



3 July 2020

To: Directors of Public Health and Directors of Adult Social Services

CC: Adult Social Care Home Providers, Local Authority Chief Executives, NHS Trusts and Clinical Commissioning Groups (Chief Executives and Accountable Officers)

## **CARE HOMES: OUTBREAK TESTING AND REGULAR TESTING**

I wrote to you on 6 June 2020 about the extension of eligibility for whole care home testing to include all care homes for adults. We are pleased to confirm we have rolled out whole home testing to all care homes registered on the portal. Since its launch we have been able to provide whole home testing to over 13,500 care homes in England. It is really important any remaining care homes register for tests as soon as possible. I would like to thank you and your teams for the huge amount of work you have done to support testing in care homes.

In my last letter, I outlined that we had commissioned SAGE (Scientific Advisory Group for Emergencies) for guidance on retesting, outbreak testing and expansion of testing to other adult social care settings. Based on SAGE and Public Health England (PHE) advice and the recent Vivaldi research study into COVID-19 in care homes, we have developed the next stages in our testing strategy for adult social care. We will be rolling out the next stage in this strategy from 6 July.

### **Outbreak management and rapid testing for care homes with outbreaks**

We have developed a new outbreak management process for care homes which includes rapid testing. This will be rolled out from 13 July.

COVID-19 outbreak management protocol starts in a care home as soon as a case is identified, either through a lab confirmed case, or in certain circumstances when a resident's GP and Health Protection Team (HPT) agree following a clinically suspected case. The care home must inform the HPT as soon as a case is identified. The HPT will undertake a public health risk assessment to determine next steps. If an outbreak is suspected, the HPT will then order a batch of tests for rapid testing of the whole care home (residents and staff) through the local Pillar 1<sup>1</sup> lab capacity, and will utilise capacity across PHE and NHS laboratories as required to deliver results as quickly as possible. Testing (through Pillar 1 labs) should then be repeated on day 4-7 for all staff and residents who initially tested negative to reduce the false negative risk. Re-testing after 28 days from the last suspected case will be provided through Pillar 2<sup>2</sup> to confirm the outbreak has ended. Further details of the process are provided in Annex A.

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<sup>1</sup> Pillar 1: swab testing in Public Health England (PHE) labs and NHS hospitals for those with a clinical need, and health and care workers.

<sup>2</sup> Pillar 2: swab testing for the wider population, as set out in government guidance. This includes routine whole care home testing

## **Retesting in care homes without outbreaks**

From 6 July onwards, we will start to roll out weekly testing of staff and testing of residents every 28 days in all care homes without outbreaks through Pillar 2. Bank, agency and visiting staff such as social workers and Allied Health Professionals working in care homes should be included in the weekly staff tests in care homes. This approach is based on advice from SAGE, the evidence from the initial round of whole home testing and the results from our Vivaldi surveillance survey. It is a significant milestone that we are able to now roll out retesting. Retesting helps to prevent and control outbreaks in care homes and means steps can be taken to reduce the spread of the virus.

This approach balances the need for regular testing of staff, who will potentially be more exposed to the virus with the fact that regular testing can be difficult and distressing for some residents.

We will initially prioritise care homes for the over 65s and those with dementia because these homes were the first to receive whole home testing in the initial round of testing and based on SAGE and PHE advice. We will send local Directors of Public Health a list of care homes eligible for this first wave of retesting. We will then expand retesting to the remaining adult care homes from early August. We will review this strategy in September, taking into account prevalence levels in the community and local settings and the latest evidence. Based on this, the frequency of testing may be adjusted.

### *Start online registration now*

To be able to start fulfilling retesting requests from 6 July 2020, **we have now opened the digital portal** for the approximately 9,000 care homes for the over 65s and those with dementia to register for retesting. The digital portal can be accessed here <https://www.gov.uk/apply-coronavirus-test-care-home>

Increasing our testing capacity to carry out retesting of care home staff every week and for residents every 28 days is a significant task. As we move into this next phase I would therefore like to take the opportunity to outline how this retesting process will work. I have set this out in Annex B so that you can help explain the process and manage the expectations of individual care homes, who we understand will want to start retesting as soon as possible. We will continue to support care homes with testing, including continuing our webinars.

Local leadership of this is key, and we are grateful for the crucial role that you and your teams play. We would like your help on two further points. Firstly, we would be grateful for your support in making sure eligible care homes know about and understand our roll out plan and how they can access the retesting programme through the digital portal. Secondly, we need you to continue to use your local arrangements and excellent support mechanisms to support care homes prepare for testing and with any action that might be required as they receive the results of those tests. Given the importance of retesting in identifying and managing outbreaks, we would like your support in continuing to make sure care homes are carrying out testing and to the schedule we have set out. We are working on providing improved reporting to support you to do this.

## **Extra care and supported living**

We have listened to the sector about the importance of testing in other types of adult social care settings. As previously outlined, any expansion needs to be based on clinical advice on relative priority and available testing capacity. Some supported living and extra care facilities share similarities with care homes in terms of care and risks. We will roll out an initial round of testing for

staff and residents in the settings which meet certain risk-based criteria. We will shortly be writing to Directors of Public Health to ask them to help us determine which supported living and extra care settings in their areas should be able to access testing in this way. As with care homes, we will use the data from the initial testing rounds to inform our retesting approach.

### **Domiciliary care**

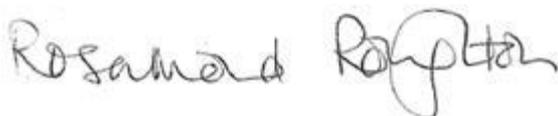
I would also like to take this opportunity to update you on our plans for domiciliary care. Asymptomatic testing for domiciliary care workers will be guided by the results from the PHE prevalence study into domiciliary care which is due shortly.

In addition to the adult social care testing strategy, work is underway to support and enable Directors of Public Health to direct some testing locally. This may include further testing resource within adult social care. Thank you for your engagement and work with us on this to date. The COVID-19 National Testing Programme will update on progress shortly.

If you have questions about a registration, delivery or collection of kits as part of testing, you can contact the Coronavirus Testing Call Centre on 0300 303 2713. It is open from 07:00 to 23:00 every day.

Thank you again for all you are doing and for your support in implementing the new social care testing strategy

Yours sincerely,

A handwritten signature in black ink that reads "Rosamond Roughton". The signature is written in a cursive, slightly slanted style.

Rosamond Roughton  
**Director General, Adult Social Care**

## Annex A: Process for outbreak management

- When a case of COVID-19 is identified (lab confirmed case) of staff or resident (or in some circumstances a clinically suspected case when agreed with resident's clinician and Health Protection Team (HPT)), care homes should follow the agreed process as outlined in guidance regarding [notification of a possible outbreak](#) and seek advice from the HPT. HPT will undertake a public health risk assessment to determine next steps.
- If HPT assess that this is an outbreak or a possible outbreak, they will provide advice on infection prevention and control. The HPT can assess whether further testing is required to confirm the outbreak (for example in a possible case when another diagnosis is just as likely e.g. influenza) or proceed to whole home testing via Pillar 1 immediately based on information received at notification.
- HPT orders tests via Pillar 1. Local Pillar 1 laboratories (PHE and NHS) are expected to work together to identify appropriate local capacity as required with NHS taking responsibility for ensuring this happens.
- The care home should also enter any new information on test results on the Capacity Tracker and update daily, including information reported to them of any further cases notified by staff who are not at work but tested in the community or advised they need to self-isolate (e.g. through NHS Test & Trace programme).
- The local public health system (DPH, CCG, HPT) will continue to engage with the care home over the course of the outbreak which is declared 'recovered' once 28 or more days have passed since the last clinically suspected or lab confirmed case is recorded. This is also the trigger point for the second round of whole home testing through Pillar 2 to confirm outbreak has ended.
- The local HPT will clarify the arrangements for local oversight of the management of care home outbreaks working in partnership with the DPH, Local Authority, CCG, and other key partners.

## Annex B: Retesting in care homes

- By registering on the portal, care homes tell us that they would like to carry out retesting and that they want to be sent test kits. We will roll out retesting to all care homes for the over 65s from 6 July and all other care homes from early August.
- Rolling out retesting to all care homes for the over 65s will take four weeks. Care homes for the over 65s will be divided into four even cohorts of care homes, with each cohort starting its cycle in subsequent weeks.
- Each week, we will distribute test kits to one quarter of care homes for older people. We will distribute enough kits to the care home for one month of testing (4x staff population and 1x resident population) each time an order is placed.
- When a care home receives their test kits, they should carry out whole home testing (staff and residents) in that same week.
- For the following three weeks, the care home should test staff weekly. After these three weeks the cycle begins again. Cohort one begins retesting in the first week (w/c 6 July), cohort two in the second (w/c 13 July) etc. At the end of the four-week cycle, each home will have completed whole home testing once, and staff testing on subsequent weeks.
- This is summarised in the diagram below

| Week     | 1                 | 2                 | 3                 | 4                 | 5                 | 6                 | 7                | 8                 |
|----------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|------------------|-------------------|
|          | w/c 6 July        | w/c 13 July       | w/c 20 July       | w/c 27 July       | w/c 3 August      | w/c 10 August     | w/c 17 August    | w/c 24 August     |
| Cohort 1 | Staff + Residents | Staff             | Staff             | Staff             | Staff + Residents | Staff             | Staff            | Staff             |
| Cohort 2 |                   | Staff + Residents | Staff             | Staff             | Staff             | Staff + Residents | Staff            | Staff             |
| Cohort 3 |                   |                   | Staff + Residents | Staff             | Staff             | Staff             | Staff+ Residents | Staff             |
| Cohort 4 |                   |                   |                   | Staff + Residents | Staff             | Staff             | Staff            | Staff + Residents |
| Phase    | Rolling out       |                   |                   |                   | Steady state      |                   |                  |                   |

- Care homes will need to reorder testing in time to be able to carry out their next month of testing and will receive an email reminder to prompt them to reorder.
- All care homes for older people or those with dementia who have registered on the portal for retesting, will receive their test kits during the last week of July at the latest.
- As with the first round of whole home testing, care homes can test over multiple days within the week if necessary. Care homes will need to book their couriers for each day that they carry out testing.
- In order to make full use of the available lab capacity, we strongly encourage care homes to carry out their testing throughout the week, including weekends and not just midweek. This will enable us to increase the amount of testing we can do.