**EEAST CFR COVID-19 (Coronavirus) Bulletin – 4th April 2020**

As you are aware the situation and advice in the UK continues to develop in relation to COVID-19. You can find the latest EEAST information and documents on [Need to Know](https://ntk.eastamb.nhs.uk/news/up-to-date-guidance-on-covid-19.htm) which as part of the community response team, you can also access from outside the Trust. This bulletin summarises some of the latest points in relation to community response and specifically a **change to guidance in the use of PPE** when attending all patients. The following are the key areas which remain in place or have now changed:

* CFRs should not respond to patients if they are subject to the latest “stay at home advice”. This can be found on [www.nhs.uk](http://www.nhs.uk) or [www.gov.uk](https://www.gov.uk/government/topical-events/coronavirus-covid-19-uk-government-response). This means that if you are staying at home due to you or one of your household having symptoms (or other criteria if specified) you should not book on duty as a CFR. This is sometimes also known as self-isolation.
* If a CFR is in the group recommended to follow more stringent criteria on social distancing, they should not respond to patients. The definitions can be found on [www.gov.uk](http://www.gov.uk) on these [pages](https://www.gov.uk/government/publications/covid-19-guidance-on-social-distancing-and-for-vulnerable-people/guidance-on-social-distancing-for-everyone-in-the-uk-and-protecting-older-people-and-vulnerable-adults). Currently this means that you should not respond as a CFR if you are aged 70 or older (regardless of medical conditions) or under 70 with an underlying health condition as listed.
* We are not currently deploying CFRs to calls where the patient is suspected to have Coronavirus following screening in AOC. We have reduced the criteria for auto notification to cardiac arrest only.
* The “lockdown” of AOC will continue - there will be no entry into the main AOC areas for anyone unless they are staff on shift or those providing immediate critical support (for example IT responding to a failure). There will be restrictions for CFRs who undertake shifts in AOC on the responder desk - they should either operate in a responding capability **or** in AOC. There is also now temperature screening taking place for anyone entering AOC.
* For the time being there will be no ride-outs for CFRs on operational resources (e.g. ambulances).
* Face to face local monthly CFR group meetings/training should not take place until further notice.   
  To maintain contact, we suggest running these as a virtual meeting. Please contact us if you require advice on how to run this type of meeting.
* **There is an important change to advice on PPE**. Fluid repellent surgical face mask, disposable gloves, and apron should now be worn when **attending any patient.** Eye protection should be worn if there is a risk of splashing e.g. patient has a cough or is in cardiac arrest. If you identify there is a person or household member with symptoms or subject to isolation, ask them to move into a different room or if outside, at least 2 metres away.
* The changes for patients in cardiac arrest remain in place:
* Recognise cardiac arrest by looking for the absence of signs of life and the absence of normal breathing. **Do not listen or feel for breathing by placing your ear and cheek close to the patient’s mouth**. If you are in any doubt about confirming cardiac arrest, the default position is to start chest compressions until help arrives.
* **CFRs should attempt compression only CPR** and **early defibrillation** until the ambulance (or advanced care team) arrives. Put hands together in the middle of the chest and push hard and fast. Early use of a defibrillator significantly increases the person’s chances of survival and does not increase risk of infection.
* Please do not attempt any airway or breathing management, including use of bag-valve-mask (BVM), handheld suction, oropharyngeal airway or oxygen therapy.
* After performing compression-only CPR, all rescuers should wash their hands, wrists and forearms thoroughly with soap and water; alcohol-based hand gel is a convenient alternative.
* When the ambulance crew arrive, they will be performance resuscitation procedures which increase the risk of transmission and require additional PPE. As a CFR, you should now **withdraw from the immediate vicinity of the patient** (i.e. out of the same room).
* If you need replacement PPE, then please ask the crew to replace what you use before you leave scene. If this is not possible, please contact your local CRM. If you do not have any PPE please do not book on or respond to any calls until you do.

We will keep you informed of any further changes to this guidance as the situation develops, but if you require any information regarding COVID-19 please contact your local CRM.

Thank you for your continued support.

Gary Morgan, Deputy Chief Operating Officer

**You can access all links at home from** [**NTK**](https://ntk.eastamb.nhs.uk/news/up-to-date-guidance-on-covid-19.htm)**. Copies are also available on** [**East24**](http://east24/coronavirus.htm)