Covid-19 Testing in Care Homes



Dear Colleagues,

Apologies but this has been re-issued to make clear that the decision to test is at the clinical discretion of the GP. The flow chart has been amended in the first box. The new advice "deck" is dated 30/04/20 with changes only on the first 2 pages.

I am writing to advise you of the new process which has been agreed Board wide for testing of suspected Covid-19 cases in the care home setting from Thursday 30th April 2020.

Each HSCP will have a central point where tests will originate and these will be triggered by a SCI gateway referral from the patients GP following a telephone clinical assessment. The referral does not require any clinical information. When requesting the test the GP will also have to make an ICE request on order comms.

The local centres will then print off labels and arrange the test to be delivered to Nursing Homes or for the testing team to visit Residential Care Homes. Where tests are carried out these will be collected by the local centre and should not be returned to the GP practice.

Initially there will be no testing scheduled at the weekend as it is not time critical. Test should only be carried out from day 2-5 of the illness, however, referral may be made from day 1. Care homes will be asked to contact the resident's GP on Monday morning to discuss the symptoms and for testing to be arranged if appropriate for residents who develop symptoms over the weekend.

Enclosed please find the local pathway for information as well as SCI Gateway and ICE information on how to refer for and request testing. Please also note the ICE request may only be used for care home residents.

Yours sincerely,

David Leese Chief Officer Renfrewshire HSCP On behalf of the NHSGGC COVID Primary Care Clinical Advisory Group Test Info1 (process)

GG&C Covid-19 Care Home Test Process

30/04/20

0141 531 9204

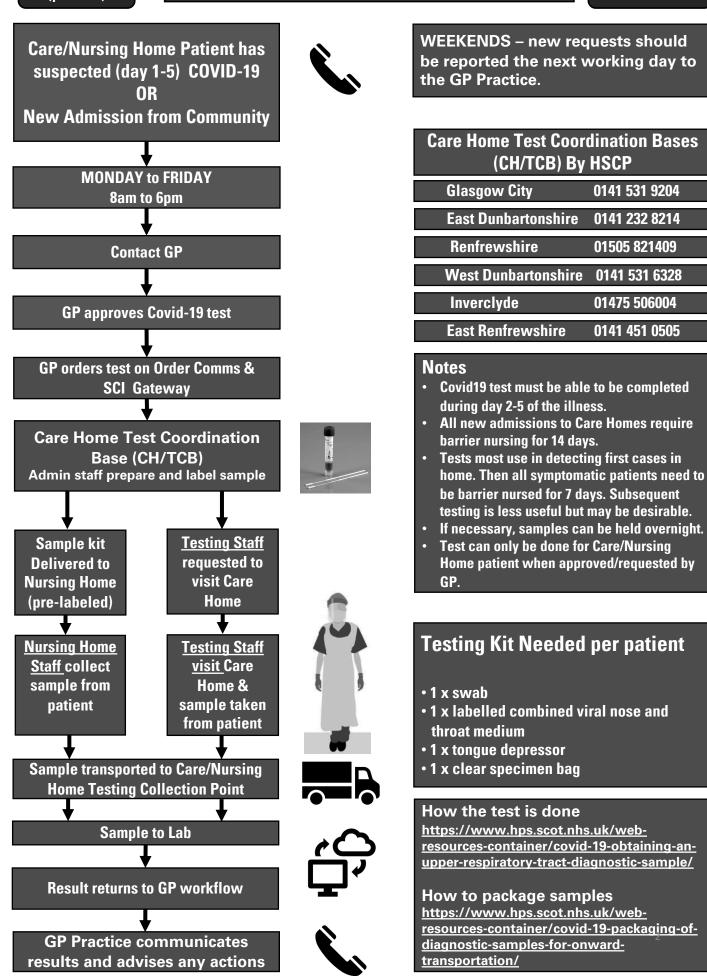
0141 232 8214

01505 821409

0141 531 6328

01475 506004

0141 451 0505



GG&C Care/Nursing Home COVID-19 Testing

30/04/20

Care & Nursing Home COVID Test Protocol (vR20.5)

This is an example of the SCI Gateway referral

Key Messages Tab:

Key Messages	Clinical Data	Past Medical / Family History	Medication	Risks/Alerts	Demographics	Referral	Additional Support Needs
		Care & Nurs	ing Home	COVID Test	Protocol (vR	20.5)	

Key Messages

This is a referral for the Care Home or Nursing Home patient to be tested for COVID-19 by the local HSCP Testing Team or Nursing Home staff.

A postponed GP Order Comms request must be completed for the patient within the ICE application to allow the team to generate the label for the sample and to ensure that the result is returned to the practice.

Clinical Data Tab:

Key Messages	Clinical Data	Past Medical / Family History	Medication	Risks/Alerts	Demographics	Referral	Additional Support Needs
		Care & Nurs	sing Home	COVID Test	Protocol (vR	20.5)	

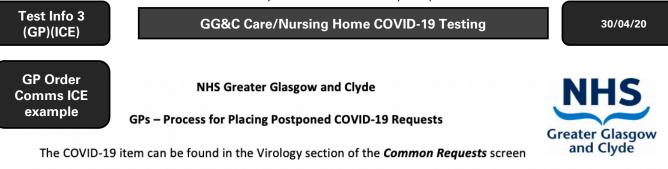
Clinical Data

Main Presenting Co	mnlaint	
	-	
Main Presenting Complaint	(maximum of 98 characters)	
Provisional Diagnosis / Presenting Complaint*	Referral for Covid-19 Test	ABC
What is the question you a	re looking to be answered by sending this patient for assessment?	
Additional free-text Information	Care & Nursing Home COVID Test Protocol 23/04/20	ABC
		-
Priority Reason		
Please Select priori	ty and enter a priority reason if applicable	
Priority*	Urgent 🗸	
Priority Reason		
Date of Onset		
Unique Care Pathway Number*	1ZZ004641845K	

NOTES The SCI gateway referral can be created as a "null referral" ie no additional information needs to be added.

Remember - ORDER COMMS test request (postponed ie to be done later) needs to be created to allow Testing Staff to create labels and get the result back to GP Practice.

Produced by GG&C PC Clinical Advisory Group



Laboratory Panel		Radiology Panel	Radiology Restricted	Sandyford
Common Requests				KEY
Collections	Biochemistry	Biochemistry (continued)		mmunology
Drugs	Urea and Electrolytes	Urine Albumin (ACR or 24	hour)	Rheumatoid Factor
Ris A. C.	Liver Function Tests	Haematology		TTG (IgA) abs - to test for coeliac
Bio A - O	Bone Profile	Full Blood Count		TTG (IgA) abs - monitoring coeliac
Bio P - Z	Glucose	ESR		ticrobiology
COVID19	Chol / Triglyceride	Ferritin		Hidstream Urine (C&S) 🖘 🗍
Testing	Lipid profile (inc. HDL)	Folate		Catheter Urine (C&S)
Genetics	Thyroid function tests	Vitamin B12		EAR SWAB
Haematology	HbA1c 🕬	Infectious Mononucleosis		EVE SWAB
Haematology	PSA	Blood Film		Wound Swab (C&S) #1
Haemostasis	Protein / Albumin	Virology		Sputum (C&S)
Histopathology	Urate	COVID-19 Care and Nursin	Home Use 🖘 🗊	Throat swab (C&S)
Immunology	Gamma GT	HIV antibody/antigen (Ab	Ag) screen	Hycology Dermatophytes #1
Immunology	Amylase	Chronic Viral Hepatitis Scr	sen	
Microbiology	CRP	Acute Viral Hepatitis ALT o	ver 100 U/L	Helicobacter Faecal Antigen
GUM				

Specimens must be postponed to allow the HSCP Testing Staff to complete the request.

If your patient doesn't have a CHI recorded on your Practice System you must also provide the Patient | ID that the ICE request was placed with as part of the SCI Gateway Referral. This will ensure that the HSCP Testing Staff can quickly find the request on ICE. There will be no *CHI Number* in the ICE Patient Banner for these patients:-

Patient Name:	Mr ONE EDITESTPATIENT	CHI Number:	Sec: Male	<< Back
Date of Birth:	27 January 1925	: 943 476 5919		🚣 🖻
Address:	Aqueous II, Waterlinks, Aston Cross, Rocky Lane,	Birmingham, B6 5	Telephone No: 0141 637 2738	View Details

The easiest way to find the Patient ID is to print the **Postponed Order Summary** when you postpone the request

·	Please complete the following details re	garding your request. Once you completed the details, click the 'Accept Request' button to	continue or 'More Tests' to add more tests. Fields with a shaded background are mandatory.
	General Details:		Order Details:
	User:	gpark	T Virology - COVID19
	Bleep / Contact No:	0141 201 4147	Tests in this order: COVID-19 Care and Nursing Nome Use
ł			Collect Later
l	Requesting Consultant / GP:	Select 🔽	Print a postponed request summary for this order

You can print this to PDF to save paper as you only need it to confirm the Patient ID

The Patient ID will be recorded against the *CHI Number* field on the Postponed Order Summary Report

	l Order Summary Report 4 Apr 2020 12:16:11	
Patient Details		
Name:	EDITESTPATIENT, ONE	NHS Number
Date of Birth:	27 Jan 1925	
Sex:	Male	
Address:	Aqueous II, Waterlinks, Aston Cross, Rocky Lane, Birmingham, B6 5RQ	
:	943 476 59 9	9434765919
CHI Number:	ICE1	1

Record the Patient ID in the Additional free-text Information section of the SCI Gateway Referral

Main Presenting	Complaint	
Main Presenting Compla	aint (maximum of 98 characters)	
Provisional Diagnosis / Presenting Complaint*	Referral for Covid-19 Test	*
What is the question yo	u are looking to be answered by sending this patient for assessment?	
		ABC
Additional free-text Information	Care & Nursing Home COVID Test Protocol 23/04/20	^