

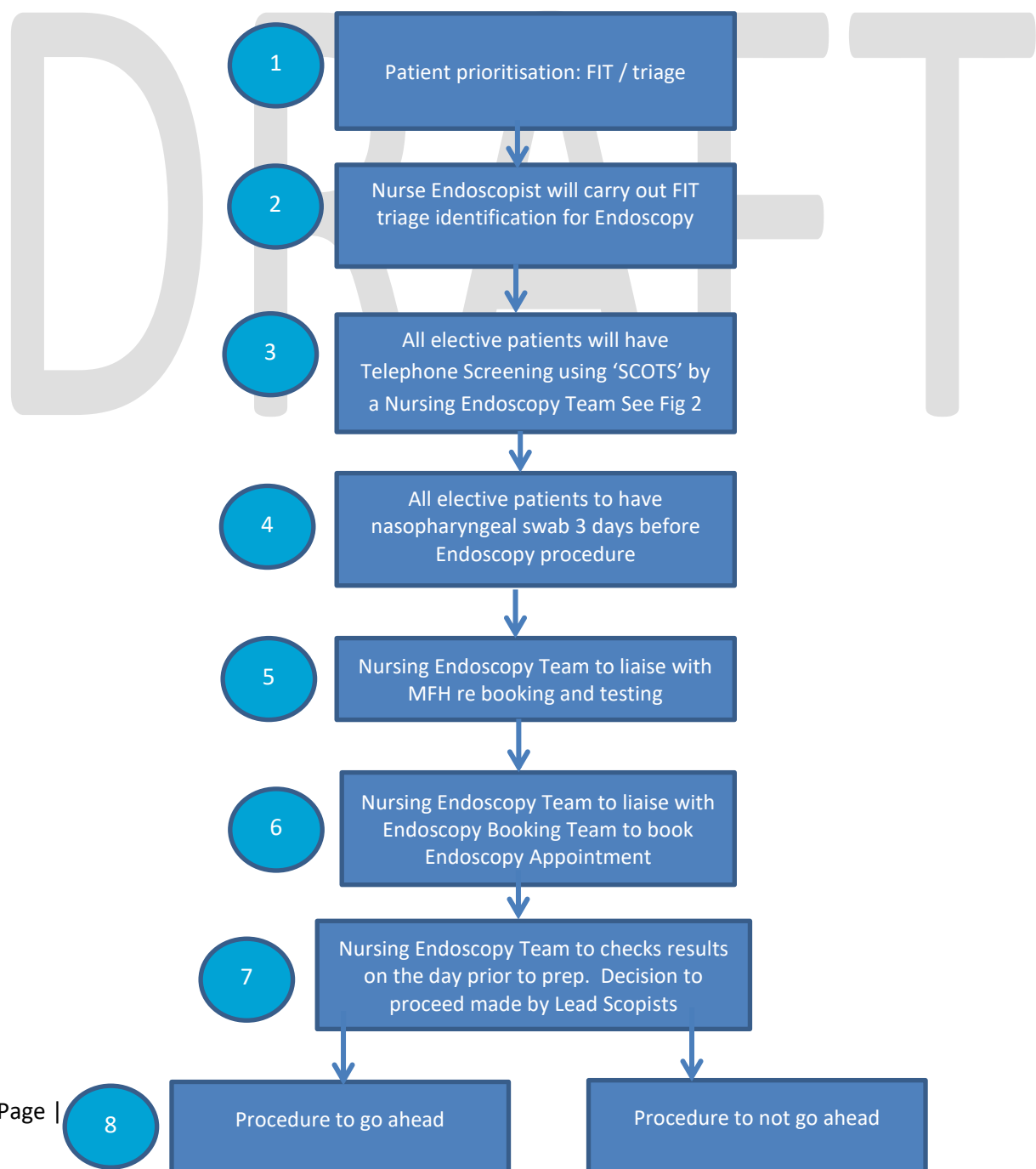
STANDARD OPERATING PROCEDURE FOR REINTRODUCTION OF ENDOSCOPY AT BSUH DURING COVID 19 PANDEMIC

This document is intended to be used alongside British Society of Gastroenterology (BSG) most recently issued 1st May 2020. It is also be used alongside Trust issued guidance and protocols regarding COVID risk management and infection control.

SUMMARY

Following the above guidance, BSUH Endoscopy will re-commence limited elective service to minimise COVID related risk as much as possible. The SOP will apply to patients scoped both in-house and with partner Independent Sector organisations

PRE PROCEDURE FLOW CHART



ON DAY PROCEEDURE

- Current level of air changes will dictate the downtime between procedures (TBC)
- Patients arrive in/enter department on Level 9 to minimise unnecessary journeys within the Hospital. All patients will be warned of this by the booking team at the time of booking their procedure with written confirmation included in their procedure paperwork.
- No relative permitted to wait in the shared waiting room, all patients must be dropped at the door. All patients will be warned of this by the booking team at the time of booking their procedure with written confirmation included in their procedure paperwork.
- All BCS lists and LGI Endoscopy Service lists will be restricted to two colonoscopies per list. This number will be reviewed.
- All procedure timings will be staggered to ensure only one patient arrives and waits at one time.
- Patients will be booked in in the Endoscopy Holding Bay and will wait in this room for procedure.
- Endoscopy at RSCH will be staffed with a runner and ensure minimised usage of PPE between patients.
- No Entonox will be used for any procedure.
- For LGI procedures, patients will be asked to wear a surgical mask and the patient nurse will sit behind the patient (no longer beside their head).
- Emergency inpatient ERCP and UGI procedures will continue to be done within RSCH Endoscopy estate Rooms 1&2.
- At RSCH elective patients will be recovered in their room.
- At the end of each list Endoscopy Nursing team will ensure appropriate level of clean down. Domestics will continue to undertake enhanced level of cleaning overnight.

To support the above it is necessary to zone sessions within the day to minimise risk from AGP emergency procedures cross contaminating with non AGP LGI procedures. Below details the initial scheduling:

RSCH Template

| RSCH Template | | | | | |
|---------------|---------------------|---------------------|--------------|---------------------|---------|
| | Monday | Tuesday | Wednesday | Thursday | Friday |
| Room 1 | ERCP/IP | OP elective Endo | ERCP/Broncho | OP elective Endo | ERCP/IP |
| Room 2 | | | | | |
| Room 3 | OP elective Endo | OP elective Endo | ERCP/Broncho | OP elective Endo | ERCP/IP |
| Room 4 | | | | | |

It is anticipated that capacity will be increased to up to 16 elective endoscopies per week whilst mainlining the necessary inpatient and ERCP activity through the week.

PRH Template

TBC

MFH Template

Potentially 5 sessions per week.

Nuffield Template

TBC. Nuffield site is only equipped to carry out Upper GI endoscopy procedures

Patient Transport (PTS)

Patient transport for BSUH admissions will be arranged as per usual processes.

Patient transport to MFH for screening and admission – patients will follow BSUH process where patients book PTS themselves when booking confirmed. Details of PTS to be provided by Pre Assessment team completing virtual assessment.

MFH has been added as a location for PTS.

PTS booking number is 0300 123 9841

Medical records

For the processes outlined above usual medical records arrangements will apply within BSUH (notes available at virtual pre assessment and then sent to endoscopy),

For patients having their endoscopy procedure at an Independent Sector hospital, the Endoscopy department would arrange notes to be sent to the appropriate location. The IS will ensure a complete and total patient record for the care provided to be included in the BSUH patient notes. This is to ensure that in the event of BSUH needing to respond to a coroner's investigation or subsequent complaint/ claim the patient notes contain the total documentation for the care provided at MFH. This will include but is not limited to

- Pre-operative assessment summary
- Consent to treatment form
- Endoscopy report
- Nursing notes

A copy of the endoscopy report will go to the patient and GP as part of the automated Medway process at BSUH.

Following discharge medical records will be collected from the IS (to be arranged by MFH) and delivered to Clinical Coding at RSCH. Clinical Coding will return to Central Library as per standard practice.

The Endoscopy Department will discharge the patient on the system appropriately.

DRAFT

Figure 1: Aproved referral management for colorectal systems

Referral management for colorectal symptoms: Covid-19

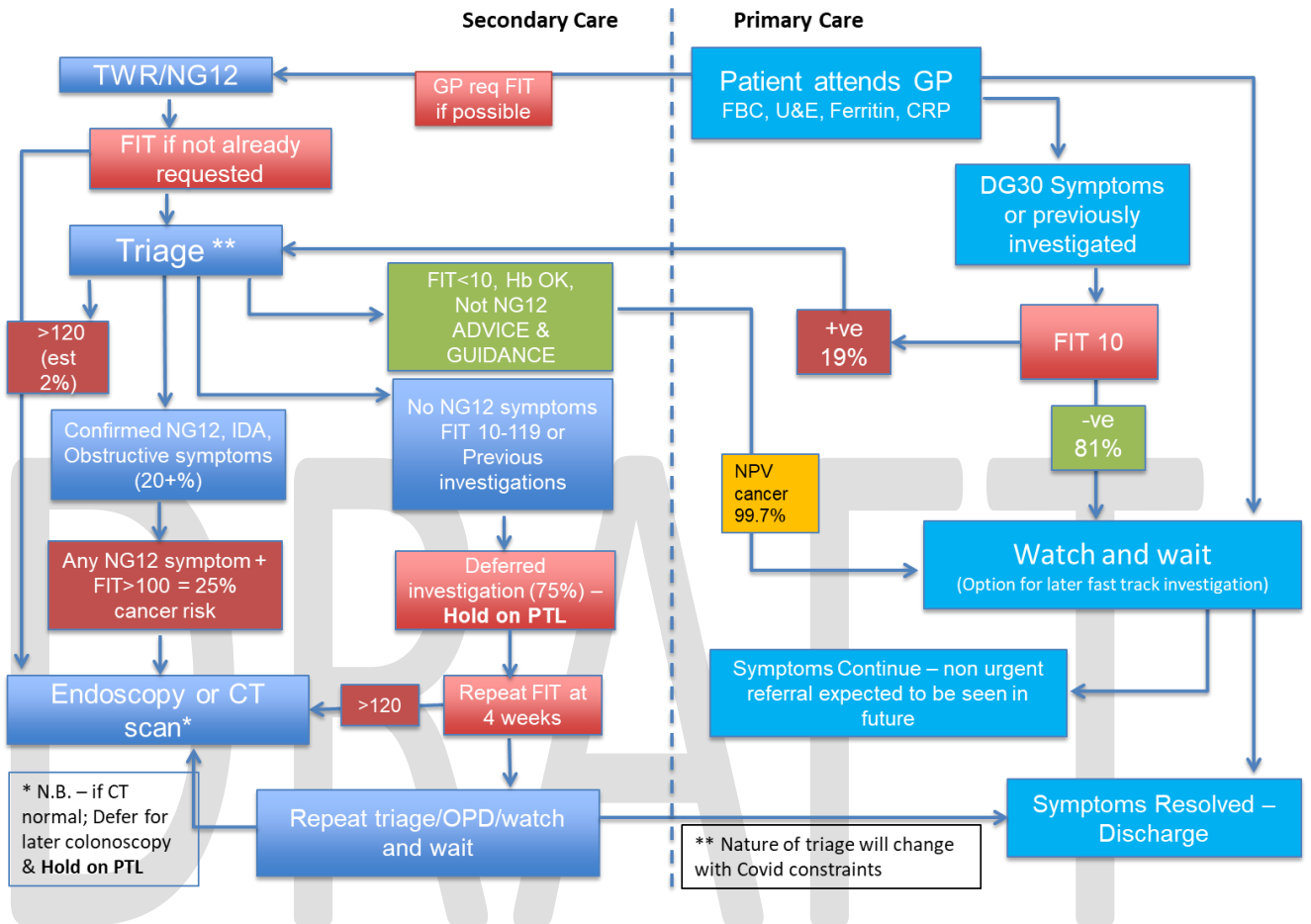
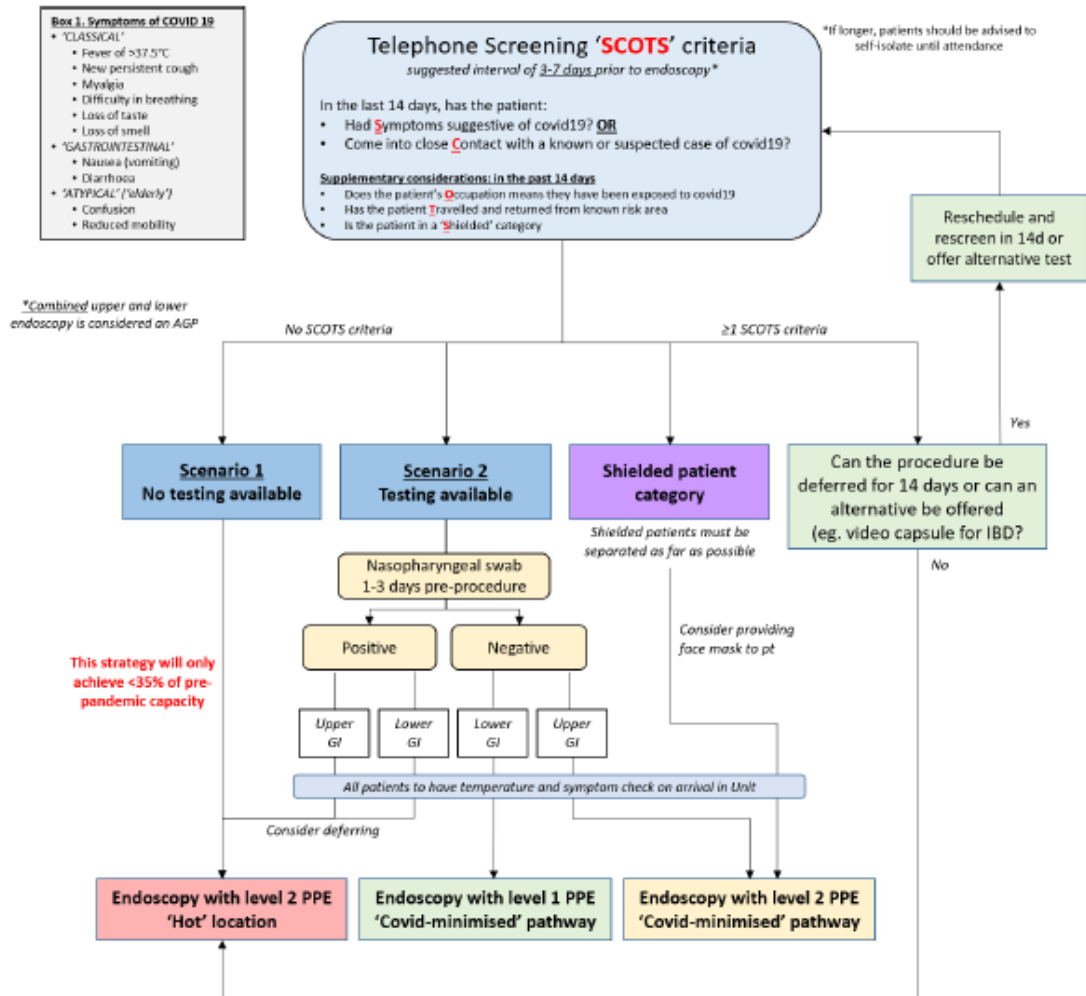


Figure 2: BSG recommended CoVID screening / pathway guidelines

Key visual summary of recommendations



Source British Society of Gastroenterology