



## Management of Exposed Healthcare Workers and Patients

NHS England has issued guidance for healthcare workers in hospital settings. The same guidance can apply to staff in a primary care setting.

- **Staff exposures:**

- ▶ Staff must wear PPE when they come into contact with a COVID-19 patient or a patient suspected of having COVID-19
- ▶ Staff should not attend work if they develop symptoms while at home (not working), and notify their line manager immediately
- ▶ Staff should put on a surgical face mask, immediately inform their line manager if symptoms develop while at work and return home
- ▶ Staff who develop symptoms should be tested for SARS-CoV-2, according to locally agreed pathways
- ▶ There may need to be an individual risk assessment based on staff circumstances, for example for those who are immunocompromised

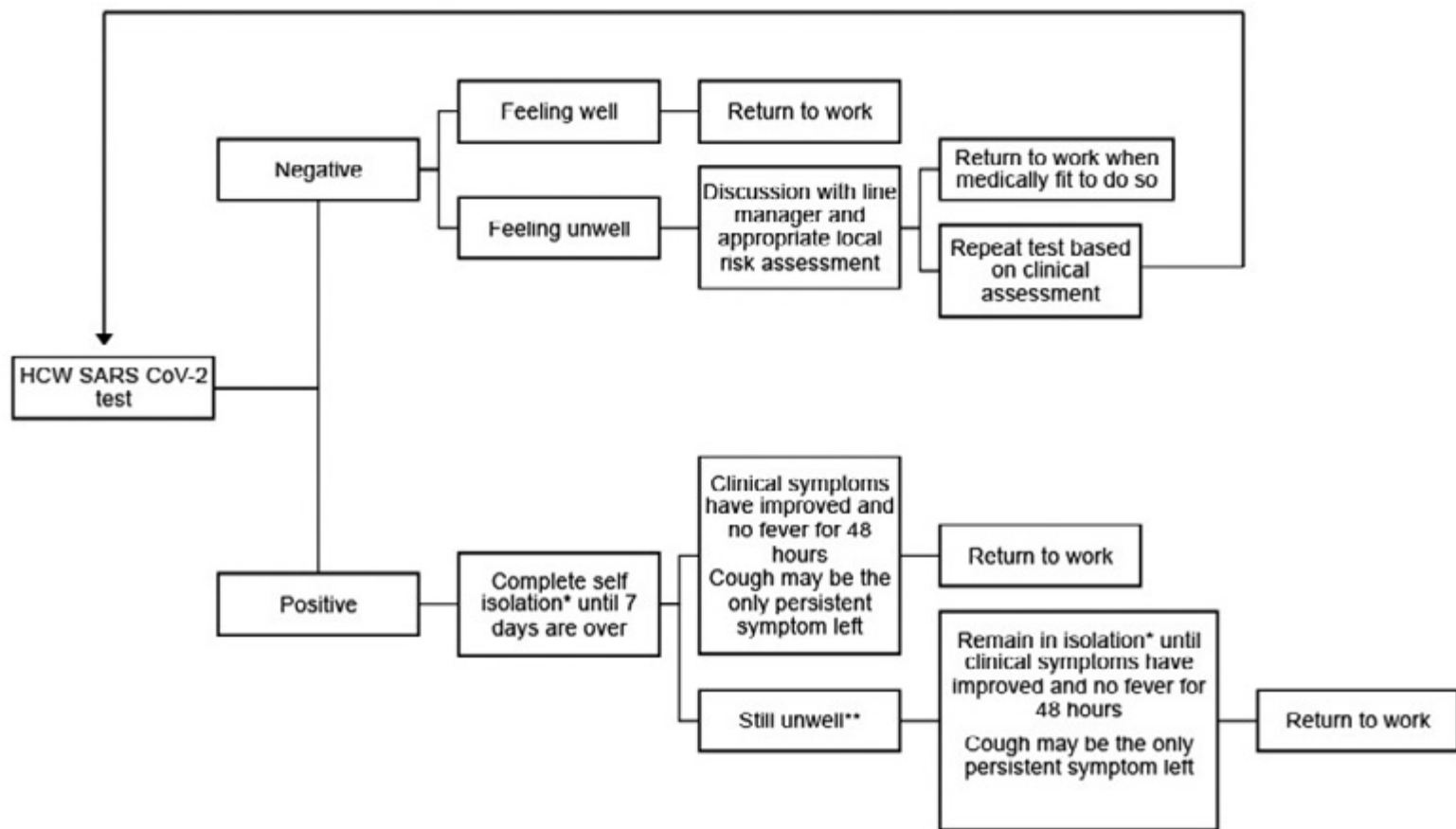
- **Staff return to work criteria:**

- ▶ Staff who test negative for SARS-CoV-2 can return to work if they are medically fit to do so, following discussion with their line manager and appropriate local risk assessment – interpret negative results with caution together with clinical assessment
- ▶ Staff who test positive for SARS-CoV-2, and symptomatic staff who have not had a test can return to work:
  - \* after 7 days from symptom onset if clinical improvement has occurred and they have been afebrile (not feverish) for 48 hours
  - \* if a cough is the only persistent symptom after 7 days (and they have been afebrile for 48 hours), they can return to work. Post-viral cough is known to persist for several weeks in some cases

At present, it is unknown how long any immunity to COVID-19 might last. If staff become unwell again, they should self-isolate and may need to be tested again.

Patient exposures – Patients who are known to have been exposed to a confirmed COVID-19 person should be advised to stay at home and be referred to the stay at home guidance if less than 14 days has elapsed since their exposure.

The following flowchart is the pathway for return to work following SARS-CoV-2 test



## Risk Assessment for Staff (vulnerable groups during COVID-19)

NHS England has already provided advice for people at higher risk from coronavirus, including older people, people with health conditions and pregnant women. However, evidence currently being reviewed by Public Health England shows that black, Asian and minority ethnic (BAME) communities are particularly affected by COVID-19.

Employers have a responsibility to keep their staff safe and we have produced a risk assessment to enable clients to take a proactive approach for all vulnerable staff including BAME staff, considering physical and mental health. The QCS Risk Assessment for Staff (vulnerable groups during COVID-19) is now published.



## Shielding Patients Update

A small number of patients will be advised to shield via a centrally generated letter and text message. Flags will be added to the GP records for these patients along with patients identified by hospital clinicians this week. The addition of flags and distribution of central letters is expected to be complete by Thursday 7 May.

Any patients locally identified as clinically extremely vulnerable prior to 28 April should now be recognised by the Government support website. Practices are reminded it is important to inform all these patients, using the standard letter previously provided as soon as possible, if not already done so. The letter confirms that the Government is currently advising people who are clinically extremely vulnerable to shield until 30 June, subject to ongoing review.



## Online Consultations

Many Practices are continuing to move towards a total triage system using telephone, online and video consultations to remotely care for patients. NHS England has produced [Advice on how to establish a remote total triage model using online consultations](#) with practical guidance for reception staff in managing workflow and top tips for online consulting. Practices are reminded that they should have an online consultation system in place by 30 April 2020.



## CQC Emergency Support Framework (ESF)

On 4 May 2020, the CQC launched its new ESF as part of their regulatory approach during the coronavirus (COVID-19) pandemic. The information gathered through this route supports the CQC's understanding of the impact of coronavirus on staff and people using services, and where they may need to follow up directly with an inspection or escalate concerns to local or national organisations. From this week, the CQC will be using this insight to report publicly on how services are managing at this time of increased pressure.

They will use this emergency approach in all health and social care settings registered with CQC during the pandemic, and for a period afterwards. However, the CQC has made it clear that the ESF is not an inspection, and they are not rating performance.



## Social Distancing When Signing and Handing Over Waste Transfer and Consignment Notes in Person

The Environment Agency has issued [guidance](#) when you do not need to sign or handover waste transfer or consignment notes in person because of coronavirus (COVID-19) restrictions. Conditions you must comply with include:

1. You must make sure the appropriate person fills in the relevant sections of the waste transfer note or consignment note for each waste transfer. You do not need to sign or get a signature in the signature box. Instead of a signature the responsible person must provide their full name and business contact details. This includes a telephone number, an email address, or a postal address
2. If you are transferring or receiving waste, you do not need to physically hand over (or receive) the waste transfer or consignment note. But you must give (or receive) all the information and data normally provided in the note. This must be done before the waste transfer or at the time of the transfer – but not later
3. For each waste transfer you must send or receive (as appropriate) the completed copy of the consignment note (without the signature). You must do this as soon as possible and not later than 10 calendar days after the waste transfer has taken place
4. You must keep a record of any waste you transfer or receive during the period you use this COVID-19 RPS. These records must include all the information and data required by the waste transfer note and consignment note. You must keep records of:
  - ▶ waste transfer notes for 2 years from the date of the transfer of the waste
  - ▶ consignment notes for 3 years from the date of the transfer of the waste

You must make them available to the Environment Agency on request.

5. You must comply with all the other requirements for transferring or consigning waste. This includes complying with the [waste duty of care](#).

If you operate under this COVID-19 regulatory position statement (RPS), but think you may no longer be able to comply with its conditions, you must tell the Environment Agency immediately by email [enquiries@environment-agency.gov.uk](mailto:enquiries@environment-agency.gov.uk).



## Priority Medicines for Palliative and End of Life Care During a Pandemic

In order to manage additional demand for end of life medicines, and ensure safe, equitable and compassionate care for patients, NHS England has published [Priority medicines for palliative and end of life care during a pandemic](#). It aims to support healthcare professionals working in palliative and end of life care, including GPs and pharmacists, across hospital, community, social care and hospice settings to work together in managing additional demand for end of life medicines due to COVID-19.



## NICE Rapid Guidelines

NICE is supporting the NHS and social care by developing a series of [rapid guidelines](#) on caring for patients with suspected and confirmed COVID-19 infection, and patients without COVID-19 infection, in several clinical areas. These include managing symptoms and complications, managing conditions that increase risk (e.g. severe asthma), and providing services during the pandemic.

NICE are also developing rapid evidence summaries which look at whether certain medicines may increase the severity or length of COVID-19 illness.



## NHS Primary Care Webinar

The next weekly webinar will take place at 5pm on Thursday 7 May 2020 and will cover topics on PPE, contracts and funding, pharmacy, and IT/remote working.