical Excellence (NICE) is producing rapid guidelines to support clinicians manage specific patient groups. The latest guidelines produced are listed and linked below:

- Rheumatological autoimmune, inflammatory and metabolic bone disorders (NG167) https://www.nice.org.uk/guidance/ng167
- Severe asthma (NG166) https://www.nice.org.uk/guidance/ng166
- Managing suspected or confirmed pneumonia in adults in the community (NG165) https://www.nice.org.uk/guidance/ng165
- Managing symptoms (including at the end of life) in the community (NG163) https://www.nice.org.uk/guidance/ng163



Finance

Good Friday and Easter Monday reimbursement rates

For Good Friday and Easter Monday, practices can seek reimbursement for additional staffing costs incurred on these days, in line with the respective rates as set out below. That includes:

- Sessional GPs: up to a maximum of £250 a session or £500 per day;
- Overtime for salaried GPs in line with the individual's contractual arrangements;
- Additional capacity from GP Partners to recognise up to two additional sessions on each of Good Friday and Easter Monday at a rate of £289 per session plus applicable employer National Insurance and pension costs;
- Overtime for non-GP practice staff in line with the individual's contractual arrangements.

The Commissioner proposes that practices achieve their contractual requirements by 'meeting the reasonable needs of their patients who are ill or believe themselves to be ill' and therefore staffs their practice to an appropriate level to achieve that.



Administration

Arrangements for IC24 cover across Kent (not Medway) by IC24 on Bank Holiday Friday and Monday

For patients who contact NHS111:

- Patients who identify themselves as calling about COVID-19 symptoms and respond accordingly to the Interactive Voice Response menu (selecting 1) will be diverted to the National COVID-19 Response Service
- Patients who are identified as COVID-19 symptomatic during the NHS-P assessment will return a COVID-19 'speak to' disposition these should be referred to the in hours GP services for the hours that they are available (the exception being East Kent who be referred to the IC24 Clinical Assessment Service (ICS))
- All other 'speak to' (eg non COVID-19) dispositions should be referred to the IC24 'speak to' service
- Any home visits arising from IC24 triage will be visited by the IC24 home visiting service
- All 'contact dispositions' should be referred to the appropriate out of hours service in advance of GP in hours (as call-back referrals for triage)
- It is noted that in hours GP services will be presented above other services—
 the instruction to NHS111 advisors will be to follow the above protocol

Should IC24 capacity be reached during the "in hours" period: The service will be escalated to RED status on the Directory of Service to allow for a period of recovery.

Arrangements for MedOCC cover on Bank Holiday Friday and Monday for Medway

MedOCC services will operate similarly over the bank holiday as on other non-bank holiday days. There is a slightly higher staff provision than on other days to account for members of the public who may not be aware that GP practices are open.

The Directory of services has been updated to reflect that practices will be open. Patients will be expected to contact their GP practices like on any other day.

Your Health

All of the NHS now has access to a range of Wellbeing Support through one point of contact:



- a free wellbeing support helpline 0300 131 7000, available from 7.00 am 11.00 pm seven days a week, providing confidential listening from trained professionals and specialist advice including coaching, bereavement care, mental health and financial help
- a 24/7 text alternative to the above helpline simply text **FRONTLINE** to 85258
- online peer to peer, team and personal resilience support, including through Silver Cloud, and free mindfulness apps including <u>Unmind</u>, <u>Headspace Sleepio</u> and <u>Daylight</u>

NHS employers have also updated their advice to help you look after your own health, safety and well-being