

Wednesday 18 March

## Introduction

This issue of Core Brief details today's COVID-19 update.

# Daily COVID-19 update

We are committed to ensuring that staff have the information they need to know to respond to the current COVID-19 situation.

Please keep up-to-date with the latest guidance on our dedicated web pages at: <u>www.nhsggc.org.uk/covid19</u>.

# Advice for healthcare workers following UK and SG announcements

# Following the announcements this week by the UK and Scottish Governments of the latest measures in the response to the outbreak, here is the latest advice for staff.

It's very important that you stay at home if you have symptoms that may be caused by COVID-19 or you live with someone that has symptoms.

If you live alone you should stay at home for 7 days from the day your symptoms started. You can use the online guide at NHS Inform to get more details on symptoms and advice on what it means to stay at home - <u>NHS Inform</u>.

If you live with others, the person who has symptoms should stay at home for 7 days from the day their symptoms started. All other household members should stay at home for 14 days even if they don't have symptoms themselves. The 14-day period starts from the first day the person had symptoms. This will be recorded as special leave.

It is advised that those who are at increased risk due to COVID-19 to be particularly careful in trying to follow social distancing measures.

This group includes those who are:

- aged 70 or older (regardless of medical conditions)
- under 70 with an underlying health condition
- those who are pregnant.

If you feel that you fall into one of these three groups you should discuss in more detail with your Line Manager who will carry out a risk assessment and make adjustments as necessary. This could include working from home or being relocated to another area, for example. Further details are available on the Staff FAQs updated today.

## Patient pathways

The pathways for admission for COVID-19 positive patients was discussed at the COVID-19 Incident Management Team yesterday afternoon.

It was agreed the current phase of the evolving situation is such that patients diagnosed with COVID-19 will be cared for in their admitting hospital, following infection control guidance; the regional infectious diseases unit will provide advice on the medical management of patients where needed and can be contacted via the QEUH switchboard.

However, to reduce unnecessary additional pressure to the service, can we ask staff to first check <u>local</u> and <u>national</u> guidance for answers before contacting Infectious Diseases and only to call for issues relating to the medical management of patients.

## **Update information on PPE**

We are aware colleagues raised issues in relation to the supply and allocation of PPE – specifically facemasks, gowns, goggles and visors – and we are liaising with NHS National Services Scotland and suppliers to address these issues and to ensure services receive appropriate supplies at the correct times.

All staff should look to use and preserve current supplies appropriately and as a reminder, the table below provides an overview on which services require PPE for the care of COVID-19 patients and what types should be used. Full guidance available at <u>https://www.hps.scot.nhs.uk/a-to-z-of-topics/covid-19/</u>.

	Entry to cohort area (only if necessary) no patient contact*	General ward	High risk unit ICU/ITU/HDU	Aerosol generating procedures (any setting)
Disposable Gloves	No	Yes	Yes	Yes
Disposable Plastic Apron	No	Yes	Yes	No
Disposable Gown	No	No	No	Yes
Fluid-resistant (Type IIR) surgical mask (FRSM)	Yes	Yes	No	No
Filtering face piece (class 3) (FFP3) respirator	No	No	Yes	Yes
Disposable Eye protection	No	Risk assessment	Risk assessment (always if wearing an FFP3)	Yes

Table 1: Transmission based precautions (TBPs): Personal protective equipment (PPE)

Personal protective equipment (PPE) for close patient contact (within 1 metre) also applies to the collection of nasal or nasopharyngeal swabs.



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