Title:

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

Approved for future publication: YES/NO (remove as applicable)
Testing and Tracing updated for NPHET, 19th of November

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

1) Activity levels across sampling, laboratory testing and contact tracing,
2) End-to-end turnaround times,
3) Support services for delayed tests,
4) Process improvements,
5) Serial Testing Programme,

1. Activity levels across sampling, laboratory and contact tracing

**Sampling in the community and in acute settings.**

Over the past seven days, 10th – 16th of November, there has been approximately 77,888 swabs taken for COVID-19 testing. A total of 34,896 of these were taken in the community, the majority were performed at fixed testing sites and a portion as home visits which have increased in recent weeks. Approximately 23,465 swabs were taken in acute settings. The remaining 19,527 swabs taken were taken as part of the Serial Testing programmes of staff in residential care facilities for older persons and staff in food production plants.

*Please note;* data from 8th - 14th of November shows that the 0-10 age group makes up 16.9% of all referrals. The age group with the highest percentage of referrals from 8th – 14th of November is the 11-20 age group, making up 17.2% of all referrals. The detected rate of this 11-20 age group, for this time period is 8%.
**Laboratory Testing**

There have been 75,375 lab tests completed in the past seven days. Approximately 47,471 of these tests were processed in community laboratories and 27,904 processed in acute laboratories.

**Contact Tracing**

Last week, a total of 12,288 calls were made in the Contact Tracing Centres. A total of 3,025 of these were Call 1s which involves the communication of a detected result. A total of 9,263 calls were completed relating to contact tracing. This figure is marginally down on prior week – see chart below.

Over the past seven days, the average number of close contacts per case was 3.6. Last week we reported this as 3.7.

Contact tracing is carried out in Galway (HSE), Limerick (HSE and Revenue), Cork (HSE and Defence Forces), Dublin (Sandyford), Dublin (UCD), Parkgate street, Defence forces Dublin, Kells (HSE) and Defence forces Athlone.
2. Turnaround Times
   (10th – 16th of November)

**End-to-end turnaround time**

Both detected and not detected results are now being communicated by SMS. This enhancement made to the test and trace system has resulted in an improved turnaround time for the end to end process. 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, 10th – 16th of November;

- The median end-to-end turnaround time, from referral to SMS result, for **not detected** tests in the **community setting** was 1.6 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 end of tracing, for detected cases in the community was 2.2 days.

**Overall Swab to laboratory result communicated - Medians**

- 26 hours in Acute
- 29 hours in Serial Testing
- 29 hours in Community

**Referral to appointment**

In the community, the median time for community referral to appointment was 0.2 days.

92% of GP referrals are provided a swabbing 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 a hospital lab the median time for swab to lab result was 15 hours.

The combined median time from swab to lab result was 25 hours.

**Contact Tracing:**

The median time to complete all calls for contact tracing, from the 10th – 16th of November was 0.7 days.
3. Support services for delayed tests - Delayed Test Result Search Service for GPs, members of the public and HSE staff/healthcare workers. A result is considered delayed if not received within 3 days of having had a COVID-19 test.

**HSELive**

If a member of the public has been waiting longer than three 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 (Nov 8th – Nov 14th), 436 queries have been received.
- This has decreased from last week where 809 queries were received. (46% ↓ decrease)
- This has also decreased in comparison to the last thirty days, where 1219 weekly queries were received on average. (64% ↓ decrease)
- A total of 91% of queries received in the last seven days were fully resolved within the 24hour 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 (Nov 8th – Nov 14th), 26 queries have been received.
- This has increased from last week where 12 queries were received. (116% ↑ increase)
- This has increased in comparison to the last thirty days, where 16 queries were received weekly on average. (62% ↑ increase)
- A total of 96% of queries received in the last seven days were fully resolved within the 24hour 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 (Nov 8th – Nov 14th), 47 queries have been received.
- This has decreased from last week where 57 queries were received. (17% ↓ decrease)
- This has also decreased in comparison to the last thirty days, where 63 weekly queries were received on average. (25% ↓ decrease)
- A total of 98% of queries received in the last seven days were fully resolved within the 24hour target.
4. Update on developments/process enhancements

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 standardising a process for patients who enter the system with insufficient or missing data and optimising a data flow across systems to update patient data as and when it becomes available.

Another initiative is the handling of in-between results where a lab has been unable to determine the outcome of a test. The process is currently being reviewed by the contact management programme. This process will ensure these cases are handled promptly and in line with Public Health requirements where a re-test is required.

As well as this improvement, work is ongoing to investigate the data flow between COVID Care Tracker (CCT) to Public Health’s system (CIDR) and analysis being done on how best to automate this process. Further investigation is also underway into ‘unknown’ test results which are being received from acute labs with active follow up and solutions being put in place to deal with these scenarios.

Schools Testing Process

A process is currently in operation to support all ongoing schools testing including childcare facilities. As of November 17th, 941 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 23,172 individuals have been tested as part of this mass testing. From the 941 schools that had mass tests, there have been an additional 717 detected cases have been identified over and above original cases. This is a detected rate of 3%.

Testing in Mink Farms

In response to the variant of COVID-19 discovered in mink farms in other countries, the HSE has commenced serial testing of staff and their household contacts in mink farms in Ireland. It is intended that this testing will be on a weekly basis and will be under review. During the first week of testing there were no detected cases. There is close collaboration on this testing programme with the Department of Agriculture, Food and the Marine.
5. Serial Testing in Nursing Homes

Serial testing in residential care facilities commenced on 23rd of June. To date, the programme has completed 297,927 tests, identified 968 detected cases, a detected rate of 0.32%.

Cycle 5 of serial testing in Nursing Homes commenced on 11th of November. As of 17th of November, Cycle 5 of serial testing of Nursing Homes has carried out 13,429 tests, with 108 cases detected. This represents a detected rate of 0.80%.

At present, work is underway to include religious order facilities that provide 24-hour care to their residents, as part of this serial testing programme. Direction on the inclusion of these facilities is being guided by Public Health.

Serial Testing in Food Production facilities

Serial testing in food production facilities commenced on 21st of August. To date, the programme has completed 52,265 tests, identified 268 detected cases, a detected rate of 0.51%.

Cycle 3 of the food production serial testing programme commenced on 9th of November and will run for four weeks. As of 17th of November, Cycle 3 has carried out c.4,211 tests with 40 detected cases. This represents a detected rate of 0.97%.

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 identified they will be hiring additional seasonal staff to meet the increased demand throughout November and December. This increase in staffing numbers is being factored into planning of future rounds of testing and has led to additional facilities being included in the serial testing programme.
6. Future Service model: Testing and Tracing

Implementation is continuing of the service model for Test and Trace including 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 recruitment of additional contact tracers has onboarded an additional 461 contact tracers to date. A further 70 contact tracers are expected to be onboarded by the end of this week with an additional 70 onboarded next week. A total of 361 additional people has been onboarded to date to carry out swabbing activities, whilst additional candidates are currently going through the compliance and interview process. When this recruitment drive is complete, any requirement for further resources to support the test and trace system will then be reviewed.

The overarching priority for the future service model is to conclude final engagement between the HSE and the Department of Health with respect to a decision on testing volumes and associated costs. This is now critical as procurement, contracting and cost-impact decisions and actions are required to ensure capacity of c.25,000 RT-PCR tests can be done daily. This is important, especially as the Testing Strategy is being considered by NPHET and there is an imperative to ensure that the future strategy aligns with daily testing capacity.
7. Update on any key challenges/issues

1. The resumption of schools continues to drive increased demand for testing. This is an additional and considerable strain on Public Health Departments who take the lead when assessing risks in a school setting in the case of a confirmed case or a confirmed or suspected outbreak. To mitigate this, there is an enhanced testing pathway for schools in operation. The overall aim of this testing pathway is to ensure that testing at schools follows a single consistent process, that tests can be grouped (such that results come back in a batch and can be clearly lined to the specific school for follow-up) and that increased administrative support is made available to public health. The HSE have implemented a Public Health school support team and created additional support videos for school principals and parents alike.

2. Over the past week, we have seen a decrease in demand for community testing and the number of calls required to be made by our contact tracing centres. This decrease is likely to be as a result of the current restrictions in place throughout the country. In order to ensure that our services can continue to meet demand now and when restrictions are less, a recruitment drive is underway and is an example of actions we are taking in response to critically assessing the demand on the test and trace system.

   The HSE is currently recruiting additional test and trace staff; an additional 461 contact tracers have been onboarded to date. A further 70 contact tracers are expected to be onboarded by the end of this week with an additional 70 onboarded next week. A total of 361 additional people has been onboarded to date to carry out swabbing activities, whilst additional candidates are currently going through the compliance and interview process. When this recruitment drive is complete, any requirement for further resources to support the test and trace system will then be reviewed.

3. The HSE continues to review the demand for testing across the country, opening up additional pop up centres to meet demand. There are currently 4 pop up testing centres open in Carlow Town, the Cleary Centre in Donegal Town, Charlestown in Finglas and South Douglas Street Centre in Cork City. 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.