

NEW: COVID-19 Self-referring shielding patients

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As you may be aware, as part of the ongoing efforts to identify patients who may be at highest clinical risk of severe illness from a coronavirus or COVID-19 infection, the government allowed patients who felt they may fall into this category to self-identify via a website.

We have now received the details of those patients at your practice that have registered in this manner, and we will be importing that list into your EMIS Web system tonight, 20th April. Any patient who has already been identified as high-risk, either by the previous centralised NHS Shielded Patient List ([the Phase 1 and Phase 2 cohorts previously identified in searches within the EMIS Library](#)), or flagged manually at your practice, will not be included in this list.

Once you have received this latest list, you need to assess each patient and, if clinically appropriate, flag them as being at highest clinical risk of complications for COVID-19. The list of criteria for who is at highest clinical risk and should be added to the Shielded Patient List is [here](#).

The code you should use to flag these highest-risk patients is shown below:

- **High risk category for developing complication from COVID-19 infection**

Concept ID: 1300561000000107

Description ID: 2601331000000112

If you feel that a patient is either moderate- or low-risk you can flag them accordingly in order to keep a record of your decision, however you are not required to do this. If you choose to do so, you should use the following codes:

- **Moderate risk category for developing complication from COVID-19 infection**

Concept ID: 1300571000000100

Description ID: 2601371000000114

Moderate risk is defined as any patient who would be eligible for a flu jab, but does not fall into the high-risk category

- **Low risk category for developing complication from COVID-19 infection**

Concept ID: 1300591000000101

Description ID: 2601431000000117

Low-risk is defined as any patient who is neither high- nor moderate-risk.

You need to assess and flag these self-referring patients by Tuesday 28th April – on that date, NHS Digital intends to extract the data relating to those flagged as high-risk, which will then flow to the government's shielding support services. Data extracts will then continue on a weekly basis, using a schedule to be determined.

How will these patients appear in my EMIS Web system?

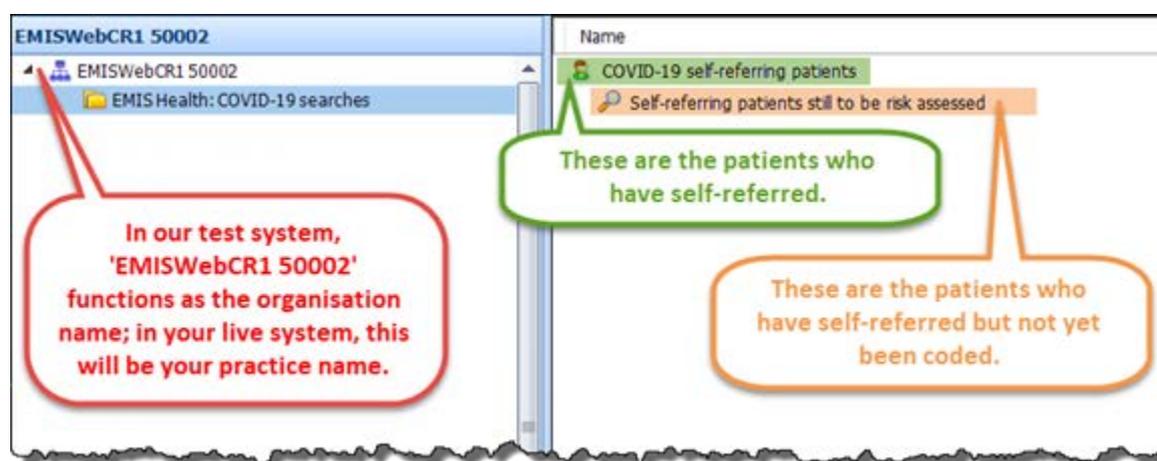
Your list of self-referring patients will be shown as a List of Patients within EMIS Web Population Reporting, titled '*COVID-19 self-referring patients*'.

- If there are no self-referring patients registered at your practice, this list will include only a single dummy patient.
- If there are no self-referring patients registered at your practice, and you do not have any dummy patients registered in your EMIS Web system, then no list will be created, and no parent folder added into your local Population Reporting hierarchy.

Beneath this list will be a further search, titled '*Self-referring patients still to be risk assessed*', which will identify patients who have self-referred via the government website but who have *not* been coded with any of the at-risk codes detailed above – you can use this search as a 'working' cohort, i.e. **these are the patients that you need to assess and code.**

Both this list and search will be within a new folder within your organisation's local search hierarchy, titled '*EMIS Health: COVID-19 searches*':

Reporting > Population Reporting > *your practice name* > EMIS Health: COVID-19 searches



Example folder hierarchy showing List of Patients and child search.

You should be aware that although you are not required to code patients that you feel are moderate- or low-risk, leaving those patients uncoded will mean that they remain in the 'included' population of the '*Self-referring patients still to be risk assessed*' search.

What action should I take once I have assessed these patients?

NHS Digital have advised that where you identify someone as being at highest clinical risk and needing to shield, you should write to that patient - a letter confirming they have been added to the list is published [here](#) (an MS Word version of this letter was sent to practices at the end of March).

An example letter for patients who are *not* considered to be at highest clinical risk is available online.

Patients that you identify as being at moderate risk can access government guidance [here](#). There are also other sources of support for moderate-risk patients:

- **NHS Volunteer Responders:** you can submit a live referral for an individual that needs support or an NHS service that requires volunteers providing they meet the referring criteria at <https://www.goodsamapp.org/NHSreferral> or on 0808 196 3382.

Volunteers can provide:

- - **Check in and chat support** – short-term telephone support to individuals who are at risk of loneliness because of self-isolation (note, this is not mental health advice).
 - **Community support** – collection of shopping, medication, or other essential supplies for someone who is self-isolating, and delivering these supplies to their home.
 - **Patient Transport** – transport to take patients home who are medically fit for discharge.
 - **NHS Transport** – who will deliver medicines on behalf of the community pharmacy or dispensing doctor.

- **Health at home** – is a [webpage](#) that gives them an overview of NHS services that are available, such as how to order repeat prescriptions online and get them delivered.
- **Public Health England** have provided some [guidance](#) on looking after mental health and wellbeing during the COVID-19 pandemic.
- **Local councils** are working with voluntary sector organisations and local communities to support residents in the response to COVID-19. You can signpost them to this [website](#) where they can locate their council and associated website where they can find all this information.
- The government has provided advice on employment and financial support on their website: <https://www.gov.uk/coronavirus>

We will continue to provide further updates should more information become available.

Thanks,

EMIS Health

