**Wakefield CCG COVID-19 Framework (General Practice 2020)**

**COVID-19 Framework (General Practice 2020) (Adapted from the Wakefield CCG COVID-19 Framework (General Practice 2020)**

**Background**This framework should be read in conjunction with the most up to date version of the Standard Operating Procedre (SOP) ‘general practice in the context of coronavirus (COVID-19) [Managing coronavirus covid-19 in general practice-sop](https://www.england.nhs.uk/coronavirus/publication/managing-coronavirus-covid-19-in-general-practice-sop/)

**Purpose**

The purpose of the COVID-19 Framework is to ensure that due consideration has been given to patient and staff safety as general practices prepare to restore routine work with provision to undertake consultations with patients both with COVID-19 and with symptoms of COVID-19, in addition to those who are asymptomatic of COVID-19 within each practice site. This checklist provides opportunity for the proposed operating models to be evaluated against adherence to guidance, including actions to mitigate risks.

The framework will allow General Practice and the Clinical Commissioning Group to manage and respond to emerging risks to patient and staff safety.

**COVID -19 Framework Checklist**

If desired, practices can complete the checklist together, to provide assurance that they have systems and processes in place regarding face to face patient assessments. Where indicated and when the answer is no, additional information will be added to the comments column. Actions taken in response to the questions in the framework or additional actions required will be added to the summary at the end of the document. The outcome of this framework belongs to the individual practice and the CCG will endeavour to support the practice to ensure safe systems are in place for both patients and staff.

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| Name of Practice:    Date completed: |  |  | Names of persons completing the assessment: |
| Question | Yes | No | Comments |
| 1. All patients are being triaged remotely? |  |  |  |
| 1. Both online and remote consultation systems are in place and being used to support total triage, with reasonable adjustments being made for specific groups when necessary (e.g. elderly, hard of hearing, learning disability)   [Total triage blueprint April 2020](https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/03/C0098-Total-triage-blueprint-April-2020-v2.pdf) |  |  |  |
| 1. A video consultation solution is available for all clinicians and offered to patients when appropriate? If not what are the barriers preventing this? (e.g. IT equipment, internet issues) |  |  |  |
| 1. Where possible, clinical and non-clinical staff can be enabled to work remotely?   If no, please advise of any barriers to staff working remotely in the comments column.  [Remote working in primary care gp practices during covid-19](https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/03/C0165-remote-working-in-primary-care-gp-practices-during-covid-19-v1.2.pdf) |  |  |  |
| 1. The practice can safely separate different patient cohorts: patients with symptoms of COVID-19 and the wider population, including the pathway for shielded patients? (Point 5 in appendix B of: [NHS update on shielding June 2020](https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/06/C0583-nhs-update-on-shielding-june-2020.pdf) )   Please describe this process in the comments column outlining any areas of concern. |  |  |  |
| 1. Staff can be allocated to cohorts of patients with symptoms of COVID-19 or other patient groups, where possible?   Please describe this process in the comments column. |  |  |  |
| 1. All staff are risk assessed to identify those at increased risk of contracting the virus and those at increased risk of complications from COVID-19, as per current guidance (BAME staff and those with underlying health conditions, and plans are in place to mitigate this?   [NHS employers.org - Covid19 health safety and wellbeing/risk assessments for staff](https://www.nhsemployers.org/covid19/health-safety-and-wellbeing/risk-assessments-for-staff) |  |  |  |
| 1. Staff are trained and competent in current relevant infection prevention and control (IPC) guidance including donning and doffing of PPE? E.g. hand washing, bare below the elbows, cleaning of rooms, disposal of clinical waste   [Coronavirus infection prevention and control](https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control) |  |  |  |
| 1. Consultation rooms comply with IPC guidance (e.g. no   paperwork or fabric fixtures in the consultation room) and cleaning/waste disposal is undertaken after each COVID-19 patient as per guidance? |  |  |  |
| 1. The practice has a regular system of cleaning clinical and non-clinical areas either prior to seeing patients or following completion of the day’s work?   <https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control/reducing-the-risk-of-transmission-of-covid-19-in-the-hospital-setting> |  |  |  |
| 1. Hand sanitizer is available for patient use throughout their journey within the practice? |  |  |  |
| 1. There is a system in place for patients without symptoms of COVID-19 booked for face-to-face contact to inform the practice prior to their appointment if they develop symptoms, and patients are asked again before face to face consultation? |  |  |  |
| 1. A system is in place to enable staff and patients to safely undertake social distancing (a minimum of 2 metres) within all areas of the practice including waiting areas/ communal rooms? |  |  |  |
| 1. Where staff need to have face to face contact with patients they are supplied with the relevant PPE as per PHE Guidance? |  |  |  |
| 1. Practices have systems and processes in place to eliminate the need for COVID- 19 patients to access pharmacy directly? |  |  |  |
| 1. Systems are in place to minimise the need to print out paper prescriptions? The practice is aiming for 100% electronic prescribing? |  |  |  |
| 1. There is a system in place for repeat prescriptions that does not involve patients visiting the practice?   Please describe this in the comments column. |  |  |  |
| 1. Practices have an agreed patient access pathway including appropriate communication/ signage for suspected or confirmed COVID-19 patients? |  |  |  |
| 1. The practice and all staff are aware of what to do if someone develops COVID-19 symptoms and are directing them to use test and trace process (both staff members and patients)?   [NHS test and trace how it works](https://www.gov.uk/guidance/nhs-test-and-trace-how-it-works) |  |  |  |
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| 1. The practice has put systems in place to support social distancing within the practice?? |  |  |  |
| 1. Practices have reviewed their existing business continuity plans to prepare for potential staff absences and taken relevant actions, including a PCN buddy system? |  |  |  |
| 1. Please describe, in the comments column, how the practice is communicating all COVID-19 related information to all staff within the practice |  |  |  |
| 1. The practice updates the SitRep and sends to the CCG on a daily basis? |  |  |  |
| 1. The practice has reviewed the latest case definition for COVID-19 and has updated communication to all staff?   [Coronavirus initial investigation of possible cases/investigation and initial clinical management of possible cases of coronavirus](https://www.gov.uk/government/publications/wuhan-novel-coronavirus-initial-investigation-of-possible-cases/investigation-and-initial-clinical-management-of-possible-cases-of-wuhan-novel-coronavirus-wn-cov-infection) |  |  |  |
| 1. The practice has reviewed the latest case definition for COVID-19 and has updated relevant communication to patients? (This includes telephone/ website)   Please describe the methods of communication being used in the comments column. |  |  |  |
| 1. The practice has clear signs/ guidance for patients to follow throughout the appointment pathway when attending a face to face consultation, to ensure adherence to IPC measures and social distancing? |  |  |  |
| 1. A risk assessment has been carried out by the practice taking into consideration the move to see C-19/ potential C-19 patients? |  |  |  |
| **End of Questionnaire:** |  |  | **Record comments from the member of the practice completing the questionnaire below:** |
| **The person completing this questionnaire should record any actions suggested/taken during the conversation:** |  |  |  |
| Actions that remain outstanding following the conversation should be listed below, and a copy forwarded to the relevant practice manager. |  |  |  |
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**Action Plan**

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| **Identified issues** | **Actions to be undertaken to resolve** | **By who** | **By When** | **Progress** |
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