Appointment risk assessments and temporary standard operating procedures due to coronavirus guidance 18.3.20

Appointment type	Action	Rationale/comments	Clinician/ outstanding actions
Asthma reviews	All telephone/video appointments, patients then followed up at clinicians discretion	Reduce F2F contact	
	No peakflow monitoring in the surgery – to PEF monitor at home as clinically indicated Consider video call if inhaler technique is a concern	Reduce risk of virus spread by airborne droplets	
	All patients advised to check website page	Consider asking patients to purchase peakflow monitor or if free prescriptions then prescribe	
Blood pressure monitor	Consider sending instructions for patient to fit them selves	Reduce F2F contact	Review cleaning protocol of holster – ##
Blood pressure reviews	All telephone appointments, patients then followed up at clinicians discretion	Reduce F2F contact All patients have been sent a message to consider how to monitor BP at home	
Blood tests	Doors to be kept open to improve air flow Appointments staggered No physical diabetic foot checks. Risk assessment documented. Any reported concerns re skin changes then urgent wound care appointment is made – all patients to be booked in for six month A/R with foot check	Reduce F2F contact Manage risk - all low risk foot checks will still be completed July onwards	Phlebotomy template to be altered to document risk assessment ## Done 18.3.20
B12	Additional blocked appointments Doors to be kept open to improve air flow if possible Increase number of patients offered to be taught how to self-administer B12	To reduce patients waiting Reduce F2F contact	####to teach patients
Childrens immunisations	Parents bringing children for dose 1, 1 year and preschool immunisations will have a telephone appointment to discuss immunisation education Children will be booked in for administration of immunisation,	Reduce F2F contact Maintain immunisations schedules to reduce risk of preventable communicable diseases	###to call parents Admin time added every Tuesday for ## to call ###18.3.20

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	no additional siblings, one parent only, red book dated by parent, immunisation history can be printed at a future date		
COPD reviews	All telephone/video appointments, patients then followed up at clinicians discretion Consider video call if inhaler technique is a concern All patients advised to check website page All spirometry contraindicated	Reduce F2F contact Reduce risk of virus spread by airborne droplets	
D DImer	Procedure undertaken by attending clinician not (Nursing and Allied Health professionals) NAHPs	Reduce number of clinicans in F2F contact	On the day clinical team not NAHPs Agreed on 18.3.20
Diabetes annual reviews	All telephone/video appointments, patients then followed up at clinicians discretion Consider requirements for ketone sticks, CBG monitors, hypo kits All patients advised to check website page	Reduce F2F contact	
Dopplers	Suspended	High risk procedure due to extended F2F contact of 30 + mins	### to advise clinical team Done 18.3.20
Ear syringing	suspended	High risk procedure due to extended F2F contact of 20 + mins	### to advise clinical team Done 18.3.20
Dressings	Extended appointment times to allow cleaning of room Patients to be taught to self-manage and redress wounds wherever possible Use video consultations and photos to support patients	High risk procedure due to extended F2F contact so avoid wherever possible	### to alter clinics with ## Done 18.3.20 ## and ##now working with ##
	Complex wounds to have HCA and nurse in attendance	To educate team should anyone be isolated due to PHE guidance then second clinician aware of dressing plans	on Tuesday and Wednesday PM for

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		Reduce appointment duration	training and reduce pt time in building
ECGs	Only urgent ECGS, may need to be completed by attending clinician not NAHPs	Reduce number of clinicans in F2F contact	
INR	Doors to be kept open to improve air flow Appointments staggered Consider keeping frail patients in their cars for testing rather than bring into the building	Reduce attendance in building for vulnerable patients	## testing new process ##appts slots altered to facilitate
NPT	As for al blood tests		
Suture removal	See in dressing clinic to allow cleaning of room after	High risk procedure due to close F2F contact	
Smears	Suspend BP checks Difficult smears with normal risk reappoint rather than repeat attempts	To reduce F2F contact	## to alter clinics with ## Done 18.3.20
Travel vaccines	Telephone appointment and book in for vaccination dependent on discussion	To reduce F2F contact	## to advise currently booked patients Done 18.3.20 ##

Additional 10 minutes set up time for room cleaning and brief planning huddle re any updates

NAHPs team will not see anyone with suspected respiratory infections to reduce risk to staff and maintain essential work

TBC – staff at high risk will do telephone appointments only

and ## testing video accuRx