

Community Health & Social Care Directorate
Primary Care Division



Addresses

For Action

Chief Executives NHS Boards
Chief Officers for Health and Social Care Partnerships
GP Practices

For information

Scottish General Practitioners Committee
Primary Care Leads NHS Boards
EHealth Leads/ NHS Near Me Leads

Policy Enquiries to:

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12 March 2020

Dear Colleague,

NEAR ME GUIDANCE FOR GP CONTRACTORS

1. Caroline Lamb, the Scottish Government's Director for Digital Reform and Service Engagement and SRO for Near Me, has today written to NHS Chief Executives confirming the intention to support the rapid acceleration of Near Me, and has asked for the identification of a senior lead within the Board by this Monday to ensure coordination.
2. Video consulting is a tool that can be used to reduce exposure to coronavirus Covid-19 for both patients and clinicians.
3. To support this, the Near Me video consulting platform (powered by Attend Anywhere) is now being made available to all GP practices in Scotland.
4. The attached document ***Coronavirus Resilience Planning: Use of Near Me*** Video Consulting in GP Practices has been developed by the Near Me team and the Scottish Government to enable the roll out of Near Me Video Consulting as a matter of urgency to support the provision of clinical care to patients affected by COVID-19 (Coronavirus).

Users of the Guidance

5. The Guidance is for use by GP contractors with support from their local Health Board and Health and Social Care Partnership (HSCP).

6. Matters covered by the Guidance

Near Me video consulting (powered by Attend Anywhere) can be used to reduce exposure to coronavirus by enabling both patients and clinicians to consult while in isolation. It can also increase GP practice resilience by protecting the workforce and enabling support to be provided from different geographical locations.

7.

Video Consulting is not appropriate for all consultations but scenarios where video consulting may be beneficial in primary care include:

1. For those with flu like systems contacting their GP during the in hours period or NHS 24 services in the out of hours period, where a video consultation can provide additional clinical information over and above what can be achieved by phone.
2. For patients with confirmed coronavirus or quarantined due to contact with an infected person to have consultations at home to negate a home visit or attendance at clinic.
3. To enable GP services to continue to be provided without exposing clinicians or patients to infection by reducing the number of patients coming into GP premises, who may be unknowingly carrying coronavirus.
4. To enable clinicians to work remotely, either due to quarantine or to reduce the infection risk for the clinician.
5. To enable additional health care support to be provided remotely to an area with a significant outbreak of coronavirus (including out of hours, acute and primary care).

Actions

8. Actions for Health Boards and or Health and Social Care Partnerships:

1. Ensure all GP practices within the Boards/ HSCP area have received this document.
2. Inform all GP practices of any local Health Board/HSCP arrangements that differ from what is described in this document.
3. Provide contact details for their local Near Me Lead who GP practices should contact in the first instance with queries about setting up Near Me.
4. Support all GP practices to be able to introduce Near Me video consulting as a matter of urgency.
5. Ensure contingency plans are cognisant of, and make appropriate use of, Near Me video consulting.

Enquiries

9. In the instance of any enquiries on this circular please contact Philip McLean using the details included in this circular.

10. However, specific questions about operating Near Me should be directed to local NHS Leads or to the relevant support as set out in the guidance.

11. More detailed guidance has just been published to support local services, including for primary care specifically, and can be accessed via the TEC website: ['Video Enabled Health and Care'](#). There is also a public-facing website at nearme.scot.

Yours sincerely,

Aidan Grisewood, Deputy Director, Primary Care Division
Community Health and Social Care Division

CORONAVIRUS RESILIENCE PLANNING:

USE OF NEAR ME VIDEO CONSULTING IN GP PRACTICES

This document is one of a set of four resources to support use of Near Me for coronavirus resilience:

1. Overarching organisational plan
2. **Primary care plan**
3. Outpatients plan
4. Inpatients plan

THIS DOCUMENT IS INTENDED FOR GP PRACTICES
IN NHS SCOTLAND

ACTIONS FOR HEALTH BOARD/HSCPS:

1. Ensure all GP practices have received this document
2. Inform all GP practices of any local arrangements that differ from what is described in this document
3. Support all GP practices to be able to introduce Near Me video consulting
4. Plan for use of Near Me video consulting for when an entire practice is closed

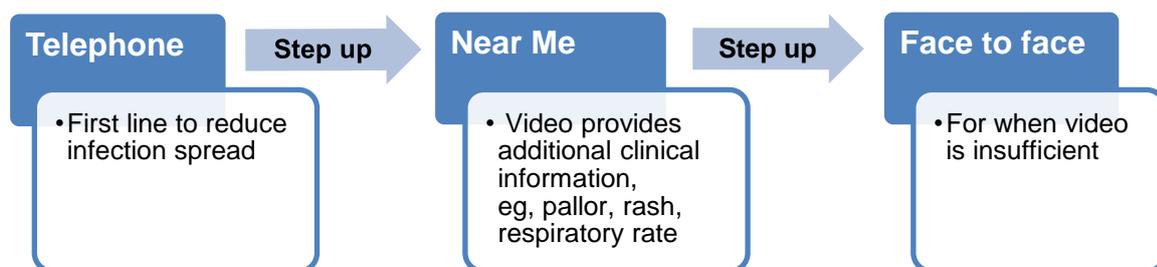
INTRODUCTION

Near Me video consulting (powered by Attend Anywhere) can be used to reduce exposure to coronavirus by enabling both patients and clinicians to consult while in isolation. It can also increase GP practice resilience by protecting the workforce and enabling support to be provided from different geographical locations.

Scenarios where video consulting may be beneficial in primary care include:

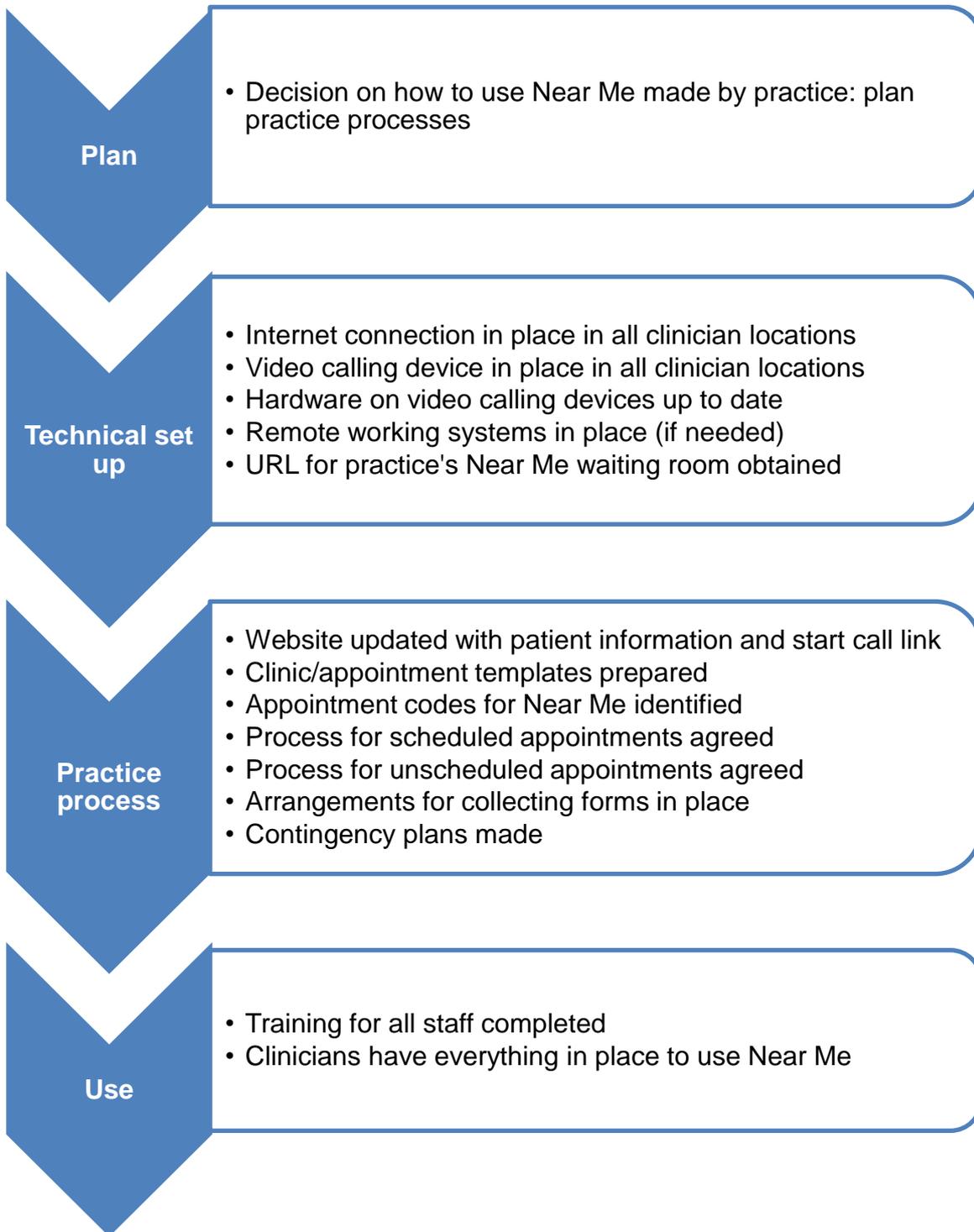
- For those with flu like systems contacting their GP during the in hours period or NHS 24 services in the out of hours period, where a video consultation can provide additional clinical information over and above what can be achieved by phone.
- For patients with confirmed coronavirus or quarantined due to contact with an infected person to have consultations at home to negate a home visit or attendance at clinic.
- To enable GP services to continue to be provided without exposing clinicians or patients to infection by reducing the number of patients coming into GP premises, who may be unknowingly carrying coronavirus.
- To enable clinicians to work remotely, either due to quarantine or to reduce the infection risk for the clinician.
- To enable additional health care support to be provided remotely to an area with a significant outbreak of coronavirus (including out of hours, acute and primary care).

Consultations: place of Near Me



SUMMARY

The following chart summarises the actions to implement Near Me at a GP practice. Detail is provided on the following pages. Some practices will already have completed some parts of this, and others will be supported by NHS Board/HSCP teams (especially around the technical set up aspect). All practices should agree their process for use and ensure all members of the practice team are aware of it.



IMPLEMENTATION OF NEAR ME IN A GP PRACTICE

Practice planning

1	<p>Arrange a meeting to go through this plan to decide how Near Me will be embedded into practice systems. Include:</p> <ul style="list-style-type: none">• Practice manager• Clinicians• Reception staff• Appointment booking staff. <p>Ensure all members of the practice are aware of how it will work.</p>
2	<p>Decide whether Near Me will be used for:</p> <ul style="list-style-type: none">• Scheduled appointments• Unscheduled care• Both. <p>Refer to the template care pathways in Appendix 1 and clinical information in Appendix 2, and define the clinical criteria for use of Near Me at the practice: in light of using Near Me for coronavirus containment, it may be easiest to simply define exclusion criteria for Near Me.</p>

Technical set up

1	<p>Check internet connection at all locations clinicians will consult from – including any use away from the practice (eg, clinician at home):</p> <ul style="list-style-type: none">• Wired broadband/WiFi (preferred) or mobile data. Note there is a cost of using mobile data so sufficient data allowance must be in place for regular calls.• Check connectivity at: https://nhs.attendanywhere.com/webtctest• If you have connection problems, check internet connection speed. Use a site to check, such as: www.speedtest.net or www.broadbandspeedchecker.co.uk <p>Minimum requirement: download 1.1Mbps, upload 0.7 Mbps, ping under 150ms If unable to reach minimum requirements, contact eHealth department at NHS board/HSCP.</p>
2	<p>Put in place video consulting equipment for clinicians/staff:</p> <ul style="list-style-type: none">• Add webcams and speakers or integrated screens to fixed computers in consulting rooms.• Or use moveable devices: laptops, tablets or mobile phones.• Be pragmatic about options such as moving video consulting equipment between rooms and using mobile phones during a coronavirus outbreak.• If adding any new equipment, ensure computer settings are correct and compatible with other devices such as dictaphones (eg, default microphone and speaker). <p>Some NHS boards/HSCPs may be able to provide equipment. Note for ordering new equipment that supply chains may be affected by coronavirus.</p>

3	<p>Check hardware meets the following requirements for all devices clinicians will use for video consulting:</p> <ul style="list-style-type: none"> • Computer operating Windows 7 or later, or Mac OS 10.11 or later • Tablet or mobile phone operating Android 5.1 or later, or iOS 11.4 or later, or iPadOS 13 or later • Chrome browser (version 71 or later) on computers/Android devices or Safari browser (version 11.4 or later) on Apple products (Attend Anywhere only works in these browsers). • If any are missing, consult your board/HSCP eHealth department. <p>Updated technical specifications available at: https://nhs.attendanywhere.com/callers/Content/D_Articles/What%20you%20need%20to%20make%20a%20video%20call.htm</p>
4	<p>If a clinician is to work remotely from the practice (eg, from home): ensure remote read/write access to the practice's clinical system is in place. If not, contact NHS board/HSCP to arrange.</p>
5	<p>Request Near Me waiting area URL is set up for the practice:</p> <ul style="list-style-type: none"> • Either follow the local process advised by your NHS Board/HSCP. • Or fill out request form at https://www.vc.scot.nhs.uk/attendanywhere/ which will go to the national VC team. <p>URLs will have a standard format: https://nhsattend.vc/[board]/[practicename].</p>

Practice processes

1	<p>If using a practice website, add the following information:</p> <ul style="list-style-type: none"> • Make your video consultation information clear on the website front page. • Include a page or panel titled "Video consultations by Near Me" with: • Text: "You can attend video consultations from your home or wherever is convenient by clicking on the start call button below using a device that makes video calls (like a smartphone)." • Practice specific information. For example, the statement: "You need to make an appointment as normal to use the video consultation service." Or the times a patient can use the service. • "Start call" button for video calls: once your Near Me waiting area is created, log in as an administrator, go to the Cog button at the top, from the drop down menu select "Waiting Area Entry Points", click on the "send me instructions" icon for adding a waiting area entry point to your website. You will receive an email containing the script for the button. • URL link to national Near Me patient information website www.nearme.scot • URL link to Near Me subtitled video: https://youtu.be/pOeLnYPpU_Q <p>For practices without a website or who choose not to use the website for this purpose, prepare a template email or text message or letter with the two URLs (start call and patient information), and decide whether to use the platform-generated patient leaflet. Note: some NHS boards/HSCPs have websites that it may be appropriate to use or link to, this will be advised by your local board/HSCP.</p>
2	<p>Update clinic/appointment templates to show the times that clinicians are available for Near Me consulting. This may depend on the quantity of video consulting equipment available in the practice.</p>

3	<p>Decide on the appointment code to identify video consultations:</p> <ul style="list-style-type: none"> • EMIS. Create a code in location manager called “Near Me video consultation”. • Vision. Agree consultation type code to use (eg, 8AB Telehealth monitoring or 9N3 Indirect encounter) and create a “Near Me” appointment type.
4	<p>If providing scheduled Near Me appointments:</p> <ul style="list-style-type: none"> • Define how patients will contact the practice to make an appointment: this should fit with the existing appointment booking process. • Ensure patients are given information about how to attend. This would usually be referring to the practice website (see above). • Reception staff monitor the Near Me waiting area and mark patients as having arrived in the practice’s clinical system to alert the clinician.
5	<p>If providing unscheduled Near Me clinics:</p> <ul style="list-style-type: none"> • Use practice communication and local NHS board/HSCP communications to promote the Near Me service to patients (eg, website, Facebook). • Ensure patient information clearly states how patients should use the Near Me service (see website section above). • Decide how unscheduled consulting will be managed, depending on how Near Me will fit with existing triage arrangements. Three options are: <ul style="list-style-type: none"> ○ Calls will continue to be telephone triaged first. Patients should phone the practice as normal, be triaged as normal and then patients directed to video call into the Near Me waiting area either immediately or at a defined time. The telephone triage staff member will book slots for patients in the practice’s clinical system. The clinician will refer to the clinical system and collect Near Me calls from the waiting area in the order defined. ○ Or: Each Near Me call is answered and triaged by a defined staff member(s) who will prioritise the calls by booking slots onto the practice’s clinical system then return the patient to the Near Me waiting area to wait for the clinician. The clinician will refer to the clinical system and collect Near Me calls from the waiting area in the order on the clinic list. ○ Or: Clinicians will monitor the Near Me waiting area and see patients on a first come first served basis.
6	<p>Put in place a process for patients to collect any required forms such as prescriptions or fit notes. For example:</p> <ul style="list-style-type: none"> • Print the form at the practice and the patient collects from a designated hatch to reduce in-person contact. • If a clinician is working remotely from the practice, another clinician within the practice will be required to sign the form. • Prescriptions could be sent directly to the patient’s chosen pharmacy.

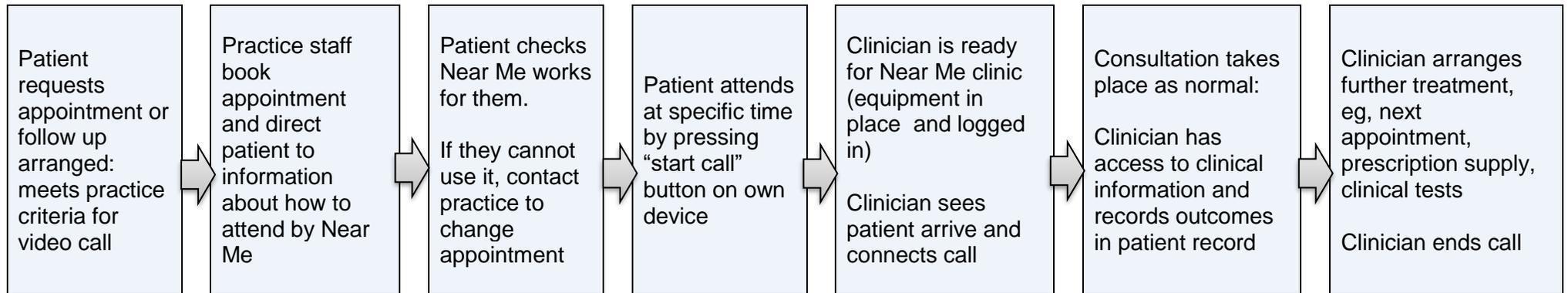
7	<p>Put in place a contingency plan for Near Me calls not working – either due to patients being unable to work it or an internet failure:</p> <ul style="list-style-type: none"> • Near Me call failures will happen if patient are not familiar with video calling technology and do not have a reliable internet connection. Therefore, have a clear plan in place for failures. • This would normally be the patient telephoning the GP practice reception to swap to a telephone or face to face consultation. Ensure the patient knows the telephone number to call. <p>Where a video consultation is clinically necessary (ie, to avoid transmission of the virus) and the patient has technical issues, contact the National VC Team and log a call on the patient’s behalf. Email vc.support@nhs.net or call on 01224 816666. The VC team will contact the patient directly and provide best efforts technical support during working hours 8am-6pm Monday to Friday.</p>
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Using Near Me

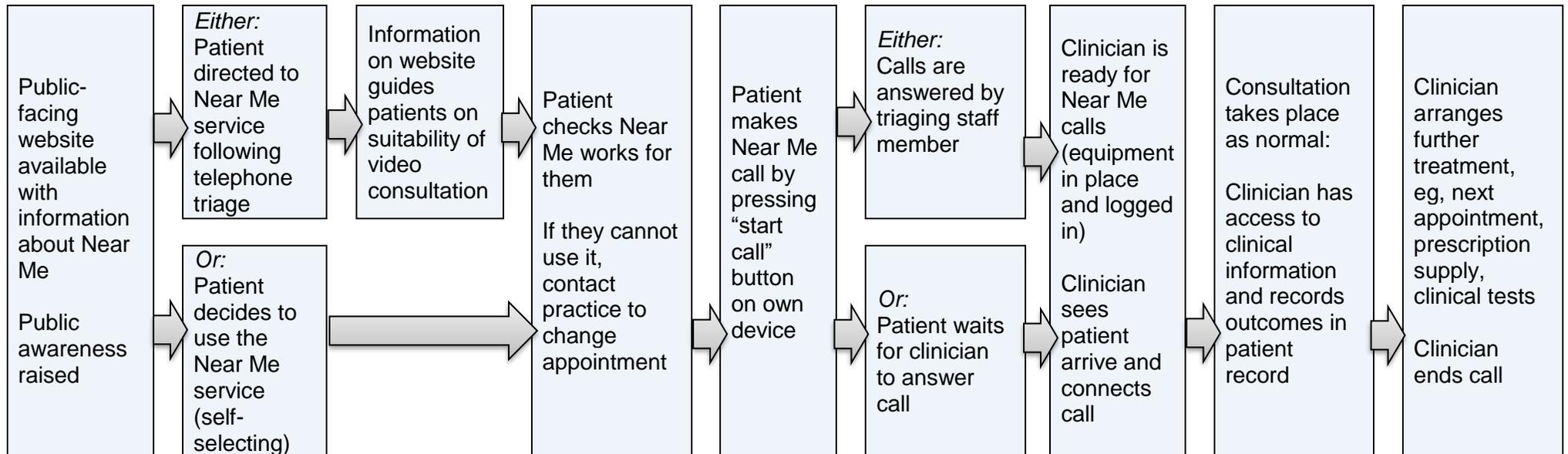
1	<p>Ensure all staff receive training on how to use the underlying video consulting platform (Attend Anywhere) so they can use it themselves and/or explain it to a patient, either:</p> <ul style="list-style-type: none"> • Watch the training video produced by the national VC team, available via https://www.vc.scot.nhs.uk/attendanywhere/ or alternatively this film on YouTube https://youtu.be/6lzAg0SHKFo • Join a scheduled video training session with the national VC team, see available dates at https://www.vc.scot.nhs.uk/attendanywhere/ • If available, access training locally via NHS board/HSCP. • Use the written training resource in Appendix 3. <p>Ensure all Near Me users understand the need to consult from a confidential space with good lighting.</p>
2	<p>For all Near Me consultations, clinicians will:</p> <ul style="list-style-type: none"> • Have video consulting equipment in place (note if specific room is required) • Be logged into Near Me at https://nhs.attendanywhere.com/ • Check equipment works before starting the clinic (using “test my equipment” button in the waiting area) • Open the practice’s clinical system • Identify patient with Near Me consultation – either from clinical system or direct from waiting area (depending on process agreed above) • Connect the call and consult as normal • Record the consultation in the practice’s clinical system as normal • Arrange any follow up as normal.

APPENDIX 1: TEMPLATE CARE PATHWAYS

Scheduled care



Unscheduled care



APPENDIX 2: CLINICAL USE OF NEAR ME: EXTRACT FROM EVALUATION BY UNIVERSITY OF OXFORD

Given the prioritisation of scale up of video consulting for coronavirus resilience, the team currently evaluating the Near Me/Attend Anywhere programme across Scotland has prepared a report, available here:



Greenhalgh 2020
Interim summary of k

In terms of clinical use of video consulting (VC) in general practice, the report recommends:

1. **COVID-related calls** to a GP surgery are likely to consist of:
 - Asymptomatic people seeking **general advice**, which can usually be given by website and telephone (perhaps as a pre-recorded message)
 - Asymptomatic people who are **very anxious**, for which a VC may provide reassurance
 - Symptomatic people **seeking a diagnosis**, for which a VC may add value over telephone
 - People who are **unwell**, for which a VC may reduce the need for a visitThese categories overlap in practice, and clinical judgement must be used.
2. For **non-COVID-related conditions**, and with the caveat that case-based judgements will always need to be made, our research suggests that VC will be *most suitable* for the following:
 - **Chronic disease reviews**, especially if patients have some self-monitoring equipment at home and an existing relationship with the clinician
 - **'Administrative' appointments** (e.g. for re-issuing of sick notes, querying things)
 - **Medication-related consultations** (e.g. when the patient is well but needs to be seen before reissuing a repeat prescription)
 - **Counselling and similar services** involving therapeutic talking (in such consultations, video helps with rapport and reassurance)
 - **Dietetic advice** (but not for major eating disorders), some **speech therapy** and some **physiotherapy**
 - **'Duty doctor' or 'duty nurse' triage** when a telephone call is insufficient
 - Any condition in which the **trade-off between attending in person and staying at home** favours the latter (e.g. in some frail older patients with multi-morbidity or in terminally ill patients, the advantages of VC may outweigh its limitations)
3. On the basis of current evidence, we suggest that VC **should not generally be used for**:
 - Assessing patients with **potentially serious, high-risk conditions** likely to need a physical examination (including high-risk groups for poor outcomes from COVID who are unwell)
 - When an **internal examination** (e.g. gynaecological, rectal) cannot be deferred
 - **Co-morbidities** affecting the patient's ability to use the technology (e.g. confusion), or serious anxieties about the technology (though note that relatives may be able to help)
 - Some **deaf and hard-of-hearing** patients may find VC difficult, but if they can lip-read and/or use the chat function, this medium may increase accessibility.

APPENDIX 3: FURTHER INFORMATION

Further information about setting up Near Me is available if required. The aim of this document is to enable fast set up: previous documentation was designed around a slower timescale so is more detailed.

1. Resource Centre with information about the underpinning platform (Attend Anywhere): <https://nhs.attendanywhere.com/resourcecentre/Content/Home.htm>

2. Near Me national primary care resource pack:



Near Me Primary
Care resource pack v

3. Clinician Near Me user guide



Practice Clinician
Near Me User Guide.p

4. Posters for clinician walls



Quickstart
poster.pdf



Call Screen
Poster.pdf

5. Administrative Lead Near Me user guide



Practice
Administrative Leads

Contact details for further information:

For technical queries:

<https://www.vc.scot.nhs.uk/attendanywhere/>

For process queries: in the first instance, please contact the Near Me Lead in your NHS Board/HSCP