

**Tuesday 18<sup>th</sup> August 2020 1600 hours**

**Important information for all General Practices – Please share this with everyone in your team as appropriate**

### **Support for Residents in Aged Residential Care (ARC) Facilities in Canterbury**

COVID-19 has put the spotlight on supporting aged residential care facilities and the valuable and specialised contribution that general practitioners make looking after residents. Should we have to deal with COVID-19, or some other emergency, there are vulnerabilities in the medical support that some general practitioners can offer, relying on locums for holiday and sick cover, for example.

#### **Locum Pool of GPs to Cover ARC Facilities during COVID-19**

The Primary EOC/CPRG would like to create a list of GPs who would not mind being contacted should there be a shortage of cover for residents or facilities. There would be no obligation to accept any work by being on the list, and you would be free to remove your name at any time. The list would only be consulted where usual cover, and usual back-up arrangements, fail or are unavailable.

To be ready to step in to cover different facilities for a locum, we think a GP locum would ideally have:

- Canterbury locum login activated for both Medi-Map and OneChart – creating a login requires an email to each.
  - <https://toniq.nz/products/1chart/#form>
  - <https://medimap.co.nz/register-now>
- Online death certification RealMe login (see [HealthPathways > Certification of Death](#) and [NZ Government](#))
- Remote access to your practice (for viewing HealthOne if needed)
- Ability to do virtual consultations, if required.

We would be very pleased to hear from any GPs who would like to have their name on this list to be contacted, should it ever be needed. If you have queries or need support to be ready, let us know at [eoc@cprg.org.nz](mailto:eoc@cprg.org.nz).

#### **Care Plans for Residents in ARC Facilities**

During a COVID-19 outbreak it is particularly important to reduce avoidable admissions of ARC patients. It is also more likely that usual nursing and GP staff will be unavailable at times, and covering staff may lack knowledge of the patient's premorbid state, and their wishes and those of their family/whānau about care.

A brief care plan is a valuable asset for these patients, in particular documenting goals of care, e.g., full active hospital treatment versus quality of life or palliative treatments in the facility where possible. Information about care plans and funding for these, is available on [HealthPathways > Care Plans](#).

There is no consistent place to store care plans in ARC facility notes. We suggest that care plans are stored on HealthOne as for other primary care patients, with a copy of the plan in the notes, and clear notification in the ARC notes that the care plan exists.

Where a plan is documented on a facility form or chart, consider asking a team member to add this information into an Acute Plan so it can be seen across the wider health system.

Kind regards,

Deborah Callahan  
Primary EOC Manager

Drs Hannah Gordon & Kim Burgess  
Clinical Leads

Akizumi Tominari  
Acting Pharmacy Lead

