25\textsuperscript{th} March 2020

Issued by email to GP Practices

Dear Colleague,

CARING FOR PEOPLE AT HIGHEST RISK DURING COVID-19 INCIDENT

We are writing to update you on the latest advice and asking you to immediately prioritise the sending of the attached letter to all your patients who are considered to be at highest risk of severe illness that would require hospitalisation from coronavirus (COVID-19). The attached patient letter should be sent to these patients asking them to stay at home at all times and avoid any face-to-face contact for at least twelve weeks.

This letter should be sent to patients who fall into one of the following groups:

List of diseases and conditions considered to be very high risk

1. Solid organ transplant recipients
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.
3. People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe COPD
4. People with rare diseases and inborn errors of metabolism that significantly increase the risk of infections (such as SCID, homozygous sickle cell disease)
5. People on immunosuppression therapies sufficient to significantly increase risk of infection
6. People who are pregnant with significant heart disease, congenital or acquired

The attached search may not be sophisticated enough to identify all categories of patients who should be included in the vulnerable groups list. We appreciate this is a
complex task requiring difficult judgements, and we ask for your help, as the GP
central to the care of these patients, in achieving this.

If you choose to identify additional individuals you consider to be at highest risk of
severe outcomes, that you proactively contact this group of patients to discuss your
recommendation with them.

We also suggest that anybody with a terminal diagnosis who is thought to be in their
last 6 months of life should be excluded from this group (unless they wish to be
included), to allow them to maintain contact with their loved ones during the last
phase of their illness.

**Searches and Guidance**

To assist with identifying high risk patient’s searches and guidance has been
developed and is available on the [Primary Care intranet site](#) for practices to
download and run for EMIS and Vision practices.

HSCB staff have been in contact with Merlok and a member of their team will be in
contact with Merlok practices to assist with their searches.

If you require any assistance with importing and running these searches please
contact any of our Data Analysts. Full contact details below.

<table>
<thead>
<tr>
<th>Name</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Donal Stanton</td>
<td><a href="mailto:Donal.Stanton@hscni.net">Donal.Stanton@hscni.net</a></td>
</tr>
<tr>
<td>Rebecca Nicholl</td>
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<tr>
<td>Shelley Leake</td>
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</tr>
<tr>
<td>Deirdre Kelly</td>
<td><a href="mailto:Deirdre.Kelly@hscni.net">Deirdre.Kelly@hscni.net</a></td>
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The Department of Health will be writing to HSC Trusts asking them to identify the
patients on red list drugs from their Trust records, which may not necessarily be
recorded in the GP practices clinical system.

**Ongoing care arrangements**

Please immediately review any ongoing care arrangements that you have with these
highest risk patients.

Wherever possible, patient contact, triage and treatment should be delivered via
phone, email or online. However, if you decide that the patient needs to be seen in
person, please arrange for your practice to contact them to organise a visit to the
surgery or their home as appropriate.
Support with medicine supplies:

Patients will need to ensure that their medication can be collected or delivered to them directly. Repeatable prescriptions can be valid for a year, but each repeat should be for no longer than the patient has now. For example, if the patient has prescriptions for a 28 day supply now then the repeat dispensing should be set up as 12 x 28 days’ supply.

Patients who currently have their medication delivered, by a chosen person or by a pharmacy, should continue to do so.

Patients who need regular medicine, but have not yet set up online ordering and delivery will need to be supported to do so. We ask that you arrange that suitable patients be put on electronic repeat dispensing as soon as possible.

Patients have been asked to arrange their own delivery or collection of their prescriptions through a nominated person, online delivery or delivery from a community pharmacy. If they struggle to do this, we ask that your practice helps set up an appropriate arrangement.

Patients have been told that the letter they have received can be used as evidence for their employer, to show that they cannot work outside the home.

Urgent medical attention

All patients who display symptoms of COVID-19 have been asked to contact the NHS 111 online coronavirus service, or call NHS 111 if they do not have access to the internet.

However, if patients have an urgent medical question relating to their pre-existing condition, we have asked that they contact you, or their specialist consultant, directly.

Postage/administration

HSCB will fund postage costs and practice administration time associated with searching and issuing letters to your high risk patients.

Practices can claim £20.00 per hour administration time (up to a maximum of 16 hours). A claim form for postage and practice administration time will be made available on the PCI site.

Please accept our sincere thanks for your help, patience and support at this challenging time and for giving this your immediate attention.

Yours sincerely,

Dr Margaret O’Brien
Head of General Medical Services

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