

Coronavirus - LMC Update June 11th 2020

Welcome to our latest update which we are now issuing fortnightly.

Care Homes and General Practice – Covid-19 Clinical Service Model and the PCN DES

The LMC has published a summary of our interpretation, commentary and references for the requests for primary care support under the Covid-19 Clinical Service Model and compares this to the care home specification PCN DES.

[Download our summary.](#)

COVID-19 Antibody Testing for Practice Staff Members

The LMC are working with the Humber Coast and Vale COVID testing team and we are providing regular updates on our [LMC Covid-19 web pages](#). The HCV Testing Team are developing a regional solution and operational processes for Antibody testing and the team are aware of primary care demand for these tests for practice staff. They have informed the LMC that operational processes and a funding route for testing and reporting are currently being developed and requested practices to pause antibody testing until these are published. We will publish an update when more news is available.

Test and Trace – Healthcare Workers

With the introduction of [Test and Trace](#), there have been questions as to how the new system will affect healthcare workers – particularly whether a staff member will have to self-isolate if, in the course of their duties, they have been in contact with someone who tests positive for the virus. We have updated our FAQs with the following:

Provided a person working in a health and social care role was correctly wearing PPE as part of their employment they will not be considered to have been in close contact with a person who has tested positive – and are therefore not required to self-isolate. (See page 10 of the [government's FAQ document](#) published 27 May 2020.)

Staff who have been notified through the [NHS England Test and Trace](#) contact tracing service that they are a contact of a confirmed case of COVID-19 in the community (outside the health or social care setting or their place of work) should inform their line manager and self-isolate for 14 days, in line with the [Test and Trace guidance](#). (See [COVID-19: management of staff and exposed patients or residents in health and social care settings](#)).

If a health or social care worker has come into close contact with a confirmed COVID-19 patient, resident or service-user or a symptomatic patient, resident or service-user suspected of having COVID-19, while not wearing PPE, or had a breach in their PPE while providing personal care to a patient, resident or service-user with

confirmed or suspected COVID-19, then the staff member should inform their line manager.

In assessing whether a health or social care worker has had a breach of PPE, a risk assessment should be undertaken in conjunction with local infection prevention and control (IPC) policy. See the guidance [COVID-19: management of staff and exposed patients or residents in health and social care settings](#) for details as to what factors should be considered in the risk assessment.

NHS Employers Risk Assessment Guidance for BAME and Other Staff

[NHS Employers has now published guidance](#) on risk assessment on how to enhance existing risk assessments, particularly for at risk and vulnerable groups within the workforce due to COVID-19. This includes staff returning to work for the NHS, and existing team members who are potentially more at risk due to their race and ethnicity, age, weight, underlying health conditions, disability, or pregnancy. NHS Employers have advised that employers take an inclusive approach and have described that the guidance is applicable, with appropriate local adaptations, in all healthcare settings. The guidance includes further resources to provide advice on supporting health and wellbeing, mitigating strategies and risk assessment discussions.

[Guidance has also been produced by the Health and Safety Executive \(HSE\)](#) that is intended to help organisations identify who is at risk of harm. It includes templates and examples that organisations can adopt, along with specific guidance. This guidance emphasises the legal obligation of employers to do a workplace assessment.

This follows on from the publication of [FOM Risk Reduction Framework for NHS staff at risk of COVID-19](#) that is now included in the further reference section of the NHS Employers guidance.

GP Guidance - Return of Schools

The Government mandated opening of schools for some year groups from 1st June 2020. The LMC would like to assist GPs in dealing with queries which may arise in connection with the return to school by providing the following links to trusted sources of information:

- The Royal College of Paediatric and Child Health has produced [advice on returning to school](#).
- Clinically extremely vulnerable children are to remain shielded and not to return to school. The list of conditions included can be found [here](#).
- Schools have received the following [advice](#) from the government to put in place where possible for pupils return.
- Specific [advice with helpful links](#) has been issued by the government for children and young people with special educational needs and disabilities.

The LMC will add updates and additional links to this guidance as they are available.

Standard Operating Procedure for General Practice in the Context of COVID-19

[The NHSE/I Standing Operation Procedure](#) for general practice has been updated. This guidance recommends total triage arrangements should continue with remote consultations used whenever possible, provides guidance on the management of patients who are shielding, advises that staff should be risk assessed to identify those at increased risk of COVID-19 and, as capacity allows, suggests practices should be focused on the

restoration of routine chronic condition management and prevention wherever possible, including vaccinations, contraception and long term condition health checks. The BMA have published a [summary of the SOP](#).

Shielded Patients – Change to Guidance

As of 31 May the [guidance to people who have been advised to shield has been changed](#) to enable them to leave their homes if they wish to.

- Shielded patients should continue to shield until at least the 30 June but from 1 June, they can spend a short period of time outdoors each day with members of their household, still maintaining 2 metre distance from others.
- If the shielded person lives alone, they can meet one other person from a different household, maintaining strict social distancing. The advice is that this be the same person each time.
- Important aspects of Government's policy and guidance remain the same. Apart from going outside once per day, a shielded person should continue to avoid all non-essential face to face contact. This means they should still not go shopping or to pharmacies.
- The support for shielded people remains in place and unchanged.

The Government has also confirmed that it will be reviewing shielding guidance alongside wider changes to social distancing, including plans to write to those on the shielding patients list with information about next steps on shielding after the next review on 15 June 2020.

Referral to Treatment Measurement and Covid-19

NHS England have issued a reminder regarding what it means for patient who decides not to proceed with medical hospital procedures during COVID-19 and whether they would be discharged back to general practice. NHSE published [Referral to treatment \(RTT\) measurement and COVID-19](#) on 24 March providing advice that: 'If a patient cancels, rearranges or postpones their appointment, this has no effect on the RTT clock, which should continue to tick. Patients should not be discharged back to their GP simply because they have cancelled or rearranged appointments; this should always be a clinical decision, based on the individual patient's best clinical interest.'

Ordering Personal Protective Equipment

All GP practices can register on the new online personal protective equipment (PPE) portal for ordering emergency PPE from a central inventory. This is to supplement (not replace) the wholesale supply route that already operates.

The Department of Health and Social Care (DHSC) developed the portal in partnership with eBay UK, NHS Supply Chain, the Army, Clipper and Royal Mail. Throughout May and June 2020, DHSC has been emailing GP practices, inviting them to register with the PPE portal. The emails should be coming from PPE Dedicated Supply Channel - ppe.dedicated.supply.channel@notifications.service.gov.uk.

Please ensure that you are regularly checking your email accounts registered with the CQC/MHRA in order to ensure that the invite is received and actioned.

Current order limits mean GP practices can order one combined pack, containing 50 IIR masks, 200 aprons and 400 gloves (200 pairs), per week or up to this amount of separate items. These limits may change over time. Orders through the portal should arrive within

48 hours if placed before 1pm. Orders placed after 1pm will be subject to an additional 24-hours.

If providers have any queries, please contact our customer services on 0800 876 6802.

Resilience and Wellbeing Webinars

There are just a very small number of places available on the last of our current run of online webinar workshops. These sessions use effective coach-approach tools to help increase resilience, reduce stress and anxiety and help to improve thinking. The workshops are open to anyone working in General Practice.

Click for full details and online booking:

[Session 6: Shift your thinking for a more resilient mindset, Tuesday 30th June , 4.15pm - 5.30pm](#)