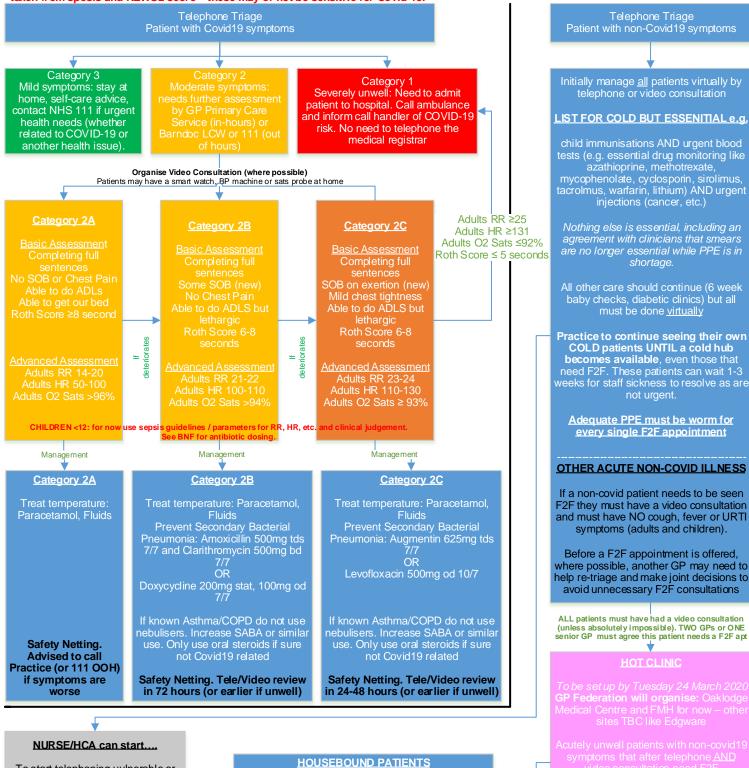
NHS Barnet Clinical Commissioning Group

Barnet Primary Care Guide During Covid-19

(Patient Age ≥ 12)

Version 1.0: 22 March 2020 Review Date: 24 March 2020

This pathway was created for GPs during uncertain times, using clinical judgement and are currently not evidence based. HR, RR & o2 sats are taken from spesis and NEWS2 score - these may or not be sensitive for Covid-19.



To start telephoning vulnerable or frail patients for welfare checks and doing virtual chronic disease clinics.

Signpost to Barnet wide and local social volunteering services e.g. for food deliveries or collecting prescriptions

TBC between CCG, LCW, Barndoc, CLCH

Rapid Response & District Nurse remains in place, although service is reduce and shudl be for non-covid URGENT cases only

Notes (children <12 pathway coming soon):

HOT CLINIC = non-covid and no URTI symptoms but need urgent F2F assessment (e.g. abdo pain). GP led clinic.

COLD CLINIC =non-covid and no URTI symptoms and are routine but essential for patients (e.g. children imms). Should be Nurse / Pharmacist led clinic (GP virtual supervision)

NB - no patients with covid or URTI symptoms should be seen whatsoever

COLD CLINIC - If practices do not feel comfortable seeing "cold" patients (listed above), you may wish to wait until cold hubs (north, west, south) are setup. Things like smears or other cold F2Fcases are on temporarily on hold until further notice.

ROTH SCORE – ask the patient to take a deep breath and count out loud from 1 to 30 in their native language. Count the number of seconds before they take another breath.

8 seconds = if the counting time is 8 seconds or less, this has a sensitivity of 78% and specificity of 71% for identifying a pulse oximeter reading of <95%. 5 seconds = if the counting time is 5 seconds or less, sensitivity is 91%