Template for proactive COVID-19 / Frailty work

1. Identify at risk group:
   - Severe frailty list from electronic frailty index on SPIRE.
   - Possible to use other data such as palliative care register, or community nursing visit list.

2. Split list between team, deciding upon who is most appropriate person to make contact.
   - If possible, contact should be from someone familiar to the patient.
   - Could involve most people within primary care team e.g. practice nurse, GP, receptionist or community nurse.

3. Phone patient and explain that you are calling from the health centre to check that they are aware of up to date guidance regarding Coronavirus / COVID-19.

4. Explain how to reduce risk of catching virus. www.nhsinform.scot
   - Good hand hygiene and avoid touching face.
   - Avoiding contact with people who have respiratory illness.

5. Ensure they know what to do if they develop respiratory symptoms (cough, shortness of breath or fever).
   - If they have access to the internet, check NHS Inform.
   - Phone NHS 24 on 111.
   - Call the practice during working hours (this advice may change).
   - Do not turn up unannounced at a pharmacy, GP surgery or hospital - phone first.

6. Check to see if there is a Key Information Summary (KIS).

If no KIS:
   - Ask permission to create a KIS, explaining this will allow NHS 24, Out of hours service, and hospitals to have some limited information about medical conditions and aspects of their health.
   - At this point it may only be practical to create a limited KIS (including items below).

If they already have a KIS:
   - Check that the main medical conditions included in the KIS are up to date
   - Add free text to special notes with date to say:
     'March 2020 - Identified through eFI as living with frailty. Advice given about reducing risk of COVID-19 and where to obtain help if concerned'
   - Check that next of kin and power of attorney information is up to date.