CARING FOR PEOPLE AT HIGHEST CLINICAL RISK FROM COVID-19

Background and FAQs for patients

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Please note: The information contained in this document relates specifically to people defined by the United Kingdom's Chief Medical Officer as being **extremely clinically vulnerable to, or at highest clinical risk** from, COVID-19.

The advice in this guidance may feel stringent but it is there to protect those who are at highest clinical risk and should be applied carefully to this group.

Most people that are within this group will have already received a letter through the post. However, the process for identifying additional people who meet the clinical criteria but have not been identified through the initial central process is continuing. People identified through this process will receive a letter shortly.

Background

Last week the NHS wrote to those people considered to be at highest clinical risk from coronavirus (COVID-19) to inform them that they should stay at home at all times and avoid all face-to-face contact for a period of at least 12 weeks. This is set out in the Public Health England guidance published on 21 March 2020. This is known as 'shielding'.

The GPs and hospital clinicians looking after people in these groups have also received letters informing them of the highest clinical risk group and have been asked to review their patient lists and to add in any patients they think should be on that list.

People falling into this highest clinical risk group include:

1. Solid organ transplant recipients
2. People with specific cancers:
    - people with cancer and are having chemotherapy
    - people with lung cancer and are having radical radiotherapy
    - people with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment
    - people having immunotherapy or other continuing antibody treatments for cancer
    - people having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors
    - people who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs
3. People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe COPD

4. People with rare diseases and inborn errors of metabolism that significantly increase the risk of infections (such as SCID, homozygous sickle cell)
5. People on immunosuppression therapies sufficient to significantly increase risk of infection
6. Women who are pregnant with significant heart disease, congenital or acquired

Frequently Asked Questions:

Q1: I have received a letter telling me that I am at the highest clinical risk during the COVID-19 pandemic. Why have I received this letter?

A1: You have received this letter because you have been identified as having a condition(s), or are taking medication, or receiving treatment, that puts you at the highest risk of severe illness if you catch COVID-19. The list of highest risk diseases was agreed by the United Kingdom's Chief Medical Officers and includes:

1. Solid organ transplant recipients
2. People with specific cancers:
    - people with cancer and are having chemotherapy
    - people with lung cancer and are having radical radiotherapy
    - people with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment
    - people having immunotherapy or other continuing antibody treatments for cancer
    - people having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors
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5. People on immunosuppression therapies sufficient to significantly increase risk of infection
6. Women who are pregnant with significant heart disease, congenital or acquired

Q2: I am in one of the highest clinical risk groups, so what do I do now?

A2: You are strongly encouraged to follow the guidance issued by Public Health England, as set out in the letter you have received – stay at home and avoid all face-to face contact for the next 12 weeks. This approach is called 'shielding'.

If you have any concerns/ queries about the content of the letter you have received; your condition, or 'shielding', and what this might mean for you, please get in touch with your GP or hospital clinician in the first instance.

All people who have received the letter should register with the Government's website: https://www.gov.uk/coronavirus-extremely-vulnerable. This will help you to access support with

activities such as obtaining food packages or medications. Even if you do not need any support with daily tasks, please do register with this website to let Government know.

Please note that patients are being added to the central data base all the time and there may be a slight delay between you being added to that database and being recognized by the website/ support phone line as someone who is eligible for support.

Q3: I think I should be considered as highest clinical risk, but I haven't received a letter. What should I do?

A3: ***Most*** people that are within the highest clinical risk group have already received a letter through the post. However, we are aware that central records do not capture everybody in this group. The process for identifying additional people who meet the clinical criteria but have not been identified through the initial central process is continuing. People identified through this process will receive a letter shortly. This list is also being reviewed by GPs and hospital clinicians.

In the meantime, please continue to follow the social distancing guidance, as published on 23 March 2020.

Q4: I have been told that I am not considered to be at highest clinical risk, but I still want to be in the shielding group. What should I do?

A4: If you are not considered by healthcare professionals to be at the highest risk but nevertheless wish to follow 'shielding' advice then this is a personal decision that you are, of course, free to make and to follow as far as possible.

However, we suggest that people who ***are not included*** in the shielding group but who are on the broader list of conditions (below) follow strict social distancing measures instead.

This is because shielding is a severe intervention which may be difficult to adhere to for such a long period of time, and the additional benefit gained from this extra measure needs to be weighed against any impact on your mental and physical wellbeing from a significant loss of social contact and needing to stay in the home for a long period of time. We do not wish to advise anybody to follow these measures unless absolutely necessary. We also cannot provide a dedicated food and medicine delivery service to those outside the shielding programme.

People who are considered in a wider vulnerable group (sometimes referred to as the 'flu group') but are ***not*** in the highest clinical risk registry are:

- aged 70 or older (regardless of medical conditions)
- under 70 with an underlying health condition listed below (i.e. for adults this usually anyone instructed to get a flu jab as an adult each year on medical grounds):
    - chronic (long-term) respiratory diseases, such as asthma, chronic obstructive pulmonary disease (COPD), emphysema or bronchitis
    - chronic heart disease, such as heart failure
    - chronic kidney disease
    - chronic liver disease, such as hepatitis

- chronic neurological conditions, such as Parkinson's disease, motor neurone disease, multiple sclerosis (MS), a learning disability or cerebral palsy
- diabetes
- problems with your spleen – for example, sickle cell disease or if you have had your spleen removed
- a weakened immune system as the result of conditions such as HIV and AIDS, or medicines such as steroid tablets or chemotherapy
- being seriously overweight (a BMI of 40 or above)
- those who are pregnant

Q5: I have received a letter saying that I am considered as highest clinical risk, but I think this is incorrect. What should I do?

A5: If you have any queries/ concerns about the letter you have received or think that you may have received it in error, please contact your GP or hospital clinician, as soon as possible, to discuss how you can stay safe during this time. In the meantime, we strongly advise that you follow the Public Health England guidance on shielding unless advised otherwise by a healthcare professional.

Q6: I have had a telephone call from somebody claiming to be from the National Shielding Helpline. How do I know this is not a scam?

A6: While you are at home 'shielding' a government support service may contact you by letter, email or telephone. This team is calling to understand your food and wellbeing support needs and will always identify themselves with their name and as a representative of the National Shielding Helpline.

To give you confidence, the number they're calling from will register on your phone as 0333 3050466. It's not a live telephone line, however if you call it you will get the following recorded message:

"You were called today by the Shielding Helpline, sorry that we missed you, there is no need to call us back as we will try again soon. Thank you goodbye".

Additionally, for extra peace of mind early on in the call agents from this service will ask you to confirm some details, for example your name and NHS number, to make sure they are speaking to the person identified by the NHS as extremely clinically vulnerable / highest clinical risk of COVID-19. They will never ask you for information like your National Insurance number or bank details. Your local council may also be in touch.

Q7: What support is being offered to people who are advised to shield?

A7: It is expected that many people who have been identified as highest clinical risk and are now 'shielding', i.e. staying at home and avoiding all face-to-face contact, will have family members, or carers/friends/neighbours, who can help them out during the period in which they are required to stay at home, picking up essential food shopping/ medicines etc.

If you are at highest clinical risk, and have received a letter from the NHS, advising you to stay at home, you should register for support from the Government. Support is initially focused on provision of food packages and ensuring medication delivery where you have no other means to do so. Everybody who has a letter and is on the highest clinical risk list should go to https://www.gov.uk/coronavirus-extremely-vulnerable. Even if you do not require support at this time, please register with the site so that we know that you have received your letter.

We know that not everybody will have people around to support them. Local councils are working with the voluntary sector and other partners to support people at highest clinical risk during this time. Please look at your local council's website where you will find information and advice about support available in your area.

It is also important to look after your mental health and wellbeing at this time. Guidance to support you to do this was recently published here.

Q8: If I am 'shielding' and must stay at home, can I still go outside, in the garden?

A8: As set out in the Public Health England guidance, people should "try spending time with the windows open to let in the fresh air, arranging space to sit and see a nice view (if possible) and get some natural sunlight, or get out into any private space, keeping at least 2 metres away from your neighbours and household members if you are sitting on your doorstep".

Q9: I think I am in the highest clinical risk group but I am not currently registered with a GP, and am not currently being cared for by a hospital specialist. How will I be contacted?

A9: The NHS is making every effort to identify all individuals who we think should be on the highest clinical risk list. However, it is difficult for us to get in touch with individuals who are not registered with a GP or with a hospital service.

We are working with the voluntary sector to see if there is more we can do to identify people who are known to charities/ local community groups, so that we can get support to those who might be eligible.

Q10: I am in the highest clinical risk group but do not want to follow the 'shielding' restrictions. What do I do now?

A10: We understand that the restrictions imposed by 'shielding' are difficult, both for you and for your family members and/or carers. Public Health England has issued 'shielding' guidance, strongly advising you to stay at home and avoid face-to-face contact for 12 weeks. This is the safest thing to do to protect you from illness/ complications of COVID-19.

However, this is ***guidance*** and whether you follow the guidance or not is a personal decision for you to make.

You may decide, having weighed up the risks and the implications of 'shielding', that you do not want to follow the guidance. Before deciding, we would ask you to discuss the matter with your

GP or hospital specialist and those that may provide care for you. This may be particularly relevant for patients who are receiving end of life care. Please do talk to somebody before you decide what to do.

If, having discussed the matter with your GP or hospital specialist, you decide ***not*** to follow the 'shielding' guidance, we would ask you to follow the same social distancing and hygiene measures as everybody else, i.e.

- Stay at home
- Only leave home to buy food, for health reasons, or to go to work (if you cannot work from home)
- Stay 2 metres (6ft) away from other people
- Wash your hands as soon as you get home.

Q11: I live with a person who is 'shielding', but I am unable to socially distance from others because of my work (i.e. NHS, social care worker, education or other key worker), or the size/ layout of my home doesn't allow me to live separately from the vulnerable person who is shielding. What do I do?

A11: If you live with someone who has been identified as being at highest clinical risk, you should read and familiarize yourself with the 'shielding' guidance below, and strictly follow social distancing guidance.

The rest of the household should support the person shielding to stay safe and stringently follow guidance on social distancing, reducing their contact outside the home. In your home, you should:

- minimise the time spent in shared spaces (kitchen, bathroom and sitting areas) and keep shared spaces well ventilated;
- aim to keep 2 metres (3 steps) away from others and encourage them to sleep in a different bed where possible;
- use separate towels from other people in the house and, if possible, use a separate bathroom from the rest of the household, or clean the bathroom after every use;
- avoid using the kitchen when others are present, take your meals back to your room to eat where possible, and ensure all kitchenware is cleaned thoroughly.

If the rest of your household are able to follow this guidance, there is no need for them to take the full protective measures to keep you safe.

All people who have a letter and have been identified at highest clinical risk should register for government support at https://www.gov.uk/coronavirus-extremely-vulnerable. Even if you do not require support at this time, please register with the site.

Please note that government support is only available to the individual who is at the highest clinical risk and has received a letter confirming this.

Q12: I have received chemotherapy in the last three months - am I at highest clinical risk and should I be adopting shielding measures?

A12: People's immunity remains compromised for some time after finishing chemotherapy and clinical teams will be aware of this when considering their highest clinical risk patient lists.

If you have completed chemotherapy in the last 3 months, please contact your care team to discuss your specific circumstances.

In the meantime, you should follow the Public Health England guidance on 'shielding' - in summary, stay at home and avoid face-to-face contact for a period of 12 weeks.

Q13: Are people who are currently on targeted therapies for lung cancer classed as highest clinical risk to the same level as immunotherapy patients?

A13: Both groups of people are considered to be at highest clinical risk from COVID-19.

People in these groups should follow the Public Health England guidance on 'shielding' – in summary, stay at home and avoid face-to-face contact for a period of 12 weeks.

Q14: Are people with metastatic cancer in the lungs who are not currently being treated at highest clinical risk?

A14: People with metastatic cancer in the lungs could be more vulnerable and therefore at highest clinical risk from Covid-19. Vulnerability will depend on the type of cancer and treatments that you have had. If you have not received a letter, please contact your care team to discuss your specific circumstances.

In the meantime, you should follow the Public Health England guidance on 'shielding' – in summary, stay at home and avoid face-to-face contact for a period of 12 weeks.

Q15: Are people being shielded entitled to statutory sick pay for the whole time they are advised not to leave the house?

A15: The government has established a package of measures to support individuals who are not able to work during this pandemic – go to https://www.gov.uk/government/publications/guidance-to-employers-and-businesses-about-covid-19/covid-19-guidance-for-employees for more information.

Q16: I have received a letter for a family member or loved one who is deceased. Why have I received this letter?

A16: We are aware that a very small proportion of letters sent by the NHS, notifying people that they are at highest clinical risk from COVID-19, have been sent to people who are sadly deceased. We apologise for any distress caused.

For more information please go to:

https://digital.nhs.uk/news-and-events/latest-news/coronavirus-letters-sent-in-error

You can also read the apology statement about letters sent in error to a cohort of patients: https://digital.nhs.uk/news-and-events/latest-news/coronavirus-letters-sent-in-error-message-to-family-members

Q17: I have received a letter to say that I am at highest clinical risk, does this mean I will be de-prioritised for ventilation if I contract COVID-19 and require hospital care?

A17: You were sent this letter to inform you that your condition, or the treatment/ medication you are receiving, means that you are at the highest clinical risk from COVID-19. The purpose of the letter is to draw your attention to the guidance issued by Public Health England regarding 'shielding' in order to keep you safe during this COVID-19 outbreak.

If you fall ill from COVID-19, or any other condition, and require treatment in hospital, you will still be treated as normal and will not be denied any medical intervention because you are in the 'shielding' group.

Q18: Where can I find an electronic copy of the letter sent to people considered to be at highest clinical risk?

A18: A copy of the letter can be accessed through the NHS England website: https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/03/at-risk-patient-letter-march-2020.pdf

Q19: Is the letter available in other languages or accessible formats?

A19: An easy read version of the letter is available here: https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/03/2020325_Easy-Read_At-Risk-Patient-Letter.pdf

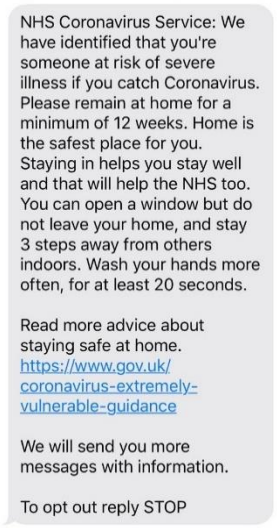
The letter is also available in alternative languages and are available here: https://www.england.nhs.uk/coronavirus/publication/guidance-and-updates-for-gps-at-risk-patients/

The Public Health England guidance, which the letter is based on, is online and available in different languages and accessible formats here: https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19

Q20: I have received a text message telling me that I am at highest clinical risk. How do I know if this text is real or a scam?

A20: NHS Business Services Authority have sent out a number of text messages from the 'NHS coronavirus service'. Daily text messages were sent from 23 to 29 March from the same number - 07307 810357. If your text does ***not*** come from this number, please ignore it.

The first text message looked like this:



Q21: The text I have received does not name me as being the person at highest clinical risk. How do I know the text has gone to the right person?

A21: We cannot include people's names or other personal identifiable information in the text messages in case the mobile device or the number associated with it belongs to someone else.

This is in line with recent guidance published by NHSX in agreement with the Information Commissioners Office.

If you are concerned that you may have received a text message in error, and/or have not received a printed letter, please review the guidance issued by Public Health England and/ or contact your GP or hospital specialist to discuss whether the advice provided applies to you.