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## NEWS



## Guidance needed for singlehanded GPs to deal with covid-19 pandemic

## Adrian O'Dowd

London

Singlehanded GPs are worried about what will happen to their practice patients if they themselves become ill with the covid-19 virus and have to self-isolate, it has emerged.

The situation has been highlighted by a case of a husband and wife GP, both older than 70, who each have their own singlehanded practices in Nottingham.

Doctors Noble Vinayakumar Phillips and Naomi Phillips have sought, unsuccessfully so far, to secure assurances over what will happen to their patients if they both have to self-isolate.

Officials say practices should have been informed about how they can support each other, make better use of technology, and have access to "buddying" arrangements for practices with major staff absences.

Noble Vinayakumar Phillips of the Bilborough Surgery in Nottingham, who is 76, told *The BMJ*: "All these years, myself and my wife were able to support each other in case of emergencies or should one of us fall ill.

"We were already planning to retire. We have started discussions with the PCN [primary care network] and the CCG [clinical commissioning group] about our retirement. The discussions were slow and nothing concrete has happened but now with this coronavirus situation, the fear is if one of us falls ill in our house, the other will be grounded as well."

Naomi Phillips of the Radford Health Centre in Nottingham, aged 73, said: "Before, when one of us fell ill, we were able to cover each other and it is so difficult to get locums anyway and they are expensive. But now we have no clear contingency so I wonder what will happen if we have to be away from work."

Their son Joshua Phillips, a urological surgeon at the Royal Bournemouth and Christchurch Hospitals NHS Foundation Trust in Dorset, is worried about his parents' situation.

Phillips told *The BMJ*: "It's deeply concerning that they will still be working as frontline clinicians given that they are exactly in the group that should be self-isolating, not only because of their age, but also they have both got health problems which have never compromised their work but which do make them higher risk for severe illness.

"What really weighs on them is what happens when they have to go off, if one of them has a temperature or has the symptoms of coronavirus infection.

"They wouldn't dream of stopping working at such a crucial time for the NHS, but they have concerns about the lack of clear guidance for what should happen if they fall ill or have to self-isolate."

Official guidance does not seem to deal with the particular situation of singlehanded GP practices, but does advise that all healthcare staff shown to have the virus or symptoms should self-isolate.

In a letter<sup>1</sup> sent to GPs on 22 March, NHS England said: "It is important that you look after your and your practice staff's own health and wellbeing at this time."

Another letter<sup>2</sup> sent to GPs from England's chief medical officer Chris Whitty on the same day said: "We recognise the significant pressures that GP practices are under, which the necessity to self-isolate staff where they have symptoms compatible with coronavirus has inevitably made more acute."

The British Medical Association has also issued guidance<sup>3</sup> which says that all practices should use their "clinical and professional judgment" to ensure services provided are appropriate for patients, while protecting practice staff.

It does not refer specifically to singlehanded practices, but says that practices may want to work together to establish local "hot, cold, respiratory, and remote advice hubs" for patients that need ongoing routine care; those with symptoms of covid-19 who require care in the community; those who might be more likely to contract covid-19 due to conditions; and to provide remote advice (particularly for staff who are at risk).

In addition, the General Medical Council has provided a range of information<sup>4</sup> and advice for doctors during the current situation, which says it does not expect doctors to provide care without regard to the risk to themselves or others close to them, and that if a doctor knows or suspects they are infected, they should follow current public health advice, including self-isolating.

Richard Vautrey, chair of the GP committee at the BMA told *The BMJ*: "This is a difficult time for all GP practices, but especially smaller surgeries where there might only be one or two GPs and a similar number of nurses or other healthcare professionals working in their practice.

"That's why it's essential these practices, wherever they are in the UK, work closely with their relevant local groups, such as PCNs, health boards, clusters, and the NI federations, along with their commissioners, to ensure plans are in place and the necessary support offered to these GPs and their teams as covid-19 develops." Manik Arora, who represents Nottingham city practices in the Nottingham and Nottinghamshire CCGs, said: "Local practices have established buddying arrangements to provide back-up support for practices with significant staff absences.

"Clearly, singlehanded practices are particularly vulnerable to the impact of staff sickness and self-isolation as they employ fewer staff. But we are working to ensure all practices have the tools to support patients remotely as well as arrangements with neighbouring practices to redeploy support where it's needed."

- NHS England & NHS Improvement. Letter: Caring for people at highest risk during COVID-19 incident (22 March 2020). https://www.england.nhs.uk/coronavirus/wp-content/ uploads/sites/52/2020/03/200321\_GP-letter\_Annex-2\_FINAL\_2.pdf
- 2 NHS England & NHS Improvement. Letter to GPs (22 March 2020). https://www.england. nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/03/200321\_COVID-19\_CMO\_MD\_ letter-to-GPs\_FINAL\_2.pdf
- 3 BMA. COVID-19: steps for GP practices to take (23 March 2020) https://beta.bma.org. uk/advice-and-support/covid-19/practical-guidance/covid-19-steps-for-gp-practices-totake
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