Title: Testing and Tracing Paper

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Action required:
☐ For noting
☒ For discussion
☐ For decision

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Testing and Tracing Paper, 15th of December

Updates are provided below regarding the following aspects of Testing and Contact Tracing:

1) Activity levels across sampling, laboratory testing and contact tracing,
2) Turnaround Times,
3) Support services for delayed tests,
4) Testing Programmes,
5) Process improvements,
6) Service Model: Testing and Tracing,
7) Update on key challenges and issues.

1. Activity levels across sampling, laboratory and contact tracing

Sampling in the community and in acute settings.
Over the seven-day period, 7th – 13th December, there has been approximately 85,374 swabs taken for COVID-19 testing. A total of 38,170 swabs were taken in the community, the majority were performed at fixed testing sites and a portion as home visits. Approximately 24,716 swabs were taken in acute settings. The remainder 22,488 swabs were taken as part of the Serial Testing Programmes of staff in Residential Care Facilities and staff in Food Production Facilities.

Please note; data from 6th December – 12th of December show that the 0-10 age group makes up 20.9% of all referrals, the age group with the largest percentage of referrals. The detected rate for the 0-10 age group is 3.0%. The 31-40 age group, which made up the second largest percentage of all referrals, 16.3% of all referrals, have a significantly higher detected rate of 5.8%.

Laboratory Testing
Over the seven-day period, 7th – 13th December, there has been 81,576 lab tests completed. A total of 53,342 of these tests were processed in community laboratories and 28,234 tests were processed in acute laboratories.

Contact Tracing
From 8th – 14th of December, a total of 10,016 calls were made in the Contact Tracing Centers. A total of 2,235 of these were Call 1s which involves the communication of a detected result. The remaining 7,781 calls that were completed related to contact tracing.

Over the past seven days, the average number of close contacts per case was 3.8.
Contact tracing is carried out in Galway (HSE), Limerick (HSE and Revenue), Cork (HSE), Dublin (Sandyford), Dublin (UCD), Parkgate street/Merion Lane and Kells (HSE).

Additional activities which are ongoing in contact tracing include active surveillance calls daily or every second day. In addition to the daily active surveillance texts we have been sending since May. Furthermore, we are piloting Source Identification (Retrospective Tracing). This will be implemented fully by mid-December.
2. **Turnaround Times (8\textsuperscript{th} – 14\textsuperscript{th} of December)**

*End-to-end turnaround time*
We continue to keep sharp focus on end-to-end turnaround times, highlighting any opportunity for improvement, while recognising that some cases are increasingly complex in nature.

Over the seven-day period, 8\textsuperscript{th} – 14\textsuperscript{th} of December;
- The median end-to-end turnaround time, from referral to SMS, for **not detected** tests in the community setting was **1.5 days**.
- The median turnaround time for time, from referral to communication of a **detected result** by SMS, in community settings was **1.8 days**.
- The median end-to-end turnaround time, from referral to the end of contact tracing, for **detected cases** in the community setting was **2.1 days**.

**Overall Swab to laboratory result communicated – Medians**
- 26 hours in Acute.
- 30 hours in Serial Testing.
- 30 hours in Community.

**Referral to appointment**
In the community, the median time from referral to appointment was 0.2 days.

94\% of GP referrals are provided with a COVID-19 test appointment within 24 hours.

**Swab to lab result**
For swabs processed in a community lab, the median time for swab to lab result was 27 hours.
For swabs processed in an acute lab, the median time for swab to lab result was 25 hours.
The combined median time from swab to lab result was 26 hours.

**Contact Tracing:**
The median time to complete all calls, from the 8\textsuperscript{th} – 14\textsuperscript{th} of December was 0.8 days.
3. Support services for delayed tests - Delayed Test Result Search Service for GPs, members of the public and HSE staff/healthcare workers.

**HSELive**

If a member of the public has been waiting longer than two days for a test result, they can contact HSELive on 1850 24 1850. The HSELive team will take all the required details and will send this information to the Delayed Test Result Search Service. The Search Service will get back to the caller directly and aims to complete searches within 24 hours of the @HSELive call.

- In the last seven days (Dec 7th – Dec 13th), 624 queries have been received.
- This has increased from last week where 570 queries were received. (9%↑ increase).
- This has also increased in comparison to the last thirty days, where 599 weekly queries were received on average. (4%↑ increase).
- A total of 94% of queries received in the last seven days were fully resolved within the 24-hour target.

**GPs**

In collaboration with the ICGP, there is now an established email service for GPs whereby GPs can submit their query using a password protected form in respect of a delayed test result. Results are communicated to both the GP and patient.

- In the last seven days (Dec 7th – Dec 13th), 26 queries have been received.
- This has increased from last week where 12 queries were received. (116%↑ increase).
- This has also increased in comparison to the last thirty days, where 14 queries were received weekly on average. (86%↑ increase).
- A total of 100% of queries received in the last seven days were fully resolved within the 24-hour target.

**Healthcare Workers & HSE Occupational Health**

Staff can enquire about their delayed test result via the Healthcare Worker Covid-19 Helpline on 1850 420 420. Queries are directed to the Delayed Test Result Search Service. Occupational Health can also direct queries to the Search Service via the GP email address using a password protected form. Results are communicated to both occupational health physician and healthcare worker.

- In the last seven days (Dec 7th – Dec 13th), 74 queries have been received.
- This has decreased from last week where 131 queries were received. (44%↓ decrease).
- This has also decreased in comparison to the last thirty days, where 104 weekly queries were received on average. (29%↓ decrease).
- A total of 99% of queries received in the last seven days were fully resolved within the 24-hour target.
4. Testing Programmes

**Serial Testing in Residential Care Facilities**
Serial testing in Residential Care Facilities (RCF) commenced on the 23rd of June. To date, the programme has completed 365,279 tests and identified 1,124 detected cases. This is a detected rate of 0.31%.

Cycle 5 of serial testing in residential care facilities (RCF) commenced on the 11th of November for a four-week period, ending 8th December 2020. Cycle 5 of serial testing of RCF’s completed 66,626 tests and identified 217 detected cases. This represents a detected rate of 0.33%. Cycle 6 of serial testing of RCF’s commenced on 9th December 2020 for a four week period. As of 15th December 2020, 14,086 tests have been completed, with 57 detected cases (detection rate: 0.4%). Currently, results are being provided to Residential Care Facilities within 48 hours where these results were previously communicated after 72 hours.

At present, work is underway to include mental health facilities and disability services that provide 24-hour care to their residents, as part of this testing programme. Direction on the inclusion rationale of these facilities is being guided by Public Health.

A schedule of testing over the Christmas period has been developed and communicated with all parties involved in the serial testing of residential care facilities.

**Serial Testing in Food Production Facilities**
Serial testing in food production facilities commenced on the 21st of August. To date, the programme has completed 73,986 tests and identified 384 detected cases. This is a detected rate of 0.52%.

Cycle 4 of the food production serial testing programme commenced on the 7th of December. To date, as of 15th December, Cycle 4 has carried out 7,143 tests with 28 Detected Cases (0.39% detection rate).

The HSE is working closely with internal and external stakeholders to identify and implement improvements which can be built into the serial testing programme and has increased the level of communications with food production facilities.

A number of facilities have hired additional staff, to meet the increased seasonal demand throughout the months of November and December. The increase in staff numbers has been factored into the cycles and has resulted in additional facilities being included in the serial testing programme. A schedule of testing over the Christmas period has been developed and communicated with all parties involved in the serial testing of food production facilities.

**Schools Testing Programme**
COVID-19 testing is ongoing in school settings and childcare facilities. As of December 15th, 1,218 facilities (primary school, post primary school, special education and childcare facilities) have had/are having some testing completed based on a Public Health Risk Assessment. A total of 34,631 tests been carried out as part of this mass testing. From the 1,218 schools that had mass tests, an additional 916 detected cases have been identified over and above original cases. This is a detected rate of 2.6%.
5. Process Improvements
We continue to work to improve turnaround times, consistency and our end-to-end testing pathway in general. This section presents the latest set of enhancements.

Data quality improvements
Several major improvement initiatives have been identified to improve the test and trace process. When complete, these will deliver faster results to the public, accelerate issue resolution and enhance overall operational management and effectiveness. Immediate priority improvement initiatives include investigation to ensure facilities that are part of serial testing are receiving an overview of their results as quickly as possible. By ensuring accurate data is submitted when the test is being scheduled, this will generate faster and more accurate reports.

Further investigation is also underway into ‘unknown’ test results which are being received from acute labs. Active follow up and solutions are being put in place to deal with these scenarios. A new process improvement has recently been implemented in order to facilitate a swifter resolution of unknown results. A further process adjustment has been identified to ensure timely resolution across unknowns that have previously been raised.

Additional initiatives are being considered in relation to acute labs in order to identify opportunities for greater efficiency following the initial point of data capture. Specific pathways are being explored that relate to inpatients and the prevention of additional communication being provided, following provision of test results by a physician. At first, these pathways will be explored in relation to one acute hospital before considering how these improvements can be rolled out to acute hospitals on a wider basis. An overview is currently being developed to indicate expected timings and to consider key aspects of such a solution.
6. Service model: Test and Trace

The implementation of the service model for Test and Trace is continuing. This includes recruitment to enable the staffing of the service model for community swabbing, labs and contact tracing and estate development in terms of a permanent and sustainable testing centre and contact centre footprint. The overall contact tracing requirement is to have a total of 800 WTEs. As of the December 15th, there are 741 individuals have been onboarded who are a part of the dedicated workforce. A further 55 contact tracers are expected to be onboarded by the week ending 20th of December. The swabber recruitment target is 900 WTEs. An additional 21 people are expected to be placed this week to carry out swabbing activities. This will bring the overall total to 615 swabbing resources. Any requirement for further resources to support the test and trace system will then be reviewed.

Engagement between the Minister, the Department of Health and the HSE has continued in respect of testing volumes and associated costs. With respect to testing volumes, the HSE is working toward daily capacity in the region of 25,000 tests. Several programmes of work are in place to implement this and to ensure a stable, quality assured service is developed at this scale. The next step is to finalise and agree the associated costs for the service with the Department of Health. The estimated costs have been shared with the Department for their review and input.

Additionally, detailed operational and surge planning is underway across the service pathway to account for demand and capacity requirements over the December and January period. Engagement in respect of this activity will be ongoing across the pathway and key stakeholder groups to ensure a coordinated and integrated response.
7. Update on any key challenges/issues

1. Over the past week, we have seen a slight increase in demand for community testing. It is likely that reduced restrictions are having an impact on the demand on the test and trace system. In order to ensure that our services can continue to meet demand now, a number of enhancements are underway one of which includes a recruitment drive.

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2. The HSE continues to review the demand for testing across the country, opening additional pop up centres, where necessary to meet demand. As of the 15th of December, there are 36 testing centres in operation, 33 static test centres and 3 pop up test centres. These three pop-up test centres are open in Carlow Town, the Cleary Centre in Donegal Town and Charlestown in Finglas. In addition to these three pop-up testing centres, a pop up centre at Limerick University Hospital opened last week for four days and a pop up testing centre opened at Cork University for three days to test Cork University and Cork IT students. Both of these pop up centres closed on Friday 11th of December. Provision of greater clarity and guidance to members of the public on how to safely travel to a Test Centre is available on HSE.ie and additional guidance has been issued to GPs.