

Coming to a Practice near you soon...

COVID OXIMETRY@HOME (CO@h)

Remote Monitoring Service



Stakeholders from across BaNES, Swindon and Wiltshire have been working together to develop a COVID Oximetry @home service (CO@h) in line with national guidance. Following a soft launch on Monday 23 November, we will now start to bring more and more Practices online. Once you have received your Patient Packs, which include pulse oximeters and information leaflets, you will be able to refer clinically appropriate patients into the service. However, we do need to do this in a controlled way so that the service grows safely, so please do be patient with us.

In the meantime, if you have any questions or concerns, please contact Michelle Reader, COO, michelle.reader@medvivo.com.

About the Service

- Operates 08:00 – 20:00 hrs, 7 days a week
- Staffed by senior clinicians: Advanced Nurse Practitioners and GPs
- Referral should be made via SystmOne using the remote booking process - or call the CO@h team on 0300 111 2519
- Where available, patients should be handed an information pack which contains a pulse oximeter and diary
- Where a patient has not been given an information pack (for example where they have been assessed remotely prior to referral), the CO@h team will arrange delivery to the individual's place of residence; this may take up to 12 hours
- Once the referral is received by the CO@h service, and the patient has received their pack, they can expect a call within 4 hours from a clinician to onboard them and talk them through the process - how to submit oximetry readings, what to do if symptoms get worse etc.
- Patients will typically remain with the service for 14 days
- On discharge, the pulse oximeter will be collected from the patient's home

Referral Criteria

Patients should be referred following **clinical assessment** (remote or face-to-face) only. This service is for people who are:

- Diagnosed with COVID-19: either clinically or positive test result **AND**
- Symptomatic **AND EITHER**
- Aged 65 years or older **OR**
- Under 65 years and clinically extremely vulnerable to COVID

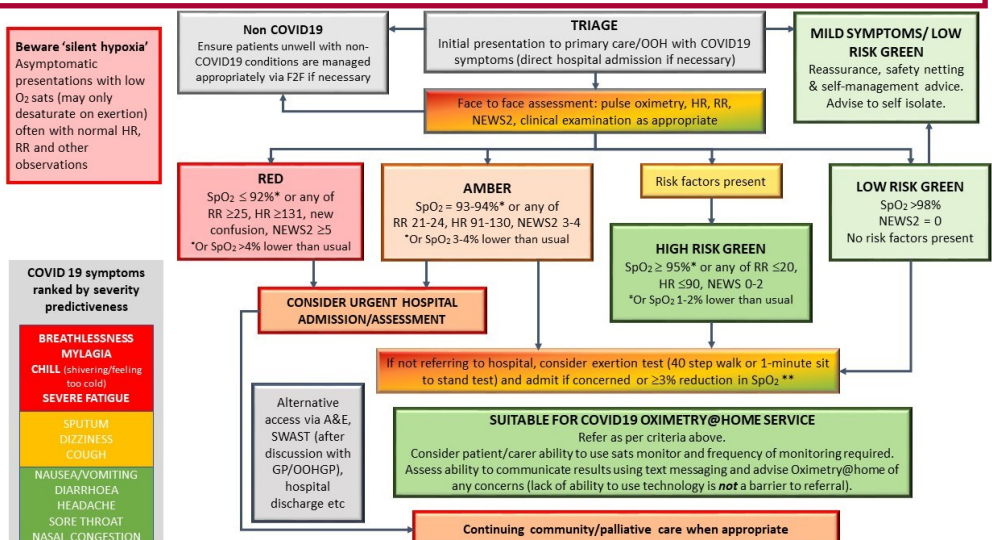
The Clinically Extremely Vulnerable to COVID list should be used as the primary guide.

Clinical judgement MUST apply and take into account multiple additional COVID risk factors; it is anticipated that this will already have led to inclusion on the Clinically Extremely Vulnerable list, **BUT** also consider individuals with a learning disability, those from a BAME background, etc.

This service is not available to those under 18 years of age.

Identifying clinically appropriate patients

- Wherever possible, a baseline pulse oximetry reading should be taken.
- The CO@h service should be considered if oxygen saturation levels are 95% or higher.
- If oxygen levels are 94% or less, further clinical assessment, or referral to the CO@h service with the option of more intense clinical assessment and oversight in the community, or hospital admission e.g. if 92% or less, should be considered.
- Patients with COPD will be accepted onto the service but their baseline SaO2 needs to be confirmed at the point of referral as this will be used to determine all following assessments.



**See also: <https://www.cebm.net/covid-19/what-is-the-efficacy-and-safety-of-rapid-exercise-tests-for-exertional-desaturation-in-covid-19/>