



17 November 2020

Primary Care

**Searches: people over 18 with Down's Syndrome**

Dear Colleagues,

You recently received a communication (annex A) from the interim CMO giving details regarding the addition of Down's Syndrome (adults) and Chronic Kidney Disease Stage 5 (CKD5) to the 'High Risk' group (Shielding) should they come into contact with COVID-19 infection. Many people with Down's Syndrome will have been identified through hospital records and have received letters informing them of their risk last week. In addition, your clinical IT system should now have been updated with the 9d44. code to identify these people.

We are aware that not all patients will have been identified through hospital records and would therefore be grateful if you could identify any other people with Downs Syndrome that have not already been flagged on your system. To help you with this, a search has been created within the Escro Shielding Report (Albasoft software <http://www.escro.co.uk/>) which you may have used earlier during the pandemic.

If you haven't previously used this it can be downloaded from

[http://www.escro.co.uk/escro\\_shielding/escro\\_shielding.htm](http://www.escro.co.uk/escro_shielding/escro_shielding.htm)

These searches will allow you to identify any patients coded as having Downs Syndrome who have not been previously identified as at 'Highest Risk'. People picked up by the searches will be those with Down's Syndrome who are age 18 yrs or over on the 31/3/2021.

We would appreciate you informing your local Shielding co-ordinator of these people, in the usual way asking that they are added as Group 4 for Down's Syndrome. This is to ensure they receive the specific letter detailing support for them (see attached). There is no requirement for you to discuss this with the patient, the central letter will provide them with advice of what this means and how they can access support. Your IT system

will also be automatically updated with a code in due course, in line with current fortnightly updates from Public Health Scotland.

Identification of people with CKD5 is still ongoing utilising information from specialist renal units and we will send a further communication when this has been completed and your clinical IT system has been updated with appropriate coding.

Once again, we greatly appreciate your help with this, particularly as we are aware of the pressure of workload you are under.

Yours sincerely

GP Shielding identification team

## Annex A

### Directorate for Chief Medical Officer

Dr Gregor Smith  
Interim Chief Medical Officer for Scotland



30 October 2020

Medical Directors  
Nurse Directors  
NHS Board Shielding Leads  
Primary Care

### **For immediate cascade to Primary Care and Hospital Clinicians**

#### **Addition to the shielding list of people over 18 with Down's Syndrome and CKD5**

Dear colleagues,

I am very grateful for all you have done to support patients who were shielding and to help maintain the Shielding List. This will enable those at highest clinical risk from COVID-19 to continue to receive targeted advice as the epidemiology changes through the winter.

I recently met with the other CMOs of the UK to consider the [QCOVID](https://www.bmj.com/content/371/bmj.m3731) data (published on the British Medical Journal <https://www.bmj.com/content/371/bmj.m3731> ) and have agreed the following:

#### **Down's Syndrome**

1) I am advising that people with Down's Syndrome over the age of 18 should be added to the shielding list. Public Health Scotland has extracted data from both acute and mental illness hospital records that go back as far as 1981. This will identify a large number in this cohort but may miss some. Therefore additional searches are being prepared, utilising the Albasoft software (provides the Scottish Therapeutics Utility) to allow GPs to interrogate their own records to identify people with Down's Syndrome who have not been detected by the hospital searches. This will be available for you to use once the initially identified people have been sent a letter on 31 October and the GPIT coding has been updated in your system. Once again I ask for, and greatly

appreciate your help in utilising these searches to identify any additional patients with Down's Syndrome, and that you notify your Health Board co-ordination team of these people in the usual way, so that they can be added to the Central list.

#### Chronic Kidney Disease stage 5 (CKD5)

2) I am also advising that people with CKD5 should be added to the shielding list. Many of these patients will already be on the central Shielding list if they are receiving renal dialysis, are awaiting a renal transplant or have had a transplant. Searches will initially be carried out by the Renal Units through their electronic records to identify additional patients. This will take a little more time and once this is complete, searches will be prepared using the Albasoft software, to allow GPs to interrogate their own records to identify people with CKD5 that are not captured by the initial search. We will write in more detail once the first phase has been concluded.

#### Dementia

3) The QCOVID data also highlights that people with dementia are at high risk from COVID-19. This covers a broad spectrum of illness and includes some who may be at risk of further cognitive impairment or distress where there is impaired capacity and limited understanding. Unfortunately we are currently unable to break the risk down further by severity and for this reason we are not adding dementia to the shielding list as a group. However, clinicians can add patients to the list based on their clinical judgement and discussion with the individual and/or their carer.

I know that in the past months great efforts have been made to identify those patients who are at highest risk from Covid-19 and I want to thank you for your commitment to your patients' best interests and your professionalism.

Yours sincerely,

A handwritten signature in dark ink, appearing to read 'Gregor Smith', with a stylized, cursive script.

**DR GREGOR SMITH**

INTERIM CHIEF MEDICAL OFFICER