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| **Total Clinical Triage**  All contacts will go through clinical triage and where suspicion of Covid 19 re-directed to 111 service. – see BMJ Visual Summary flow chart. | |
| **Essential Activity** | **Non-Essential Activity** |
| Face to Face examination only to exclude life-threatening of life-shortening illness where this cannot be done over telephone or video link  2 week wait referrals – mostly can be done over telephone or video link – please see example scenarios  Long-term condition monitoring for unstable at risk patients – consider doing by telephone or video link  Prostap / Zoladex injections to continue as scheduled where possible (specialist advice has been given)  Child protection and safeguarding reports  **All above based on case by case individual clinical decision and risk assessment** | Target related activity:   * Defer routine reviews of stable patients and do not call frail patients to the practice if can be avoided * LCS work * DES, including extended hours   Travel – all non-essential  Routine cervical smears to be deferred  PSA monitoring can safely be deferred for up to 3 months (specialist advice has been given)  Consider whether IUCD / contraceptive implants can be deferred and replaced with oral contraception  Insurance and DVLA reports |
| **Children**  As with other patients all contacts to go through clinical triage.  Consider managing by telephone or video where possible. Use decision aid tools, such FeverPain, Centor when appropriate.  It is recognised that most clinicians will have lower threshold for face to face review of younger children, but this is a matter for individual clinical judgement  If require face to face and have been triaged to be low risk of Covid 19, consider a separate children only environment that can easily cleaned or dedicated time slot for paediatric reviews. | |
| **Childhood immunisations**  These should continue and plan to do 6-8 week baby check at same visit as first dose immunisation. Spread appointments over course of working week, rather than specific clinic. Remind parents not to bring siblings where possible. | |
| **Mental Health**  Consider advising patients to contact their key mental health worker if under community mental health team and exhibiting exacerbation of known mental health problems. | |
| **Phlebotomy**  Practices should cease all but essential phlebotomy, further guidance will follow tomorrow | |
| **Med3**  Not to be collected from practice. To post or email scanned document to patient. | |