**Royton & Crompton Family Practice**

**COVID-19 Business Continuity Plan**

**Introduction**

COVID-19 has spread rapidly around the world in 2 months. The WHO has classified it as a public health emergency of international concern. The incubation period may be up to 24 days and it appears it may be possible for asymptomatic individuals to transmit the virus to others. It has high pandemic potential. GP practices have a duty to protect their patients and a duty as employers to protect their staff. As independent contractors we need to be proactive in managing these risks for ourselves rather than waiting for direction from others.

The Business Continuity Lead is responsible for co-ordinating any response under this plan. If the Business Continuity Lead is unavailable, this duty will fall to a nominated deputy.

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| Name of Business Continuity Lead |  |
| Name of Deputy Business Continuity Lead  |  |
| Practice Name:  |  |
| Practice Address:  |  |
| Royton Health and Wellbeing Centre  |
| Park St Royton Oldham OL2 6QW |
| Tel. No.: 0161 362 4003 |

Copies of this document should be kept with:

1. The Practice Business Continuity Plan,
2. Copies of the locum cover insurance policy, income protection policy, and any other relevant insurance policies if applicable
3. The HSC Primary Care Flowchart for assessing case definitions and appropriate actions
4. NHSE Novel Coronavirus (COVID-19) standard operating procedure for GP Practice.
5. Suspected Case Isolation and Post-Transfer Actions SOP

Copies of this set of critical documents should be kept both in the premises and off the premises by both the Business Continuity Lead and Deputy Business Continuity Lead. All staff should be familiar with the content of this plan.

**Revision of this document**

Responsibility for maintenance of this plan lies with the Business Continuity Lead, and it should be reviewed and updated regularly.

The gov.uk site should be checked at the beginning of the day to ascertain the most up-to-date country travel information. <https://www.gov.uk/government/publications/covid-19-specified-countries-and-areas/covid-19-specified-countries-and-areas-with-implications-for-returning-travellers-or-visitors-arriving-in-the-uk>

**Scope of the plan**

This plan is designed to enable the practice to maintain the provision of critical business functions in the face of disruption caused by:

* The need to work differently (remote working; limited face to face patient contact) in order to manage risk and protect patients and staff
* Staff isolation due to exposure to confirmed or suspected COVID-19
* Staff absence due to illness with symptoms of COVID-19
* Staff absence due to wider impact of Covid-19 i.e. school closure
* Staff absence due to confirmed COVID-19 infection
* Temporary closure of the Practice premises for decontamination after a COVID-19 exposure

**Plan**

1. Appoint a COVID-19 business continuity lead and deputy
2. Notice on practice home page with brief information on our coronavirus plan and links to PHE website 111 phone number and NHS 111 online <https://111.nhs.uk/service/COVID-19/>
3. STOP notices and staff on front door advising those who have returned from one of the affected countries or been in contact with a confirmed case of corona virus to return home and contact 111 for advice. On receipt of further guidance from PHE consider requesting that patients with fever and acute respiratory symptoms do not to enter but return home and contact the practice by phone for further advice. However if a patient is severely unwell or refuses to leave isolate the patient and seek further advice from a manager or senior GP.
4. Posters in the waiting room and notice on practice information screen re-iterating stop sign advice
5. Choose a room in the practice to use as an isolation room (baby changing room and adjacent toilets on the ground floor)
6. Ensure an up to date list of all staff contact details and NOK details is held by the practice
7. Option to move to total triage by telephone due to concerns that there is now transmission in the community and possible transmission by asymptomatic cases
8. Option for scripts issued in a 3 month supply to reduce demand and footfall
9. Need to explore remote working options for clinical and admin staff in case they need to self-isolate for 14 days or longer contact GMSS re remote access using own devices or buy cheap laptops; cheap contract or PAYG mobile phones for telephone contact or pay staff an allowance for use of personal mobiles for business use.
10. Option to suspend routine work like annual bloods, BP checks for monitoring repeat meds and non-essential home visits to create capacity, reduce cross infection and footfall in the practice
11. Option to suspend QOF work and chronic disease management clinics

1. Temporary reception area to be considered in case of deep clean contamination closure this could be a desk away from the main area and laptop access to the practice clinical system
2. If remote working need to ensure all prescriptions are prescribed electronically
3. Buddy up with neighbouring practice and liaise with the PCN to see patients for each other in the event of all GPs being isolated; or the practice closed for decontamination; or provide nursing services in event of nurses being isolated or off sick; may also be able to provide admin back up; ideally buddy up with practices using same clinical system so buddy practice PM can do monthly searches and claims in event PM is sick or isolated without remote access; ensure a deputy is able to process payroll to pay staff in event of BM being off sick
4. If there have any confirmed coronavirus cases at the practice and we receive calls from any media about these cases, please refer them to the Oldham CCG Communications Team on oldccg.communications@nhs.net or 0161 622 6625.
5. Patients and staff will be updated as more information becomes available

**References**

* What is the risk or Corona Virus <https://www.nhs.uk/conditions/coronavirus-covid-19/>
* COVID-19: guidance for healthcare providers who have staff with relevant travel, healthcare or household contact history <https://www.gov.uk/government/publications/novel-coronavirus-2019-ncov-guidance-for-healthcare-providers-with-staff-who-have-travelled-to-china>
* Generic principles for primary care settings <https://www.england.nhs.uk/wp-content/uploads/2020/02/covid-19-primary-care-sop-general-practice-v1.pdf>
* Decontamination <https://www.england.nhs.uk/wp-content/uploads/2020/02/covid-19-primary-care-sop-general-practice-v1.pdf>
* Guidance on self-isolation <https://www.gov.uk/government/publications/wuhan-novel-coronavirus-self-isolation-for-patients-undergoing-testing>
* Patient-facing information <https://www.gov.uk/guidance/coronavirus-covid-19-information-for-the-public>
* RCGP guidance <https://www.rcgp.org.uk/covid-19>

Appendix 1

**LIST OF ESSENTIAL CONTACTS**

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| **Practice BCP Lead** | **Name** | **Position** | **Contact Number** | **Email** |
| **Primary** |  |  |  |  |
| **Deputy**  |  |  |  |  |

**GP and Practice Staff Key Contacts**

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| **Name** | **Position** | **Contact Number**  | **Email** |
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| --- | --- | --- | --- | --- |
| **Key Contacts** | **Name** | **Position** | **Contact Number**  | **Email** |
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