

From the Permanent Secretary and HSC Chief Executive



To:
Chief Executives of
HSC Trusts
Public Health Agency
Health & Social Care Board
NI Ambulance Service
Regulation and Quality Improvement Authority

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Dear Chief Executive

KEY CHANGES TO TESTING FOR COVID-19

As you will be aware, there has been a significant focus on testing for COVID-19 over the last number of weeks. The purpose of this letter is to advise you that the Expert Advisory Group on Testing has recommended a number of additional changes to testing for COVID-19 in care homes and in hospitals. These important changes are set out as follows:

Testing in Care Homes

- From today, 24 April 2020, for all **new** outbreaks in care homes (nursing and residential), all residents and staff should be tested for COVID-19 as part of the initial risk assessment of each outbreak. I would ask all HSC Trusts to assist care homes in their respective areas with immediate implementation of this testing. Care home staff are likely to need support to undertake the necessary swabbing, and to ensure the correct information is collected about each resident and staff member tested. It is essential that the name of the home is clearly marked on all documentation relating to the outbreak, in particular on all forms accompanying swabs submitted for testing. Laboratory services will need to have clear arrangements in place for identification and recording of outbreaks in care homes. This should include consideration of 2D barcodes on specimens collected from care homes. It is essential that all tests processed, whether for residents or staff, can be clearly identified as connected to the relevant care home.
- In advance of discharge from hospital to a care home each patient must be tested for COVID-19, ideally this test will be undertaken 48 hours prior to the patient's discharge to their identified care home. **This testing requirement must not hold up a timely discharge.** The information from the test result, together with any supporting care information, must be communicated and transferred to the relevant care home. Some care providers will be able to accommodate individuals with a

confirmed COVID-19 positive through effective isolation strategies or cohorting policies. If appropriate isolation or cohorted care is not available with a local care provider, I would request that relevant Trust provides alternative appropriate accommodation and care for the remainder of the required isolation period. This alternative accommodation should also be used in the exceptional cases of test results not being available at the point of discharge from hospital.

- All new admissions to care homes from community settings, including from supported living accommodation, should have their COVID-19 status checked 48 hours before admission to the care home. The same conditions apply to patients admitted to care homes from community settings as apply to patients discharged from hospital to a care home.

Testing in Hospitals

- From Monday 27 April 2020 all new admissions to hospital (for elective and non-elective care) should have their COVID-19 status checked at the time of admission.

With the exception of the testing of patients discharged from hospital, which should already be happening, the other changes listed in this letter should be implemented from the date identified.

Could I ask that you please ensure that these additional changes are communicated across your organisation for implementation without delay.

If you have any queries on the content of this letter please contact Dr Brid Farrell, Chair of the Expert Advisory Group on Testing on Brid.Farrell@hscni.net.

Your cooperation in the above arrangements is very much appreciated.

Yours sincerely



RICHARD PENGELLY

cc. Dr Michael McBride
Prof Charlotte McArdle
Dr. Lourda Geoghegan
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Dr Naresh Chada
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