

COVID-19 Antibody Tests

The government has announced the start of a major new national antibody testing programme, with plans to provide antibody tests to NHS and care staff in England from the end of May. Clinicians will also be able to request the tests for patients in both hospital and social care settings if they think it is appropriate.

NHS Test and Trace

The government has issued guidance about the NHS test and trace service, including what happens if someone tests positive for coronavirus (COVID-19) or has had close contact with someone who has tested positive. This is how it works, in two parts:

1. For someone with symptoms of coronavirus:
 - Isolate
 - Test
 - Results
 - Share contacts
2. If they are contacted by the NHS test and trace service because they have been in close contact with someone who has tested positive for coronavirus:
 - Alert
 - Isolate
 - Test if needed

People who Develop Symptoms of Coronavirus

The guidance also gives details for people who develop symptoms of coronavirus, including:

- When to self-isolate
- How to order a test (essential workers or employers)
- If they test negative
- If they test positive
- Health and care workers
- Telling people about their test result
- Sharing information about their recent contacts
- When the NHS contacts them
- What they will be asked
- How this information is used

People who have had Close Contact with Someone who has Coronavirus

- If they are **aged 18 and over**, the NHS will contact them by text message or email but will follow up by phone if there is no response
- If they are **under 18 years** old, the NHS will contact them by phone, wherever possible, and ask for consent from the parent or guardian to continue the call

- They will all be told they must **self-isolate for 14 days** to stop the virus from spreading

Support for People who are Self-isolating

Those who need practical or social support for themselves, support for someone they care for or financial support, will be directed to their local authority helpline.

Self-isolation if with Symptoms – Definition

The definition of 'Self-isolation if you have symptoms' is that the individual with symptoms and all household members **must remain at home**. Do not go outside the home for any reason, i.e. to work, school, or public areas and do not use public transport or taxis. The guidance for households with possible coronavirus infection page has more information on self-isolation.

NHS Coronavirus App

The NHS coronavirus app is still in development and being trialled and, when rolled out nationally, it will supplement the other forms of contact tracing.

Working Safely During Coronavirus (COVID-19)

The government has updated its guidance to help employers, employees and the self-employed understand how to work safely during the coronavirus pandemic. Included in the guidance are the 5 steps to working safely, with practical actions for businesses to take based on 5 main steps as follows:

1. Carry out a COVID-19 risk assessment
2. Develop cleaning, handwashing and hygiene procedures
3. Help people to work from home
4. Maintain 2m social distancing, where possible
5. Where people cannot be 2m apart, manage transmission risk

Addressing the Impact of COVID-19 on BAME Staff in the NHS

There is evidence of disproportionate mortality and morbidity amongst black, Asian and minority ethnic (BAME) people, including NHS staff, who have contracted COVID-19. The key areas of focus for NHS England and NHS Improvement are:

- Protection of staff – risk assessment
- Engagement with staff and staff networks – hear and learn from people's lived experiences
- Representation in decision making – Workforce Race Equality Standard (WRES)
- Rehabilitation and recovery – wellbeing support
- Supporting people – access to a range of support
- Communications and media – short videos are available

Direct Booking into General Practice from NHS 111 and CCAS via GP Connect

Following a Digital Primary Care webinar this week, here are some key points:

National Policy

- Patients who contact the Practice directly must be managed by the Practice
- Patients who go through NHS 111 will initially be triaged into 1 of 3 groups:
 1. Cohort 1 – severe symptoms
 2. Cohort 2 – significant symptoms – transferred to CCAS
 3. Cohort 3 – mild symptoms (about 80% of patients)
- About 75% of patients are being handled by CCAS and 25% are being booked back into General Practice by GP Connect – into a nominal appt slot which must be regularly reviewed and prioritised by the GP Practice

NHS 111 Direct Booking

Practices must make available **1 appt per 500** registered patients per day available for direct booking by NHS 111, to make sufficient appts available. This will remain in place until 30 June when it will be reviewed.

What Practices Need to do

- The **1:500** replaces the original **1:3000** NHS directly bookable appts
- Both COVID-19 and non-COVID-19 clinically assessed referrals will be added to the nominal prioritisation list
- Practices need to make enough appointments available to meet demand and initially, this may be less than 1:500
Regularly review and adjust the number of appts made available
- Local variations can be agreed such as using Hubs

Triage List Options

1. Preferred option – the creation of a new 'NHS 111/CCAS prioritisation list' which must be regularly checked, and patients added to it whether they are identified as COVID-19 or not, triaged and seen within an appropriate timescale
2. Alternative option – a single appointment list which could be used by small or single-handed practices, for whom it would be difficult to maintain two lists, but these referrals must be assessed when they arrive and flagged to highlight them

Communication to Patients

Patients must be advised that the Practice will contact them by phone or text, they cannot be given an appointment and the appointment is not a face to face appointment.

GP Connect

GP Connect for Appointment Management and Access Record functionality has been enabled centrally to support the NHS Response to COVID-19. Practices and Hubs will need to configure their appts to be shared with NHS 111 and CCAS.

To ensure that appts will be available to national and local NHS 111 and CCAS, the Organisation Data Service (ODS) codes of all NHS 111 organisations should be added to local booking rules and organisations groups on the clinical system.

CCAS ODS code is **RYEA3**

More information, including the ODS codes, is available on the [NHS Digital](#) website and the [ODS Portal](#).

The picture is evolving and numbers with COVID-19 are falling but there is a potential for a second wave, so practices should still progress to be prepared for existing COVID-19 patients and increase in volume if there is a second wave.

Other Points

- EPS will be used from next week
- Practices can utilise unused CCAS appointments if they are not booked within an hour of the appt time
- Final draft guidance is available on FutureNHS in Digital Primary Care
- There is currently no further update on what happens after 1 July
- Because it is for direct patient care, redirecting booking and access to records by CCAS is covered under the GDPR Regulations
- The NHS 111 slots are fixed appt slots and are the prioritisation slots. They currently need to be made available for a wider NHS 111 service and CCAS
- Smartcards have been sent out to over half of CCAS staff, with more smartcards being distributed this week

Queries can be emailed to gpconnect@nhs.net