

Patient Information

Your hospital care and treatment during the Coronavirus (COVID-19) pandemic

This information sheet explains more about your care and how your treatment may change during the Coronavirus (COVID-19) pandemic.

What you need to know

- We are doing everything we can to provide the best care and treatment, including specialist procedures and surgery, during the Coronavirus (COVID-19) pandemic.
- We have reorganised the way we care for patients to reduce the risk of spreading Coronavirus (COVID-19) and to make sure we provide the safest possible environment for patients and staff.
- In certain circumstances and where it is unavoidable, your treatment may be disrupted, delayed or carried out differently during the pandemic.
- There may be periods during the pandemic when we will offer fewer specialist procedures and surgery than normal.
- Whatever happens, we will keep you informed and involved in any important decisions about your care and treatment.

What you need to consider

- Coming into hospital may increase your chances of contracting Coronavirus (COVID-19), or you may already have the virus when you arrive at the hospital, even if you have no symptoms.
- If you have Coronavirus (COVID-19) while you are in hospital, it could make your recovery
 more difficult or increase your risk of serious illness and / or death. However, we are confident
 that our screening protocols and patient pathways are robust and we have effective infection
 and prevention control systems in place.
- You may decide to delay your treatment because of the Coronavirus (COVID-19) pandemic. If you are thinking of delaying your treatment, please speak to us. We will explain the risks of delaying your treatment to you to help you make a decision.

• If you have been invited in to have treatment, your clinical team believes that the benefits of your visit far outweigh any risks.

Timing your treatment and reducing your risks

Weighing up the risks and benefits of going ahead or delaying your treatment is very important. The risks of having Coronavirus (COVID-19) infection around the time of the treatment depend on:

- The type of treatment generally more major procedures such as operations involving general anaesthetic (so a patient is asleep) and/or on the heart and lungs, appear to carry much greater risk of complications and death if Coronavirus (COVID-19) develops around the time they take place.
- Your risk factors see 'people at high risk' and 'people at moderate risk' on pages 4 and 5, for more information.

Please note - you will need to self-isolate for 14 days before you come into hospital if:

- Your risk is higher because you are in a high-risk category
- Or you are having one of the types of procedures detailed above (operations involving general anaesthetic and/or on the heart and lungs).

Please speak to your healthcare team for further advice.

What will happen if you decide to go ahead with your treatment?

Before your admission to hospital for a procedure

- We will get in touch with you by telephone, text, email or letter and carry out consultations by video or telephone rather than face-to-face.
- We will rely, where possible, on your local hospital to send important tests results and letters to us.
- We may also ask you to email or post medical information to us.
- Your pre-assessment for a procedure will be by telephone with a specialist nurse and possibly an anaesthetist.
- We may arrange for you to be tested for Coronavirus (COVID-19) before your admission.
- Your procedure is likely to be postponed if you develop Coronavirus (COVID-19) symptoms or you test positive for the virus.
- Before a procedure we will usually ask you to go into self-isolation for a minimum of three days after testing, and to maintain strict hand hygiene by washing your hands regularly with soap and water and/or using hand sanitiser. You will be given information about this separately. If you fall into a higher risk category (see pages 4 and 5), or if you want to further lower your risk,

you should self-isolate for 14 days before having your treatment.

• If you are being transferred from another hospital, you may be nursed in one ward or side rooms while waiting for the results of further Coronavirus (COVID-19) tests and other tests, and then be moved to a different ward. This is to make sure we provide the safest possible environment for patients and staff and reduce the risk of spreading COVID-19 (Coronavirus).

Your procedure

- Your procedure may not take place at the hospital that you were expecting. We are providing services at both our sites: Royal Brompton Hospital in Chelsea and Harefield Hospital in Middlesex.
- Wards have been reorganised and staff will be wearing the personal protective equipment (PPE) which is appropriate to the area in which they are working.
- You may not meet the healthcare professional carrying out your procedure until the day of treatment, and it may not be the person you are expecting to carry out the procedure. He/she will be trained and experienced in carrying out your procedure.
- It is very unlikely that members of your family or friends will be allowed to visit while you are in hospital.
- You will be asked to observe strict hand hygiene and social distancing while in hospital and to wear a face covering.

After your procedure

- You will be discharged from hospital when you are ready to go home, or you may be moved to another ward to complete your recovery.
- We may check on your progress after you leave hospital by telephone or video consultation.
- Some follow-up care, or treatment in an emergency, may take place at your local hospital.

If you are coming to the hospital to have tests, such as scans and / or treatment (without a procedure being performed)

- We will get in touch with you by telephone, text, email or letter and carry out consultations by video or telephone rather than face-to-face.
- We will rely on your local hospital to send important tests results and letters to us.
- We may also ask you to email or post medical information to us.
- If you are coming for tests without a procedure, we will ask you about symptoms and exposure to Coronavirus and check your temperature but may not test you for COVID-19. However, we may ask you to have a test for Coronavirus (COVID-19) before your admission to the hospital.

- Your admission is likely to be postponed if you are unwell or test positive for Coronavirus (COVID-19).
- For diagnostic tests such as drug therapy and simple procedures without any form of sedation or general anaesthetic, isolation and Coronavirus (COVID-19) testing may not be needed before admission. However, we recommend that you reduce the risk of developing Coronavirus (COVID-19) before your visit to the hospital by social distancing, washing your hands regularly with soap and water and/or using hand sanitiser, and wearing a face covering.
- If you are being transferred from another hospital you may be nursed in one ward while you are waiting for the results of a Coronavirus (COVID-19) test and then be moved to another ward. This is so that we can provide the safest possible environment for patients and staff and make sure we reduce the risk of spreading COVID-19 (Coronavirus).
- You will be asked to observe strict hand hygiene and social distancing while in hospital and to wear a mask.

During your admission

- Wards have been reorganised and staff will be wearing the personal protective equipment (PPE) which is appropriate to the area in which they are working.
- It is very unlikely that members of your family or friends will be allowed to visit while you are in hospital.

Discharge

- You will be discharged from hospital when you are ready, or moved elsewhere to another ward to complete your recovery.
- We may check up on your progress after discharge by telephone or video consultation.
- Some follow-up care, or treatment in an emergency, may take place at your local hospital.

People at higher risk

People at high risk (clinically extremely vulnerable) from Coronavirus (COVID-19) include those who:

- have had an organ transplant
- are having chemotherapy or antibody treatment for cancer, including immunotherapy
- are having an intense course of radiotherapy (radical radiotherapy) for lung cancer
- are having targeted cancer treatments that can affect the immune system, protein kinase inhibitors or PARP (poly-ADP ribose polymerase) inhibitors, for example
- have blood or bone marrow cancer such as leukaemia, lymphoma or myeloma
- have had a bone marrow or stem cell transplant in the past six months, or are still taking immunosuppressant medicine
- have been diagnosed with a severe lung condition such as cystic fibrosis, severe asthma or severe chronic obstructive pulmonary disease (COPD)

- have a condition that means they have a very high risk of getting infections, severe combined immunodeficiency (SCID) or sickle cell disease, for example
- are taking medicine that makes them much more likely to get infections such as high doses of steroids or immunosuppressant medicine
- have a serious heart condition and are pregnant.

People at moderate risk

People at moderate risk (clinically vulnerable) from Coronavirus (COVID-19) include those who:

- are 70 or older
- have a lung condition that's not severe, such as asthma, COPD, emphysema or bronchitis
- have heart disease
- have diabetes
- have chronic kidney disease
- have a liver disease such as hepatitis
- have a condition affecting the brain or nerves, for example: Parkinson's disease, motor neurone disease, multiple sclerosis or cerebral palsy.
- have a condition that means they have a high risk of getting infections
- are taking medicine that can affect the immune system such as low doses of steroids
- are very obese with a body mass index (BMI) of 40 or above
- are pregnant.

If you need help or advice about any service or department at our hospitals, and feel unable to talk to those people responsible for your care, call the Patient Advice and Liaison Service (PALS) on 020 7349 7715 or email pals@rbht.nhs.uk. This is a confidential service.

October 2020