



Standard Operating Procedure Covid-19 Health & Care Worker Testing Service V3 Reissued 1 May 2020

This SOP covers the testing of symptomatic health and care workers and symptomatic household contacts of health and care workers for Covid-19.

1. Introduction

- 1.1 Current national Public Health England (PHE) guidance for health or care workers who live alone that have symptoms of presumed Covid-19 (fever above 37.8°C plus/minus new persistent cough) is to stay at home on strict self-isolation for 7 days from the day when their symptoms started.
- 1.2 For those health or care workers that are well but whose household member(s) have symptoms of presumed Covid-19 (fever above 37.8°C plus/minus new persistent cough) then current PHE guidance is to stay at home and self-isolate for 14 days beginning from the start date of the first symptomatic household member.
- 1.3 This Standard Operating Procedure (SOP) for the use of Covid-19 testing by swab for polymerase chain reaction (PCR) molecular testing is designed to maintain clinical and care services, particularly those deemed as essential, by minimising the time that key health and care workers (HCWs) spend away from work during the Covid-19 pandemic.
- 1.4 The guidance in this SOP is based on current PHE guidance:
 - infectivity is significantly reduced 7 days after the onset of symptoms
 - individuals are considered most infectious while they have symptoms
 - mean incubation is approximately 6 days
 - staff adhere to guidelines on transmission based precautionsThese time frames will remain under review as evidence about the window between exposures and becoming infectious is further defined.

92. **Covid-19 testing for the Mid & South Essex Health & Care Partnership**

- 2.1 At present the test with the highest performance characteristics for diagnosing Covid-19 infection is a throat and/or nose swab taken with correct technique from the symptomatic health/care worker (or symptomatic household contact(s)) by a healthcare worker who is wearing standard PPE. The swab will be sent away to a reference laboratory for a Covid-19 PCR test. The turnaround time for this test is currently around 24-48 hours.
- 2.2 A throat and/or nose swab for Covid-19 can be performed **ONLY BY APPOINTMENT**. Health and care workers are not able to test themselves, their family or send swabs on work colleagues without referral through the Mid & South Essex COVID 19 Health & Care Worker Testing Service.
- 2.3 Appropriate health and care workers will be identified after discussion with their Line Manager and will be given a closed web link to register for a local Covid-19 test via an on-line form. Registering with the link will require the individual to input key information to facilitate the test and access a designated time slot from one of three test sites across Mid & South Essex:

Phoenix Court, Christopher Martin Road, Basildon, SS14 3HG

Southend Leisure Centre, Garon Park, Eastern Avenue, Southend on Sea
SS2 4FA

Wren House, Hedgerows Business Park, Colchester Road, Chelmsford
CM2 5PF

The hours of operation for each site will vary (the link will direct users to an appropriate time slot).

- 2.4 Covid-19 testing involves amplification and sequencing of viral RNA. Test sensitivity is dictated by the volume of virus acquired. Test sensitivity will be influenced by i) timing of the test ii) quality of the sample acquisition iii) delays in sample processing.
- 2.5 **Testing for Covid-19 will only be undertaken in those with established symptoms.**

3. **How to access testing**

- 3.1 The symptomatic health/care worker or self-isolating HCW with symptomatic household contact(s) should contact their line manager in the normal way to report their absence.
- 3.2 A risk assessment will be undertaken by the line manager to:
- assess the symptoms of the HCW and/or household members
 - determine the setting and role of the employee

- assess the impact to the service if the employee continues to self-isolate
- ascertain whether a COVID 19 swab for PCR would be appropriate for their team member based on three aspects:
 1. Date of onset of symptoms – **we will NOT** be offering the swab and PCR test to HCW's or household contacts **more than 5 days** after the onset of their symptoms.
 2. Essential to service – given the limited availability of testing, testing may not be warranted if other members of the team are able to cover the work.
 3. Ability to get to the swabbing service- there will be three sites for testing (see above). The HCW/household contact(s) will need to be able to access one of the sites.

3.3 If the line manager assesses that a COVID 19 swab/PCR test may be appropriate, then they will direct the HCW to a closed weblink where they will be able to register for a test by completing the relevant information for themselves or their household member(s) with symptoms. The HCW/household member(s) will be able to book a testing slot at their local site and will be given a timeslot for this along with directions. To note: symptomatic staff and/or all symptomatic household members will be offered the test.

3.4 Following attendance for the test, a clinician will contact the HCW/household member(s) directly with the results. The test results will be available within 48 hours. This information will not be shared with the HCW's line manager but the HCW is strongly encouraged to share their result with anyone they feel is appropriate.

4. Return to work guidance for staff that are not tested for Covid-19 by PCR test

4.1 Health/care worker is a household contact of someone with a new persistent cough and/or fever of 37.8°C:

- Health/care worker may work up to 24 hours from the onset of symptoms of the first household case to become unwell. The individual's line manager can consider (if appropriate) desk based or non-patient/service user facing duties for this time.
- Health/care worker then self isolates until day 14 from the start of onset of symptoms of the first symptomatic household member with new persistent cough and/or fever. The health/care worker can then return to work.

4.2 New persistent cough and/or fever of 37.8°C in health/care worker who is currently self-isolating

- Return to work at day 8 so long as health/care worker is feeling better and has been afebrile (not feverish) for 2 days. If a cough is the only persistent symptom on day 8 healthcare worker can return to work (assume post-viral cough).

5. Return to work for health/care workers that have been tested for Covid-19

5.1 Confirmed case of Covid-19 in a health/care worker

- HCW can return to work on day 8 after the onset of symptoms if clinical improvement has occurred and they have been afebrile for 2 days
- If a cough is the only persistent symptom on day 8, health/care worker can return to work (assume post-viral cough).

5.2 Cough and/or fever in health/care worker who is currently self-isolating:

- Test health/care worker around day 3 of onset of illness and if PCR positive for Covid-19, manage as 5.1.
- If negative, but symptoms persist, speak with your line manager and seek medical advice.

5.3 Health/care worker who is a household contact of someone with confirmed COVID19

- The health/care worker can return after Day 14 of the onset of symptoms in the COVID 19 confirmed household contact **unless the HCW becomes unwell**.
- **If the HCW becomes unwell** they can return to work on Day 8 after the onset of symptoms if clinical improvement has occurred and they have been afebrile for 2 days as in 5.1.

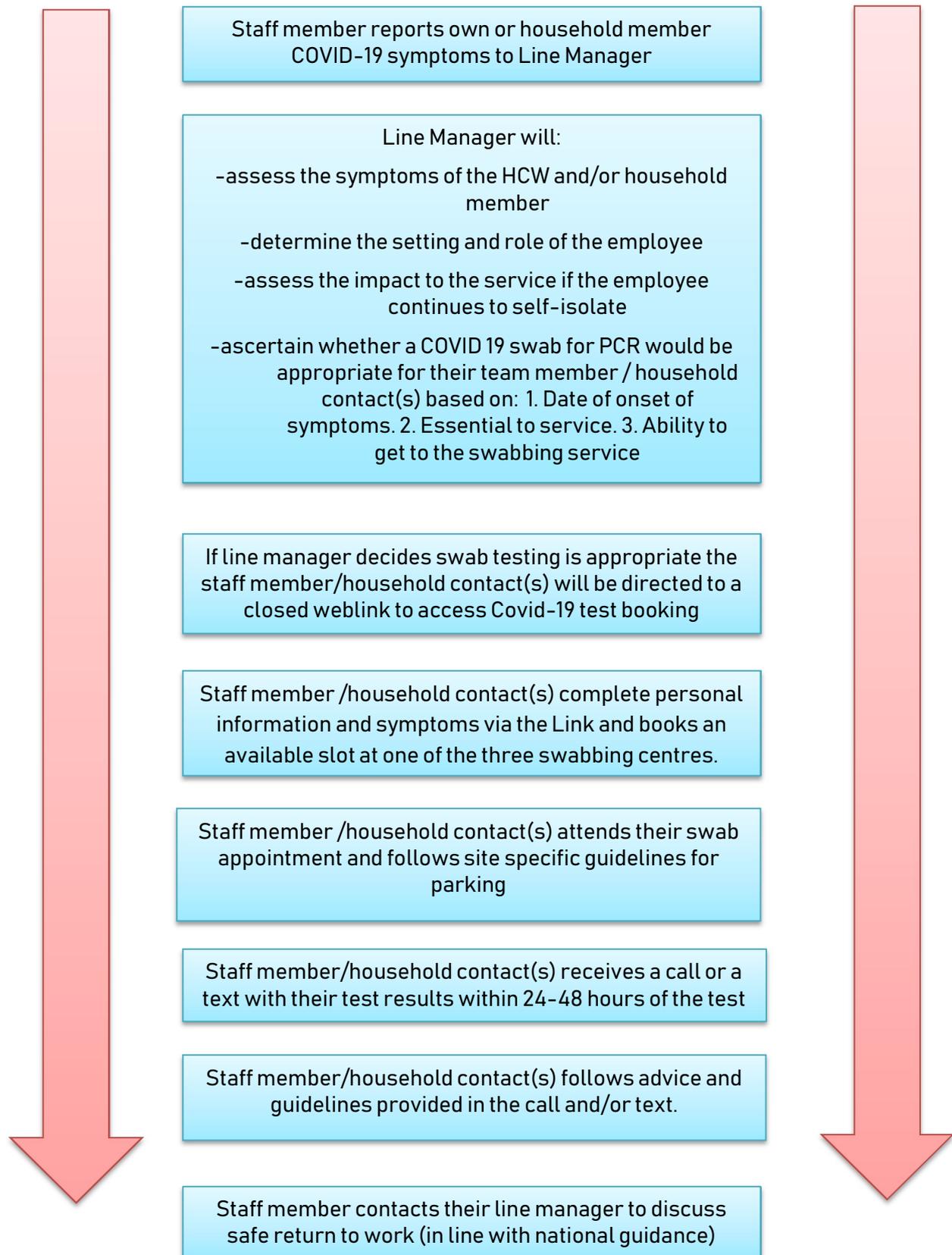
5.4 Health/care worker is a household contact of someone with a cough and/or fever:

- Health/care worker may work **up to 24 hours** from the date of onset of symptoms in the first household case to become unwell. The HCW notifies their line manager.
- If the line manager believes it appropriate, the HCW will be directed to a closed weblink so that their symptomatic household(s) contact arrange a test within the first 3-4 days from the onset of symptoms.
- If household contact(s) test PCR negative and the HCW worker is asymptomatic then they can return to work
- If any household contact tests PCR positive then manage as 5.3 above.
- If household contact(s) are not tested please follow 5.3

5.5 At some point Covid-19 antibody testing will be available to look at evidence of past recent infection with COVID 19 but these tests are not yet currently commercially available.

1 May 2020

Appendix 1 – Process Map



Appendix 2A - How to take Covid-19 swabs from symptomatic health/care workers/household contacts at Phoenix Court & Wren House

PPE

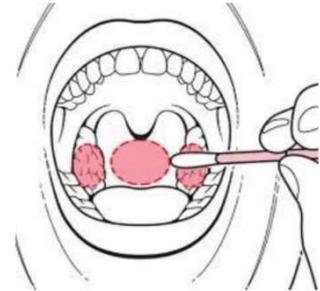
Appropriate PPE must be worn.

Taking a Swab

Explain the procedure to the person.

Oropharyngeal (throat) swab

- Hold swab at end of stick
- Tilt head back
- Swab the patient's posterior pharynx and tonsillar area (avoid the tongue)



Nose swab

- One side only is sufficient
- Place swab back into transport medium

Packaging

1. Ensure the lid is tight
2. Place the swab in specimen bag in the sealable pocket
3. Place the current request form in the separate outside pocket
4. Without contaminating the second bag, double bag the specimen.
5. Ensure these bags are packaged / stored appropriately for courier collection.

Appendix 2B - How to take Covid-19 swabs from symptomatic health/care workers/household contacts at the Lighthouse Centre, Southend (using Eurofin Testing Kits)

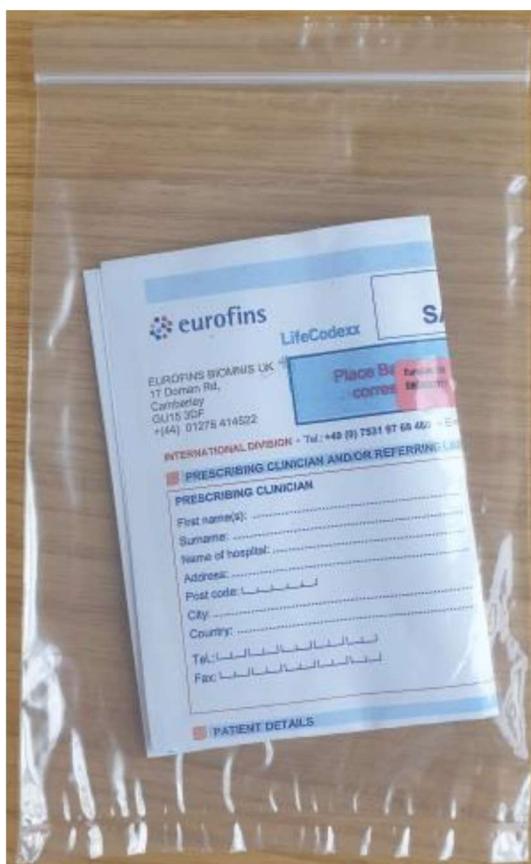
PPE

Appropriate PPE must be worn.

Swabbing kits

Each swabbing kit will contain the following:

- 1) Large sample self-adhesive sample transport bag (clear)
- 2) Dry swab in a self-adhesive sample bag
- 3) Request form in a clear marsupial/pouch



Samples must be sent using barcode-labelled request form and barcode-labelled dry-swab-tubes in two strictly separate envelopes: one with sample tube, one with the request form. This is to avoid any contamination of the TRF documents to ensure safe and fast handling of your samples.

NOTE: The Eurofins swab tube and request form have a pre-printed barcode affixed. **DO NOT** remove these barcodes. Eurofins will only accept samples and request forms labelled with these to ensure the most optimal throughputs and process security for the sake of your patients.

Taking a Swab

Explain the procedure to the person. A single viral swab must be used to swab both the nostrils.

Fill in the request form containing the clinical information. Please ensure all patient details are completed in full (an addressograph can be used if available). Please ensure that you complete the field 'Name of Hospital' with the names of swabbing centre. The name used for this should be consistently completed.

Label the sample tube with patient identifiers /addressograph ensuring that the tube has the same Eurofins pre-printed barcode as the request form.

Nasopharyngeal dry-swab

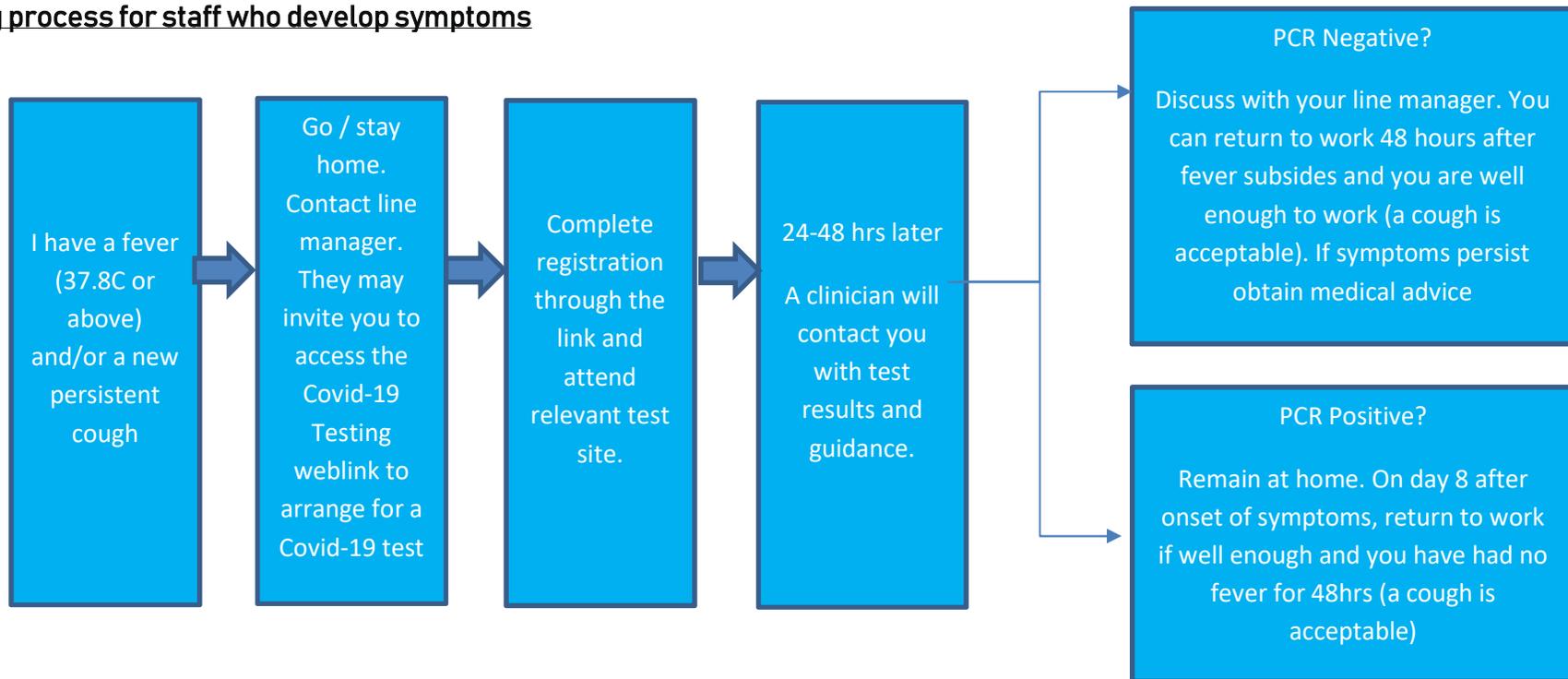
- Keep the patient's head tilted back
- Insert the dry-swab into the nostril and gently push the dry-swab while rotating in as far as possible in parallel with Palate
- Leave the swab in place for a few seconds and then slowly remove the swab while gently rotating it
- Repeat for the other nostril using the same swab



Packaging

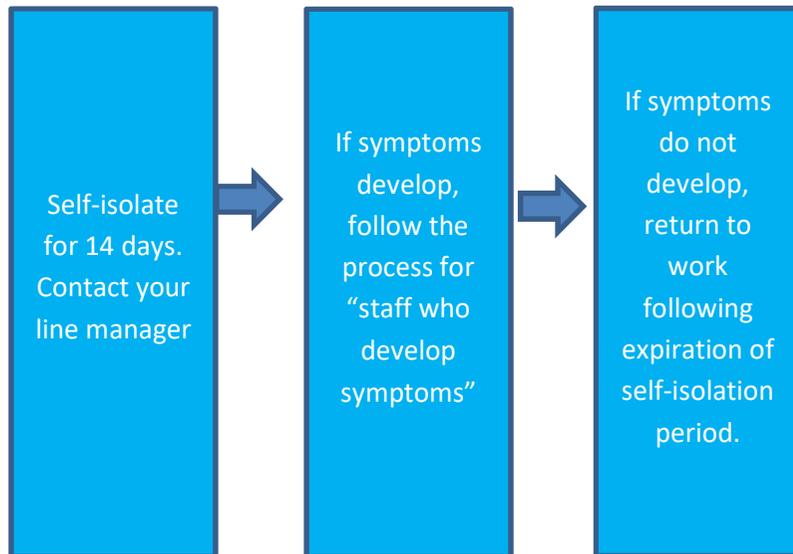
1. Place swab back in its tube and make sure the tube is firmly closed
2. Disinfect the outside of the tube with virucidal disinfectants
3. Place tube containing the swab into the provided plastic specimen bag
4. Seal the specimen bag firmly
5. Place the request form back in to the clear marsupial / pouch bag
6. Place both the sample (in sealed bag) and the request form (in clear bag) in to the large transport bag and seal
7. Keep sample refrigerated (+2°C / +8°C) while stored

Appendix 3A – Flowchart for Covid-19 – Testing Process
Testing process for staff who develop symptoms



Appendix 3B – Flowchart for Covid-19 – Testing Process

Covid-19 process for staff who are a household contact of a person who has tested positive for Covid-19



Appendix 3C – Flowchart for Covid-19 – Testing Process

Covid-19 testing process for staff who have had a household contact(s) with symptoms (fever of 37.8C and a new persistent cough)

