

16 June 2020

For general practice in Kent and Medway

COVID-19 Update 27

This update is provided by Kent and Medway CCG to provide information to help practices deal with the COVID-19 pandemic.

If you have any feedback or ideas to make the updates more useful to you please email kmccg.gpscovid19@nhs.net

Highlight:

Please make sure that one person from each practice completes the weekly sitrep here: <https://www.surveymonkey.co.uk/r/62MD2B7> by 11am on Thursday 18 June.

Weekly sitrep survey.

Many thanks for continuing to complete the weekly sitrep survey. Last week's summary is attached.

It is really encouraging to see that the majority of practices have managed to keep up-to-date with the childhood immunisation schedule and the 8 week baby checks. The few practices who have indicated they have a small delay are actively working to reduce it. It is really helpful that practices are continuing to complete the survey and provide this information so that we can contact practices that may need support in continuing to provide these services.

This week's business as usual questions relate to cervical screening and occupational health services.

Please make sure that one person from each practice completes the weekly sitrep here: <https://www.surveymonkey.co.uk/r/62MD2B7> by 11am on Thursday 18 June.

Clinical Advice & Support

Understanding Test and Trace; how can we use this system to address inequality?

Webinar: Wednesday 17 June, 5.00 – 6.00pm.

Recognising the higher rates of mortality from COVID-19 in Black, Asian and minority ethnic (BAME) populations, NHS England / NHS Improvement South East Region has established a BAME Population Mortality Reduction Board. They are holding a series of open webinars.

This week's webinar topic is "Understanding Test and Trace; how can we use this system to address inequality?" This session will look at accessing testing from a BAME perspective, what do we know about testing and what it is and what can we do differently. There will be an opportunity for discussions.

Speakers will be:

Dr Samuel Moses MRCP FRCPath, Consultant in Virology and Infection, Honorary Senior Lecturer, University of Kent | Head of Service – Microbiology | East Kent Hospitals University NHS Foundation Trust

Dr Vivek Patil, Deputy Medical Director, Sussex Community NHS Foundation Trust

Dr Alison Barnett, Regional Director and NHS Regional Director of Public Health, Public Health England, South East Region

James Williams, Director of Public Health, Medway Unitary Authority

Please use link to join: https://teams.microsoft.com/l/meetup-join/19%3ameeting_MzNjY2ZmNjUtODljZi00MDc5LTg2MGYtYWM5ZTUzZDQ5YWMx%40thread.v2/0?context=%7b%22Tid%22%3a%2203159e92-72c6-4b23-a64a-af50e790adb%22%2c%22Oid%22%3a%2252b0eae8-eff5-4057-a1af-a351acb8e7dd%22%2c%22IsBroadcastMeeting%22%3a%22true%22%7d

Children and young people's mental health

New multi-agency wellbeing hub which has been set up for CYP mental health support services www.kent.gov.uk/wellbeingfamilies

New online support for people with diabetes

New online tools for people living with diabetes are now available on the NHS to help people manage their condition during the coronavirus pandemic.

Three new services will allow people to manage their condition online, with a range of online videos and training available on each app for children and adults. [Find out more here.](#)

Supporting remote monitoring using pulse oximetry

The NHS has [published guidance](#) in its national NHS bulletin. It sets out principles to support the remote monitoring, using pulse oximetry, of patients with confirmed or possible COVID-19 in the community, focused on primary care.

There is now [clear evidence](#) that patients most at risk of poor outcomes are best identified by oxygen levels. The use of oximetry to monitor and identify 'silent hypoxia' and rapid patient deterioration at home is recommended for this group.

Infection Prevention & Control

Personal Protective Equipment (PPE) Ordering

We have now seen the list of practices in Kent and Medway who have registered to use the new PPE ordering portal, so we know that some of you are signed up to use it. Although the SitRep reveals that PPE stocks are less of an issue for practices at the moment, we all know this could change quickly.

So, we would strongly advise every practice to register now so they can use this new portal immediately. You will be able to receive one combined pack, (containing 50 IIR masks, 200 aprons and 200 pairs of gloves) per week or up to this amount of separate items. Orders arrive within 48 hours. The practice should have received an email from ppe.dedicated.supply.channel@notifications.service.gov.uk telling you how to register. If you cannot find the email or have any questions, please call the customer services number on 0800 876 6802.

Test and Trace

You should all have received a letter from NHSI/E dated 9 June and [entitled Minimising nosocomial infections](#) in the NHS. This letter is aimed at all providers of NHS services (including primary care). The important points for providers of primary care services are that:

- You prepare for potential staff absence, by reviewing your existing business continuity plans and take actions as required. This will also include ensuring arrangements are in place within a primary care network or between buddies to maintain patient access to services
- You should inform your commissioner if you consider that delivery of the full contracted service may be compromised by staff absence due to Test and Trace. The commissioner will work with you to put business continuity arrangements in place and to maintain access to services for patients. You will need to update information on patient accessible websites and the impacted NHS 111 Directory of Services profiles will need to be updated.

Ongoing and consistent implementation of national infection prevention and control guidance, including in staff areas, will be paramount in reducing healthcare associated infections.

In GP Update 24 we published principles to be followed in primary care to enable social distancing and reduce the risk of acquiring an infection. This includes all staff

adhering to social distancing (2 metres) wherever possible in non-clinical areas. Close contact between staff over prolonged periods should be minimised; for example, by avoiding congregating at central work stations, conducting handover sessions and team meetings in a setting where there is space for social distancing, moving to 'virtual' multi-disciplinary team meetings, and considering staggering staff breaks to limit the density of healthcare workers in specific areas.

Social distancing measures, where possible, are a critical part of maintaining IPC in clinical and non-clinical areas. However, where it isn't always possible to maintain social distancing, public health advice is that wearing a face covering is an appropriate precautionary measure.

Face Masks

As announced by the Secretary of State for Health and Social Care, from the 15 June, the recommendation will be that all staff in hospital wear a surgical face mask when not in PPE or in a part of the facility that is COVID-secure in line with the workplace definition set by the government. We have been told that guidance that explains how this also applies to primary care is expected to be published this week by Public Health England. In the meantime, if social distancing is not possible then it is recommended that the clinician and the patient wear a face mask.

IT

Digital Consultations

We hope the recent offer of digital remote working solutions has been helpful. We are pleased to offer digital consultations to help practices as end users understand the best way to adopt these solutions.

The consultations will be via Microsoft Teams with members of our Digital and Primary Care team.

We recognise so much new technology can be confusing, and the aim of the call is to help staff and the practice get the most out of these solutions.

We suggest its helpful for the Practice Manager to attend (or IT lead if you have one) so that we can form a relationship with you and provide future support. We would welcome a clinical lead as well.

To arrange a session at a convenient time please email eloise.williams1@nhs.net

Online Consultation Support Offer

Through a considerable amount of effort during a challenging time practices across Kent and Medway have rapidly implemented an online consultation solution (eConsult or DoctorLink) as a strategic response to the COVID-19 pandemic. Practices and patients are now experiencing a number of quantitative and qualitative benefits as a result of deploying these systems with around 40,000 online consultations being submitted by patients since the beginning of the deployment.

The CCG has now secured an additional fixed term resource to offer intensive support to Kent and Medway practices with the aim of increasing online consultation utilisation to support the Total Triage model and realise further the benefits of these digital services.

Kent and Medway CCG have asked a team from South Central West Commissioning Unit (SCW CSU) to assess current Kent and Medway online consultation utilisation data in order to offer targeted support to practices. The team will be working directly with practices in order to provide suggestions, supplier guides, training material, sample protocols and processes that will further embed the use of online consultations at Kent and Medway practices.

One of the most effective ways to promote online consultations is to follow a robust communications strategy. If patients do not know about online consultations

practices are unlikely to realise the benefits of using these systems. The role of the SCW CSU team is to suggest ideas and actions for practices to consider and implement with the aim of increasing patient utilisation of online consultation services.

If your practice would like further hands on support to enable you to use the online consultation services more effectively, please get in contact with the SCW CSU team directly using the details below. The team will be happy to work with you and address any concerns that you may have: sam.furneaux@nhs.net, girish.kana@nhs.net or Mawgan.lavender@nhs.net

Kent & Medway Medical Interoperability Gateway (MIG) Update

South East Coast Ambulance Service (SECamb) and North East London NHS Foundation Trust (NELFT) are the latest healthcare providers to go live with MIG access. This access will provide the relevant members of staff at each provider to view a live extract of GP shared care records. A significant amount of work has been completed in order to implement these new services under the current MIG data sharing agreement that all practices, other than those in west Kent, are signed up to. It is expected that both SECamb and NELFT will benefit substantially from access to the MIG service, ensuring that informed decisions are made in order support patient care.

In order for the new MIG services to work as efficiently as possible please check the EMIS Web Data Sharing Manager to ensure that all MIG data sharing agreements have been activated. Healthcare providers connected to the MIG service will not be able to retrieve any patient records from EMIS Web practices until the EMIS Web data sharing agreements have been activated. Practices using the Vision system do not need to take any action as sharing is managed centrally.

The EMIS Web MIG viewer has recently been deployed into Dartford, Medway and Swale practices that use the EMIS Web clinical system. All practices that have activated the EMIS Web MIG viewer are now able to access live Kent and Medway NHS and Social Care Partnership Trust mental health shared care records for their patients. EMIS Web practices in Medway and Swale will also be able to access the Medway Foundation Trust acute shared care record.

Please note that practices in west Kent currently share records via the MIG directly into CPMS. There is no action required by west Kent practices at present.

Any MIG support requests or queries should be sent to andrew.gove@nhs.net.

GP Request for Generic Virtual Private Network (VPN) Tokens

We have received a number of requests from practices to provide generic VPN tokens that could be used by different members of staff. IT cannot supply these due to concerns about Information Governance (for instance, it would not be possible to tell which individual was logged on at any one time for audit purposes). Instead NEL, our IT supplier, has provided assurances that they will prioritise requests and will endeavour to turn around urgent VPN requests within 2 hours as per the COVID 19 escalation process. All other VPN requests will be dealt with in accordance with the current standard Service Level Agreement.

Medicines Management

Direct Oral Anti-Coagulants (DOACs)

It has come to the attention of the medicines optimisation team that some external medicines management companies are offering to support practices with switching patients from warfarin to DOAC (Direct Oral Anti-Coagulants) treatment.

Practices are reminded that switching from warfarin to a DOAC must be done with careful consideration on an individual patient basis as not all patients are suitable for a switch to DOAC.

To keep patients safe, a switch from warfarin to a DOAC requires recent monitoring (within the last 3 months) of U&Es, LFTs, FBCs and calculation of Creatinine Clearance.

Patients switched to DOACs will require blood tests to assess renal function throughout treatment.

We advise that practices contact the K&M Medicines Optimisation Team by emailing kmccg.wkccg.medman@nhs.net for advice and support prior to signing up to any agreements with external medicines management companies.

Workforce

Psychological first aid (PFA) training

Get psychological first aid (PFA) training (provided by Public Health England) and help people with different needs cope with the emotional impact of COVID-19. Available [here at Futurelearn](#).