operational reality of this incident. Thus, the Committee felt that any change to streamline the process and alleviate logistical and operational difficulties the diagnostic laboratories are facing would be extremely beneficial.

Drawing from this discussion the lack of outer packaging used to transport Category B agents was recognised as the most significant issue. However, it was noted by DfT colleagues that the outer packaging often used in NHS trusts is not the only packaging that can be utilised to transport Category B substances despite popular belief. The product for packaging currently widely recognised and used is the result of a manufacturer that has created easy to use pre-printed boxes and subsequently 'cornered the market'.

UN3373 is the UN number in which Category B dangerous goods belong to if they contain diagnostic substances. If a diagnostic substance has been classified as belonging to UN3373, then it must be packed for transport according to packing instructions P650. The packing instruction lists the requirements for the quality and construction of the packaging as required by ADR for road transport. If packaging meeting packing instructions P650 is marked appropriately any outer packaging obtained from various manufacturers can be used to transport suspect SARS-CoV-2 samples thus providing several alternatives to the packaging currently used and subsequently in short supply.

The importance of relaying this information back to the relevant parties across the devolved administrations was stressed by the Chair. The Committee concurred and felt that it was essential that some form of communication on P650 requirements is cascaded to Trusts and clinical laboratories that they can then interpret at the local level.

The Chair also put forward a question to the committee regarding the safety of transport of suspect SARS-CoV-2 samples though pneumatic air tube systems in a hospital co-located with a diagnostic laboratory. As these samples are not carried on the road, regulations for carriage of dangerous goods do not apply. However, the Committee agreed that this method of transport is not safe and therefore not recommended.

ACTION: DfT representative to provide the ACDP chair with the text of Packaging Instruction P650 together with the DfT's interpretation of the requirements contained therein, for the Chair to cascade to the appropriate parties.

ACTION: Chair to advise policy makers that samples suspected of containing SARS-CoV-2 can be transported under less stringent conditions than previously thought.

3.0 Any other business

The Committee noted that they continued to receive queries regarding point-of-care (POC) testing. These queries have increased as many NHS Trusts are planning to reintroduce molecular testing. The Committee reiterated their advice that POC testing should not be carried out unless a local risk assessment has been conducted. The wording of this advice may need to be altered for clarification purposes.

Secondly, the Chair informed the Committee that he had been contacted by DHSC regarding the classification of COVID-19 as a High Consequence Infectious Disease (HCID). The Committee unanimously agreed that this infection **should not** be classified as a HCID.

ACTION: Member NR to formulate risk assessment advice for point-of-care machines that should/should not be used.

ACTION: The ACDP Chair to formally write to DHSC to inform of the ACDP's position to declassify COVID-19 as a HCID.

4.0 Close

The Chair thanked everyone for attending this teleconference on short notice including colleagues from DfT who provided expert advice on the matter. The Chair also recognised everyone's ongoing hard work during this incident.