

# **Agenda Item 7**

## **Covid-19 Shielding**



### Falkirk IJB Clinical and Care Governance Committee

26 June 2020

Covid-19 Shielding

For Noting

#### 1. Executive Summary

- 1.1 The Scottish Government initiated shielding arrangements for people at the highest risk of harm from Covid-19, as a result of their specific pre-existing medical conditions, in the last week of March 2020.
- 1.2 NHS Boards were expected to put in place a structure and local arrangements for ensuring that the correct patients were identified for shielding and that patients were communicated with to discuss their clinical needs and the reasons for shielding.
- 1.3 Local Authorities were expected to establish care for people arrangements in order to support people who are shielding to access support, for example the delivery of food and prescriptions.

#### 2. Recommendations

The Clinical and Care Governance Committee is asked to:

- 2.1 Note the actions taken by NHS Forth Valley and Falkirk Council to support people who are shielding and their families
- 2.2 Note that at the time of writing, shielding remains in place until 18 June 2020.

#### 3. Background

- 3.1 Scientific evidence indicated that the impact of Covid-19 would be greatest for certain vulnerable groups, who were at significantly increased risk of suffering severe symptoms requiring hospital admission and intensive care support and had a heightened risk of mortality.
- 3.2 The Scottish Government and Health Protection Scotland identified six groups of highest risk patients for shielding, and this was extended to seven during April, with additional conditions added to each category during April and early May. The seven categories are:

**Group 1** - Solid organ transplant recipients

**Group 2** - People with specific cancers

- People with cancer who are undergoing active chemotherapy or radical radiotherapy for lung cancer
- People with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment
- People having immunotherapy or other continuing antibody treatments for cancer
- People having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors
- People who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs.

**Group 3** - People with severe respiratory conditions including all cystic fibrosis, severe asthma (including severe asthma on biologics) and severe COPD, those on long-term home Oxygen for chronic respiratory conditions, and people with non CF bronchiectasis (there is guidance on severity), and pulmonary hypertension.

**Group 4** - People with rare diseases, including all forms of Interstitial Lung Disease/Sarcoidosis, and inborn errors of metabolism that significantly increase the risk of infections (such as SCID, homozygous sickle cell).

**Group 5** - People on immunosuppression therapies sufficient to significantly increase the risk of infection.

**Group 6** - People who are pregnant with significant heart disease, congenital or acquired.

**Group 7** - People who, in clinical judgement, need to be shielded as they are clinically at 'highest risk' of severe morbidity or mortality from Covid-19, but are not included in the above six groups.

- 3.3 Initially, people who are shielding were advised by the Scottish Government to shield until 18 June. On 8 June, the Scottish Government announced that shielding would be extended until at least the end of July. Letters have been issued by Scottish Governments to patients who are shielding, advising them of this extension.
- 3.4 The shielding extension letter sent to patients also indicated that subject to a further announcement on 18 June, assuming infection transmission rates remain low, people who are shielding will be able to exercise outdoors.

- 3.5 Once confirmed, the Scottish Government advice will be that there is no limit on the amount of times or length of time a person who is shielding can go out to exercise. However they should maintain strict physical distancing, at all times, even if they live with the person they are out with and should not meet with anyone they do not live with and maintain strict hand hygiene on returning home.

## 4. Forth Valley Shielding Arrangements

- 4.1 NHS Forth Valley established a multi-disciplinary multi-agency Shielding Working Group, chaired on behalf of the Medical Director by Dr Peter Murdoch.

The Working Group has the following membership:

<b>Name</b>	<b>Role</b>	<b>Organisation</b>
Dr Peter Murdoch (Chair)	Depute to Medical Director	NHS Forth Valley
Dr Stuart Cumming	Associate Medical Director / GP Leader	NHS Forth Valley
Janet Binnie	EHealth	NHS Forth Valley
Pete Leonard	Strategic Director	Clackmannanshire Council
Natalie Moore-Young	Strategy & Performance Manager	Falkirk Council
Janette Fraser	Head of Planning	NHS Forth Valley
Iain Watt	Prescribing Adviser	NHS Forth Valley
Stuart Oliver	Senior Manager	Stirling Council
Dr Colin Morton	Consultant Dermatologist	NHS Forth Valley
Vivien Meldrum	Head of Information Services	NHS Forth Valley
Susan Bishop	Head of Efficiency, Improvement & Innovation	NHS Forth Valley
Deborah Lynch	Project Manager	NHS Forth Valley
Suzanne Thomson	Senior Service Manager	Falkirk HSCP

- 4.2 In addition, a leadership group for Shielding was established comprising:
- Dr Peter Murdoch
  - Dr Stuart Cumming
  - Dr Colin Morton
  - Susan Bishop
  - Janette Fraser.
- 4.3 The working group met daily initially via MS Teams, given the intensity of the response required by NHS Forth Valley and the three Local Authorities, with the frequency of meetings reduced as the objectives of the group were

achieved. A comprehensive action plan was used to record and track the group's work plan and frequent communication was made with GPs, hospital specialists and other stakeholders in order to ensure that local teams were kept abreast of the guidance and what was required of them, in response the bulletins issued daily by Scottish Government.

4.4 Meetings have now been stood down, however the working group continues to communicate by email and will be stood up should this be necessary.

4.5 A summary of the key Shielding actions undertaken is given below:

- Centrally produced shielding lists prepared by Public Health Scotland, reviewed and checked by Forth Valley GP practices for accuracy
- GP practices added patients who met the criteria for shielding but had not been identified on the centrally produced lists
- Hospital specialists identified additional patients who met the criteria for shielding
- NHS Forth Valley submitted additional patients identified by GPs and hospital specialists to Public Health Scotland
- Scottish Government guidance and information received on a daily basis. This was reviewed and appropriate guidance issued to GPs and specialists.
- Local guidance was prepared and issued widely.
- A local process was put in place to answer any queries from GPs and hospital clinicians regarding the criteria or patients' suitability for shielding and to support decision making about complex cases.
- GP practices contacted all patients who met the criteria for shielding to discuss the reasons for shielding and identify health needs to be met e.g. hospital visits and chronic condition monitoring.
- Information Services Team in NHS FV linked data batches from Public Health Scotland to the internal Trak patient administration system in order to provide telephone numbers for patients, which were not included in the national dataset.
- Falkirk Council linked data batches of people with the Social Work Information System to identify people who may be known to services
- Local Authorities established Care for People services, known as the Support for People team in Falkirk, which provide access to food boxes, supermarket delivery prioritisation and delivery of prescriptions.
- Whilst the letters sent centrally to all patients identified for shielding provided an SMS service to access information and food box deliveries and have a contact number which gives access to the Local Authority Care for People services, the Local Authorities in Forth Valley have proactively contacted the shielding patients by telephone and letter, to offer support.
- Cross boundary patients either living in Forth Valley with a GP in another Board area or living in one of the 7 Local Authorities on the boundaries of Forth Valley but with a Forth Valley GP were identified as at risk of being missed from Health Board lists. The working group liaised with Public Health Scotland to ensure that patients were correctly assigned to their GP practice and to the Local Authority for their address.

- 4.6 To date, 12 batches of shielding patient information have been sent to NHS Boards and Local Authorities, with the most recent batch received on 15 June. In total, around 11,800 people in Forth Valley have been advised to shielding, with around 6,700 in Falkirk.
- 4.7 The Support for People Team in Falkirk Council has made contact with the majority of the shielding list patients, with around 50 people not responding to phone calls and letters. A further attempt to contact this small outstanding group is to be made via GP practices. Around 80% of shielding patients did not require any support from the service.
- 4.8 The Shielding Group has had to respond to what has been a complex and dynamic process, with frequent changes in the guidance issued nationally and in the process for identifying and confirming the patients. Throughout this process, the Forth Valley Shielding Group has been proactive and has ensured that the local implementation arrangements have been well-coordinated and timely.
- 4.9 We have provided feedback to the Scottish Government regarding the challenges encountered and this learning will form part of a national review of Covid-19 shielding arrangements. This has included the following:
- The letters sent to patients are detailed and lengthy, which has raised concerns about the ability of people with low literacy or cognitive challenges to comprehend the information presented
  - The patient letters assume access to a mobile phone in order to register for the SMS service
  - As a result of the guidance being updated frequently, the addition of new criteria and delays in updating the GP practice systems with shielding information, patients received their letters over a protracted time period from mid-April onwards and with the most recent letters sent out on 1 June. Given shielding was expected to commence with lock down from 23 March and end on 18 June, this has meant that some patients have been advised to shield towards the end of this period.
  - The significant time commitment contributed by GP practices to review, check and amend the centrally generated lists, identify additional patients and contact patients during a period in which practices were dealing with the impact of Covid-19 on their patients and staff and participating in the newly established triage hub and assessment centres.

## 5. Conclusions

- 5.1 The response to Covid-19 shielding requirements and implementation of arrangements in Forth Valley is an excellent example of partnership collaboration across social care, acute care and primary care. The local Shielding Group coordinated a comprehensive and timely response in the

context of a rapidly changing environment, with complex and conflicting guidance.

### **Resource Implications**

Mobilisation Plans prepared by the Partner organisations should capture any additional costs associated with Covid-19 shielding, and identify this to Scottish Government.

### **Impact on IJB Outcomes and Priorities**

The approach was an example of positive collaboration by the partners to implement service arrangements urgently and in line with national policy, but tailored to local circumstances.

### **Legal & Risk Implications**

It is not anticipated that there will be any legal issues or risks.

### **Consultation**

The pace required to deliver the arrangements for shielding patients in the context of a global pandemic meant that consultation was not appropriate. However, the national debrief process will take into account the views and experience of service users and agencies.

### **Equalities Assessment**

This is not required for the purposes of the report.

## **6. Report Author**

Janette Fraser, Head of Planning  
Andrew Murray, Medical Director

## **7. List of Background Papers**

Scottish Government guidance on Covid-19 shielding, current versions available on the SG and PHS websites

## **8. Appendices**

N/A