

Digital primary care and COVID-19

Source: Appendix A of [Next steps on general practice response to COVID-19: 19 March 2020](#).

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1. Supporting GP practices with remote triage and remote management of patients

The following sets out practical steps to support GP practices with remote triage and remote management of patients to:

- Enable and use a triage first model at the point of access by patients to general practice.
- Enable the public to receive advice and care without attending practices in person, unless in-person care is clinically required.
- Use telephone, video and online consultation technology to support triage and remote management of patients.

Specifically, commissioners, PCNs and practices should be taking the following actions:

- All practices should move to a triage first model as rapidly as possible to protect patients and staff from possible infection.
- To support a triage first model, practices and commissioners should either promote online consultation services where they are in place or rapidly procure online consultation services. Rapid procurement for those practices that do not currently have an online consultation solution will be supported through a national bundled procurement. This will be available within the next 14 days and will be accessed by commissioners on behalf of practices. Commissioners should approach our regional teams for more information on this process.

- Triage may be delivered by telephone but practices should also promote online consultation and introduce an online consultation service where they don't already have it. Telephone access should be maintained to ensure services are available to those patients where there are barriers to digital access.
- Practices should manage patients remotely unless in-person care is clinically required, in order to minimise infection risk.
- Current pre-booked appointments should be carried out remotely unless in person care is clinically required.
- Video consultations should be used for remote management where possible. Options are being developed nationally to enable roll out of video consultation capability to all practices as soon as possible.
- To support a triage first model, online appointments that are pre-bookable by patients should be converted to remote triage appointments (as per previous guidance) OR turned off where online pre-bookable appointments are not part of the triage process (for example if all triage is handled through an online consultation system).
- The contractual commitment requiring 25% of appointments to be available online does not apply to practices that have implemented a triage first model.
- Practices must not turn off other patient-facing digital services, ie repeat prescription ordering and patient access to medical records. These services should still be available to patients via the NHS App and other tools. If this functionality has been switched off, it should be switched back on.
- Practices should retain appointments for 111 to directly book on behalf of patients who have been through 111 triage, but should offer these as telephone/video appointments unless in-person care is clinically necessary.
- Practices should enable record sharing across PCNs (as a minimum), where this is not already in place.
- Patients should be strongly encouraged to use online services for repeat prescription ordering.
- Practices must use the Electronic Prescription Service (EPS) and should aim to move patients to [electronic repeat dispensing](#) unless there is a clinical reason not to do so. There should be no move to increase the duration of prescriptions.

Some guidance or resources have been linked to above. Additional guidance and resources on all these points will be rapidly developed for commissioners and practices and will be made available on the [primary care coronavirus web pages](#) and on the [Digital Primary Care Future NHS Site](#).

Commissioners should be identifying and reprioritising implementation resources in their area to support practices and PCNs in delivering the above. Where there are gaps and issues these should be discussed with NHS England and NHS Improvement Regional Teams.

We recognise the importance of explaining these changes to patients and have developed the following message for patients to support this, to be used as needed.

To reduce your chances of catching COVID-19 and reduce pressure on your local GP practice during this busy time, appointments will be carried out over the phone or

through (ADD OTHER OPTIONS AVAILABLE) unless there is a clinical need for you to come into the practice. This will help minimise risk while continuing to ensure people get the care and advice they need.

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2. NHSx Digital Primary Care – text messaging and remote working advice for Practices

2.1 SMS messaging

At this time, practices will need to be able to send messages to patients in much greater volume than normal. Most areas already have unlimited SMS plans. For those that don't and need additional credits for SMS messaging, they should urgently secure the additional capacity through their local commissioning groups. If your CCG needs additional funding to cover this, please ask that they contact pcdt@nhsx.nhs.uk.

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2.2 Remote working - laptops

GP practice staff will increasingly need to work from home or in settings outside the practice. Some areas have already deployed laptops or other forms of remote working for practice staff. Where this has not happened and where additional equipment is urgently needed, local commissioners will provision the equipment and support services. If local commissioners are unable to respond either through lack of equipment or funding or both, we will support them nationally. Please note that any equipment used for access to clinical systems must conform with [Securing Excellence in Primary Care: The Primary Care \(GP\) Digital Services Operating Model 2020-21 standards](#). A minimum specification and guidance for any laptop devices procured for emergency purposes can be found at the end of this section.

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2.3 Smartcards

Smartcards will be needed for certain functions in clinical systems such as electronic prescription service and electronic referral service. Smartcards are provided through local commissioners who should be able to respond to your needs. If that isn't happening, please contact pcdt@nhsx.nhs.uk.

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2.4 Remote working – Bring Your Own Device (BYOD)

NHSX has provided advice on staff using their own devices for access to NHS systems during this period. If your Data Protection Officer or Caldicott Guardian is unsure of

appropriate action to take, you can direct Information Governance questions to the NHSX IG Policy team. If local commissioners are unable to respond either through lack of equipment or funding or both, we will support them nationally, please ask that they contact pcdt@nhsx.nhs.uk.

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2.5 Telephony

If practices don't have enough telephone capacity to deal with inbound calls from patients and outbound calls from practices, please let us know as we are looking to understand the extent of additional funding that might be required.

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2.6 Headsets

Headsets are likely to be required to support telephone and video consultation. Please advise if you need additional equipment and we will advise arrangements for funding. If you need more advice, please contact: pcdt@nhsx.nhs.uk. Please note we will be working with regional offices and CCGs to ensure they are able to meet these requirements.

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2.7 Remote working

The most appropriate method of connection is via a HSCN VPN token which will provide connectivity to the clinical application, we are stipulating the provision of smart card readers to enable spine connected services to function. Further connection to practice specific information such as shared drives etc. should only be provided through devices supplied and maintained by your GP IT delivery partner. This approach eliminates a number of security and data handling risks. We are continually reviewing alternative methods to provide remote working capability and will be working with partners in NHS Digital and local systems to explore options.

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2.8 Laptop Technical Specification

Use of agreed image (usually specific to the individual GPIT delivery partner organisations/CCG) to include:

- VPN token (hard or soft) or VDI capability
- WES including browser & smartcard software
- WiFi enabled
- 4G

- W10 & ATP
- Antivirus
- TPM chipset
- encryption
- clinical systems (TPP, EMIS, Vision)
- MS Office/O365 (Word integration set-up)
- NHS mail
- built in
 - voice capability
 - speakers
 - camera
 - smartcard reader
- video consultation software (EMIS, TPP, AccuRx or other solution as appropriate)
- headset

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2.9 Data Security and Protection Toolkit Submission 2019/20

It is critically important that we remain resilient to cyber attacks during this period of COVID-19 response. The Data Security & Protection Toolkit (DSPT) helps organisations check they are in a good position to do that. Most organisations will already have completed, or be near completion of, their DSPT return for 2019/20.

However, in light of events, NHSX recognises that it will be difficult for many organisations to fully complete the toolkit without impacting on their COVID-19 response. NHSX has therefore taken the decision to push back the final deadline for DSPT submissions to **30 June 2020**. Organisations can choose to complete DSPT before that date. If they do so, and if they fully meet the standard, those organisations will be awarded 'Standards Met' status, as in previous years.

Where organisations have separate agreements with commissioners or information sharing partners, the existing deadline remains unchanged unless agreed between relevant parties. Whilst the DSPT submission deadline is being relaxed to account for COVID-19, the cyber security risk remains high. All organisations must continue to maintain their patching regimes. Trusts, CSUs and CCGs must continue to comply with the strict 48hr and 14 day requirements in relation to acknowledgment of, and mitigation for, any High Severity Alerts issued by NHS Digital (allowing for frontline service continuity).

This message will be made available on the news page of the [news page of the Data Security and Protection Toolkit](#).

Further advice for organisations completing their Data Security and Protection Toolkit assessment is available from www.dsptoolkit.nhs.uk/Home/Contact

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