

To: • NHS trust and foundation trust  
medical directors  
• CCG medical directors

NHS England and NHS Improvement  
Skipton House  
80 London Road  
London  
SE1 6LH

**20 December 2021**

Dear Colleagues,

## **Action required: Contacting your patients about new COVID-19 treatments**

New COVID-19 treatments for the highest risk non-hospitalised patients are now available on the NHS. These drugs have been shown to reduce hospitalisation and may reduce death and will be available for the highest risk patients, many of whom are under the care of specialties such as yours. These include intravenous neutralising monoclonal antibodies and oral antivirals. Local COVID-19 Medicine Delivery Units (CMDUs) will assess patients and prescribe these treatments.

Most eligible patients are being sent a [letter](#) informing them of new treatments and will be automatically contacted by a CMDU in the event of a positive PCR test result.

However, some patients are not currently captured in NHS Digital national datasets and will therefore not be automatically contacted. We are asking you to contact these groups of patients so they know what to do if they test positive for COVID via PCR.

### **Action to take:**

- Contact patients under your care ASAP using the template letter (template letter attached separately) if they fall into the below cohorts. It is important to include their NHS number.
- You **will not** need to prescribe or dispense treatments.
- GPs and 111 are the main referrer for patients you are alerting. But you may prefer to refer a patient to a CMDU if they test positive.

### **Who you should contact**

There are 11 broad cohorts considered to be at highest risk from COVID-19, determined by an independent Department of Health and Social Care-commissioned group of clinical experts and agreed by the four UK nations. Full details of the patient cohorts can be found in Appendix 1 of the clinical commissioning [policy](#).

Most patients in these cohorts will be identified and contacted directly by a CMDU if they test positive and will not need to be contacted by you.

However, there are a modest number of patients who will not be identified automatically, including patients who have received a new diagnosis since **15 November** and defined subsets of the cohorts who cannot be identified from NHS Digital's data. Details of these patients are set out in the table below.

We are asking you to contact patients in these groups to make them aware of their potential eligibility for treatment and ensure that they know the steps they need to take.

| Policy cohort   | Who you need to contact   |
|---|---|
| Down's syndrome   | <i>No action required</i>   |
| Sickle cell disease   | <ul style="list-style-type: none"> <li>Any <i>newly diagnosed</i> patients</li> </ul>   |
| Patients with a solid cancer                                | <ul style="list-style-type: none"> <li>All patients you think may be eligible under the policy.</li> </ul>  |
| Patients with a haematologic malignancy                     | <ul style="list-style-type: none"> <li>All patients you think may be eligible under the policy.</li> <li>However, <i>no action is required</i> on individuals with the following conditions (unless they have been newly diagnosed): <ul style="list-style-type: none"> <li>Chronic lymphocytic leukaemia (CLL)</li> <li>B-cell lymphoma</li> <li>Follicular lymphoma</li> <li>Waldenstrom's macroglobulinaemia</li> <li>Multiple myeloma</li> <li>Acute lymphoblastic leukaemia (these are all included in cohort data)</li> </ul> </li> </ul> |
| Patients with renal disease                                 | <ul style="list-style-type: none"> <li>Any <i>newly diagnosed</i> patients or those who have had a recent renal transplant (since 15 November)</li> <li>All patients with CKD Stage 4.</li> </ul>   |
| Patients with liver disease                                 | <ul style="list-style-type: none"> <li>Any <i>newly diagnosed</i> patients who meet the policy criteria</li> </ul>  |
| Patients with immune-mediated inflammatory disorders (IMID) | <ul style="list-style-type: none"> <li>Any patient newly started on immunosuppressant medication as detailed in Appendix 1 of the policy</li> <li>Any patients who have had immunosuppressant drugs within the last 6 months <u>from a hospital</u> (<i>no action required</i> for those who receive those drugs via their GP)</li> </ul>   |
| Primary immune deficiencies                                 | <ul style="list-style-type: none"> <li>Any <i>newly diagnosed</i> patients</li> <li>Any patients with Autoimmune polyglandular syndromes/ Autoimmune polyendocrinopathy, candidiasis, ectodermal dystrophy (APECED syndrome)</li> </ul>   |

| Policy cohort   | Who you need to contact   |
|---|---|
| HIV/AIDS  | <ul style="list-style-type: none"> <li>Any <i>newly diagnosed</i> patients</li> <li>Any patient who has not listed their HIV status on GP records (if known)</li> </ul> |
| Solid organ transplant recipients   | <ul style="list-style-type: none"> <li>Any patients who have had a recent transplant (since 15 November)</li> </ul>   |
| Rare neurological conditions (multiple sclerosis, motor neurone disease, myasthenia gravis, Huntingdon's disease) | <ul style="list-style-type: none"> <li>Any <i>newly diagnosed</i> patients</li> </ul>   |

### Why you need to contact patients

We want to make potentially eligible patients aware of new treatments. These treatments must be given quickly after symptom onset to be effective, so patients need to act fast to get tested and be assessed for treatment.

Should people test positive for COVID-19 through a PCR test, most potentially eligible patients will be contacted by NHS Test & Trace on next steps and will be contacted by a CMDU for assessment and treatment.

However, the patients we are asking you to alert may not be picked up automatically by NHS Test & Trace. They will need to proactively contact their GP or 111 for a referral to a CMDU if they test positive. **This is why it is vital that you make your potentially eligible patients aware as soon as possible.**

Patients need to keep a PCR test kit at home to hasten the pathway if they test positive for COVID-19 and need treatment. Again, most potentially eligible patients will automatically receive a PCR test from NHS Test & Trace by 10 January 2022 but patients you are asked to contact will need to request a PCR test from NHS Test & Trace to keep at home.

### Referrals to a CMDU

In some cases you may want to make a referral to a CMDU for a patient under your care who has tested positive following a PCR test. Please tell your patients if this is the case. You can refer them via the appropriate CMDU that will be listed [here](#) (this page will shortly be updated to include a list of CMDU locations).

Please send an email (via NHS Mail) including:

- patient details
- NHS number
- underlying qualifying clinical condition
- date of symptom onset
- date of PCR
- where possible, also include a copy of the PCR pathology report.

Please notify the patient and their GP you are referring to the CMDU.

We appreciate the pressures you are currently under and are grateful for your support in helping to raise awareness and reduce hospitalisations and deaths from COVID-19.

More information on COVID-19 community-based treatments is available for healthcare professionals on the [NHS England and NHS Improvement website](#), where you can also find a copy of this template letter.

Information for patients can be found at [www.nhs.uk/CoronavirusTreatments](http://www.nhs.uk/CoronavirusTreatments)

Yours sincerely,



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National Medical Director  
NHS England and NHS Improvement



**Professor James D Palmer**  
National Medical Director, Specialised Services  
Senior Responsible Officer, COVID-19  
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