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BY EMAIL

Chief Executives, Public Health Agency/SPPG/HSC Trusts/ NIAS GP Medical Advisers, All General Practitioners and GP Locums (for onward distribution to practice staff) OOHs Medical Managers (for onward distribution to staff) RQIA (for onward circulation to independent sector health and social care providers

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Dear Colleague

PAUSE OF ASYMPTOMATIC TESTING FOR HEALTH AND SOCIAL CARE WORKERS AND FOR HOSPITAL VISITORS

Introduction

The Department of Health's COVID-19 Test, Trace and Protect Transition Plan published on 24 March 2022 set out the revised approach to test and trace for COVID-19 in Northern Ireland. The Plan explained how test and trace would change with arrangements becoming more proportionate, targeted and focused. The Plan also committed to keep all testing under review including routine asymptomatic testing (that is testing for those without symptoms) for those working in and visiting health and care settings.

The Department continues to monitor COVID-19 surveillance and epidemiological data very closely. While COVID-19 is still in circulation, levels of infection in the community are currently falling and the overall impact from serious illness remains low at this time. The COVID-19 UK alert level has reduced from Level 3 to Level 2 in recent weeks. Continued protection against the worst impacts of the SARS-CoV-2 virus is largely due to the success of our vaccination programme and the use of new COVID-19 treatments to protect those who are most at risk.

Purpose of letter

Given the improving context and current assessment set out above, the purpose of this communication is to advise that **routine asymptomatic testing** for health and social care workers using Lateral Flow Device (LFD) tests is to be **paused**.

The advice for those visiting hospitals and clinical settings to test using LFD tests is also **being paused**.



This updated advice will take effect from Monday 3 October 2022.

Health and Social Care (HSC) Trusts will continue to have autonomy based on local dynamic risk assessment to advise testing of asymptomatic staff and/or visitors in some clinical areas if they wish to do so, for example in clinical areas treating patients who are extremely vulnerable such as transplant and haematology patients.

Asymptomatic testing of adult social care staff, hospice staff and visitors to these settings is also being paused. Separate correspondence has been issued to these settings.

Rationale for Pausing Asymptomatic Testing

Community prevalence is a key driver of risk of infection to staff working in health and care settings. At lower prevalence the likelihood that individuals entering these settings are infectious also reduces, and the relative risk of onward transmission in these settings is lower.

Immunity in the population is high due to our successful vaccination programme and natural immunity from prior infection. The winter vaccination programme, which includes the COVID-19 booster and Influenza vaccine, has now commenced (starting with care home residents and staff) and will be extended over the coming weeks and months. This will further boost immunity and further protect our most vulnerable.

At lower prevalence levels, the proportion of positive test results that may be false positives increases. The risk of false positives could lead to staff having to isolate unnecessarily.

Testing that should continue

Staff should remain vigilant for symptoms of <u>respiratory illness including COVID-19</u> and should they develop symptoms they should test immediately with an LFD test in line with Circular HSS(MD) 17/2022. Note this guidance is currently under review and an updated circular is expected to issue shortly.

Testing to support the management of suspected or confirmed outbreaks should continue based on local dynamic risk assessment and public health advice as necessary.

Testing should continue in line with extant policy to support in–hospital clinical care and hospital discharge (note extant guidance HSS (MD) 22/2022 is under review) and to support those eligible for COVID-19 treatments who develop symptoms.

It is extremely important that hospital staff continue to advise potential visitors to health and care settings that if they are displaying symptoms of a respiratory infection, including COVID-19, **they should not visit a hospital or healthcare setting**. Further guidance for the general public can be found at: <u>Symptoms of respiratory infections including COVID-19 | nidirect</u>



Working for a Healthier People

Conclusion

This updated guidance takes account of the current disease trajectory and public health risk assessment in relation to COVID-19. The Department will continue to monitor the situation closely as it is likely that case numbers will increase as we progress through the coming Autumn and Winter period.

All advice in relation to testing will continue to be kept under review and measures, including reintroduction of arrangements for asymptomatic testing, may be necessary into the future should the risk assessment change and in order to mitigate against severe harm for the most vulnerable. HSC Trusts should retain a stock of LFD test kits for distribution to patients in line with the COVID-19 testing arrangements which continue to be advised. Stock should also be held for use in the event that routine testing for asymptomatic health and social care workers is reintroduced.

I would like to thank you for your ongoing commitment and dedication to serving the needs of patients across the health and social care system in Northern Ireland.

Yours sincerely

Murdra & My huch

PROFESSOR SIR MICHAEL McBRIDE Chief Medical Officer

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