From: Dr Lourda Geoghegan

Date: 8 July 2020

To: 1. Dr Michael McBride, CMO √ MMcB 9 July 2020

2. Robin Swann MLA, Minister

SUB/1630/2020 – UPDATE ON TESTING PROGRAMME IN CARE HOMES ACROSS NORTHERN IRELAND

SUMMARY

Issue: Update on the COVID-19 care home testing

programme underway across Northern Ireland.

Timing: Immediate.

Presentational Issues: Testing in care homes is an ongoing news story both

locally and nationally. Likely press release will issue to highlight that the commitment to test all homes has now been met. Cleared with Press Office AC

9/07/2020.

FOI Implications: Any requests will be considered in line with the

provisions of the Act and any relevant exemptions.

Executive Referral: Referral to the Executive is not required.

Financial Implications: None as a result of this submission.

Equality Implications: Not applicable.

Legislation Implications: Not applicable.

Special Adviser's Views:

Recommendation: It is recommended that you note:

i. that all care homes in Northern Ireland have

been offered testing by the end of June 2020, in line with your commitment announced on

18 May 2020;

- ii. the proposed approach to the regular programme of testing for care homes in Northern Ireland as outlined in paragraph 10;
- iii. the recommendation from officials to provide you with a weekly dashboard report (based on the information submitted by care homes through the RQIA's new web reporting portal) as explained in paragraph 28. Subject to your agreement of this change, this report will be issued to you on a weekly basis for an interim period; and
- iv. our proposal to establish a regular reporting schedule to effectively update you on the programme of regular testing in care homes. Following the outcome of discussions with PHA colleagues on the feasibility of utilising the weekly PHA SitRep for reporting purposes, we will provide you with a further update on this matter.

Introduction

- 1. As part of the work to mitigate the effects of COVID-19 in the care home sector, Health Silver implemented a Care Home Surge Plan in early May. In addition, you announced on 18 May 2020 your intention that the COVID-19 testing programme would be extended to all care home residents and staff. This included testing in care homes which do not, and have not had, a COVID-19 outbreak during the first pandemic wave. Prior to your announcement, the policy position had been to test all residents and staff in any care home identified as having a potential outbreak or cluster of infection.
- 2. On 19 June 2020, we provided you with a separate update on the progress of this care home testing programme; this included advising you about the establishment of a Task and Finish Group by Dr McBride (CMO) to provide effective direction and guidance to HSC colleagues on the testing programme

and the epidemiology of COVID-19 as experienced across the care home sector. A core purpose of this T&F Group is to ensure the successful completion of this phase of the care home testing programme by the end of June 2020 and to determine future care home testing requirements (SUB-1547-2020 refers).

3. The purpose of this submission is to provide you with an update on the overall status of this phase of the care home testing programme, including an early assessment of proposals for the next phase of testing programme which continues to be informed by the current and emerging scientific evidence. We outline the recently announced changes to care home testing arrangements in England, including the publication of the Vivaldi study published by the Office for National Statistics on 3 July 2020. The submission also provides an update on the current care home outbreak position in Northern Ireland (data accurate to 6 July 2020) and seeks your agreement on proposed future reporting arrangements to keep you updated on the position regarding outbreaks and testing in care homes.

Care Home Testing Programme in Northern Ireland

- 4. As you are aware, this current programme of testing care homes in Northern Ireland has been delivered through two distinct pathways: testing in care homes with suspected or confirmed COVID-19 outbreaks and testing in care homes without outbreaks.
- 5. HSC Trusts are responsible for administering the testing programme for care homes who have had, or currently have, an outbreak. The National Testing Programme (NTP) has been supporting the independent sector and HSC Trusts to test all residents and staff in 'green' care homes, these are homes which have not had a COVID-19 outbreak.
- 6. I can confirm that PHA colleagues have notified the Department that, as of 30 June 2020, staff and residents in all care homes across Northern Ireland have now been offered COVID-19 testing. In view of the logistical challenges associated with undertaking such an extensive programme of testing, across a

significant number of facilities in a relatively short period of time, this is a positive outcome. The successful completion of this phase of the care home testing programme has been made possible through a collaborative and robust multi agency working partnership between your Department, PHA, HSC Trust, NI Ambulance Service and the care homes themselves.

- 7. Work is now progressing at pace by PHA colleagues in conjunction with HSC Trusts to collate the significant volume of data relating to this round of testing and to complete an in-depth quality assurance exercise prior to issuing the findings to the Department. The Department understands that this is a very complicated exercise in view of the numbers of staff and residents tested. To facilitate a detailed examination and analysis by the Department of the learning associated with testing completed to date, the PHA will submit information on each care home tested, the numbers of staff and residents tested in each care home and the positivity rates for each group tested (staff and residents); this data is due to be submitted to the Department by 10 July 2020.
- 8. Ahead of the Department's receipt of the data for this round of care home testing, we have continued to actively assess the emerging science and evidence relating to COVID-19 to further inform our future approach to testing in care homes. We are also continuing to closely monitor and take into account care home testing developments in other jurisdictions.
- 9. We have identified a potential approach for the next phase of the care home testing programme in Northern Ireland. However, it is important to note that these proposals require further consideration and development in the next few weeks and will be subject to review by the Expert Advisory Group on Testing in the context of testing capacity. The Task and Finish Group will also evaluate the proposals in detail to include consideration of the effectiveness of the proposed frequency of testing, taking into account key learning points from this first phase of the care home testing programme.

- 10. We will provide you with the detail underpinning our final proposals for the next phase of testing in care homes in due course; however for information we have outlined below the main features of our proposed approach going forward:
 - For care homes with a new possible or suspected outbreak, all staff and residents will be tested at the risk assessment stage, in line with the existing care home testing arrangements. A second round of testing will be undertaken again after 28 days following the symptom onset in the last known case (among either staff or residents). There may also be a need to include an additional round of testing in these care homes approximately 4 to 7 days following the initial testing of staff and residents; any requirement in this regard will be kept under review and informed by emerging evidence and other factors including community transmission rates of the virus in Northern Ireland.

It is proposed that this aspect of the care home testing programme will be undertaken through the HSC/Consortium laboratory system (Pillar 1 of our testing programme) and arrangements to obtain samples (nasopharyngeal swabs) on residents and staff will be supported by HSC Trust staff who will assist the care home staff.

• For care homes who do not have an outbreak, all staff and residents will be tested on a monthly basis; this position will be kept under review. The frequency of testing of staff in these care homes will be closely monitored and may need to be increased depending on the community transmission rates of the virus in Northern Ireland in the coming months.

It is proposed that this aspect of the care home testing programme will be undertaken through the National Testing Programme (Pillar 2 of our testing programme) and arrangements to obtain samples (nasopharyngeal swabs) on residents and staff will be managed by each care home, specifically the Registered Manager in each home.

Care Home Testing Programme in England

- 11. On 3 July 2020, England announced regular retesting in care homes to identify anyone with the virus and to help reduce transmission. This regular testing, due to commence with effect from 6 July 2020 is part of a new social care testing strategy which has been developed in response to the latest advice from SAGE, and evidence from the Vivaldi 1 study which indicates a higher prevalence of the virus in care homes in England.
- 12. Under the new testing arrangements, care home staff in England will be tested every week and residents over the age of 65 will be tested on a monthly basis. This is in addition to continuing to test any care home facing an outbreak or at increased risk of an outbreak.
- 13. The repeat testing programme in England will initially be prioritised for care homes primarily looking after over 65s or those with dementia before being rolled out to all adult care homes. It is anticipated that the repeat testing will be extended to include all care homes in England for working age adults in August 2020.
- 14. On the 3 July 2020 the Department of Health and Social Care (DHSC) published a combined set of results for its Vivaldi 1: coronavirus (COVID-19) care home study report, to include:
 - the results of the first round of whole-home antigen testing for care homes for the over 65s undertaken between 11 May and 7 June 2020;
 and
 - ii. the results of the telephone survey, which was carried out over a 4 week period from 26 May to 19 June 2020. The telephone survey was conducted for DHSC and the Office for National Statistics by Ipsos MORI and involved a 20 to 30 minute telephone interview with all care homes managers participating in the Vivaldi Survey.
- 15. The Vivaldi Study examined COVID-19 infections in 9,081 care homes in England, all with responsibility for providing dementia care or care for older

residents (aged 65 years and over). A summary of the published results is provided at **Annex A**.

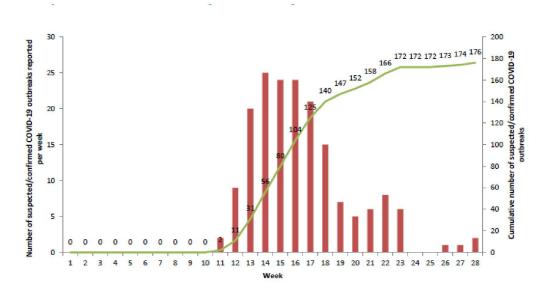
16. The Office for National Statistics (ONS) publication 'Impact of coronavirus in care homes in England (Vivaldi): 26 May to 19 June 2020' sets out more detailed results and analysis based upon the responses from the care home managers during the telephone interviews. A PDF of this publication has been attached separately to this submission and is also available through the following link:

https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/articles/impactofcoronavirusincarehomesinenglandvivaldi/26mayto19june2020/previous/v1

Reporting of Care Home Outbreaks in Northern Ireland to Date

- 17. The PHA has been capturing data on care home COVID-19 outbreaks notified to the Health Protection Duty Room since the disease was first reported in mid-March. PHA, through the Duty Room service, has longstanding arrangements to capture and report data on outbreaks of any type occurring in care homes across Northern Ireland, including those occurring due to influenza, norovirus (winter vomiting virus) and clostridium difficile. These arrangements for monitoring outbreaks of COVID-19 are based on the previously well-established system through which care homes notify the Duty Room in PHA when/if they suspect they have residents or staff exhibiting symptoms of infection.
- 18. Since the 15 March 2020, a total of 176 suspected or confirmed COVID-19 outbreaks in care homes across Northern Ireland have been reported to the PHA (data accurate as of 6 July 2020). The figure below shows the total number of care homes in Northern Ireland with a suspected or confirmed COVID-19 outbreak reported to the PHA Duty Room each week from the middle of March 2020.

Weekly Number of Care Homes in Northern Ireland Reporting Outbreaks to the PHA Duty Room



19. The table below provides a breakdown of the active outbreaks by each HSC Trust area (data accurate as of 6 July 2020). For comparison purposes, the information provided to you in the previous submission on 19 June 2020 is also included. The most recent data confirms that the highest number of active care home outbreaks is currently the Southern HSC Trust area (n=10), with the lowest number of active outbreaks currently in the Western HSC Trust area (n=2).

Active suspected and confirmed COVID-19 Outbreaks by Trust Area

| HSC Trust Area | Total Number of Care Homes per HSC Trust | Total Active Outbreaks (at 08/06/20) | Total Active Outbreaks (at 06/07/20) | % of Care Homes with an Active Outbreak (at 06/07/20) |
|----------------------------|------------------------------------------------|--------------------------------------------|--------------------------------------------|----------------------------------------------------------------|
| Belfast HSC Trust | 83 | 18 | 6 | 7.2% |
| Northern HSC Trust | 133 | 18 | 7 | 5.3% |
| South Eastern HSC Trust | 110 | 17 | 7 | 6.4% |
| Southern HSC Trust | 74 | 13 | 10 | 13.5% |
| Western HSC Trust | 67 | 11 | 2 | 3.0% |
| Total | 467 | 77 | 32 | 6.9% |

- 20. Of the total 6.9% care homes with a current active outbreak, 4.3% have a laboratory confirmed case of COVID-19 (data accurate as of 6 July 2020). The evidence shows that the number of care homes with an active outbreak has continued to decrease in the past weeks.
- 21. A care home outbreak can be considered concluded (closed) once the following criteria are met:
 - i. no new cases for 14 days (one full incubation period for COVID-19) after the symptom onset of the most recent case;
 - ii. a terminal clean of the care home has been fully completed; and
 - iii. the PHA Duty Room has received a completed outbreak closure form from the care home.
- 22. PHA colleagues have confirmed that as of 8 July 2020, a total of 149 care home outbreaks have been concluded since the start of the COVID-19 pandemic in care homes in mid-March.
- 23. A separate submission issued to you from Elderly and Community Care colleagues in the Department on 3 July 2020 providing further information on the recurrence of COVID-19 outbreaks in care homes (SUB-1611-2020 refers).

Proposed Future Reporting arrangements for the Care Home Testing Programme

- 24. You are currently being provided with updates on progress with testing and each Trust's surge status through a daily care homes dashboard, which has been populated based on information that is self-reported by care homes through the RQIA app.
- 25. Importantly, the information provided by care homes through the RQIA App is not validated, and we have identified a number of inconsistencies and anomalies in the returns. For example, we recently identified a total of 8 care homes reporting that no staff or residents been tested; PHA colleagues were able to confirm that all 8 care homes had been tested either by the relevant HSC Trust or the NTP. In addition, although the number of care homes

submitting data through the App has usually been high (typically 95%+ homes submitting data), this does vary on a day-to-day basis meaning it is difficult to extrapolate trends from the information with any degree of certainty. RQIA has systems in place to follow up any home which does not submit data through the App, but to date there remains a stubborn degree of under reporting (homes which do not submit their data thorough the App).

- 26. To improve the consistency of the information, RQIA has developed a new COVID-19 Status Update module within the existing RQIA web portal for care homes to submit their COVID-19 daily return. The new COVID-19 module came into effect on Wednesday 1 July, and will replace the existing 'Status update' App through which care homes are asked to report their data. In order to facilitate the transition, for the first week care homes can still submit their daily return via the existing App.
- 27. Significant efforts have been made to support data validation processes and ensure that the quality of the data is optimised and this will require ongoing attention from all involved. A substantial element of data quality rests with the individual in the care home who is entering the data, and to this end, a new set of data definitions has been developed to support care homes in ensuring that data entered is as accurate as possible. This process will be kept under active review.
- 28. In light of the progress made in implementing the surge plan (4 of the 5 HSC Trusts have been rated green for the past number of weeks, and the overall regional status is also green), with your agreement, we consider it would now be timely to move to a weekly dashboard report to you. This weekly dashboard report will be based on the information submitted by care homes through the RQIA's new web reporting portal.
- 29. Under future arrangements, to ensure that you are receiving as accurate information as possible, and to minimise any duplication, we propose to establish a regular reporting schedule to update you on the programme of regular testing in care homes. As part of this reporting schedule, we will provide

you with objectively gathered and validated data on the numbers of staff and residents tested.

30. The weekly care home SitRep generated by the PHA, currently provides information on care home outbreaks, and is considered to be a suitable mechanism to effectively update you on a regular basis. We will be discussing the Department's data requirements on care home testing with PHA colleagues, with a view to further developing that weekly SitRep to include the required data on progress with the regular testing programme. Once we are in a position to confirm that the weekly SitRep can be modified to facilitate accurate reporting on the care home testing position, we will seek your agreement to stop issuing the weekly dashboard to you which, as previously indicated, is based on self-reporting by care homes.

Recommendation

- 31. It is recommended you note:
 - that all care homes in Northern Ireland have been offered testing by the end of June 2020, in line with your commitment announced on 18 May 2020;
 - ii. the proposed approach to the regular programme of testing for care homes in Northern Ireland as outlined in paragraph 10;
 - the recommendation from officials to provide you with a weekly dashboard report (based on the information submitted by care homes through the RQIA's new web reporting portal) as explained in paragraph 28. Subject to your agreement of this change, this report will be issued to you on a weekly basis for an interim period; and
 - iv. our proposal to establish a regular reporting schedule to effectively update you on the programme of regular testing in care homes as noted in paragraph 29. Following the outcome of discussions with PHA colleagues on the feasibility of utilising the weekly PHA SitRep for reporting purposes, we will provide you with a further update on this matter.

Department of Health and Social Care

Vivaldi 1: COVID-19 care homes study report

Published 3 July 2020

Source of Publication: https://www.gov.uk/government/publications/vivaldi-1-coronavirus-covid-19-care-homes-study-report/vivaldi-1-covid-19-care-homes-study-report

Results

The results are based on analysis of the survey responses from 5,126 out of 9,081 care homes for the over 65s in England. Care home staff were asked to report on the total number of confirmed cases among staff and residents since the start of the pandemic.

The weighted period prevalence¹ of infection in:

- residents was 10.5% (95% confidence interval: 9.9% to 11.1%)
- staff was 3.8% (95% confidence interval: 3.4 to 4.2%)

Based on analysis of test results from the Whole Care Home Testing Programme (of all 9,081 homes tested via pillar 2 between 11 May and 7 June):²

- 2.4% of all tests were positive (9,674 out of 397,197)
- 3.9% of residents tested positive (6,747 out of 172,066)
- 3.3% of asymptomatic residents tested positive (5,455 out of 163,945)
- 80.9% of residents who tested positive were asymptomatic (5,455 out of 6,747)
- 1.2% of asymptomatic staff tested positive (2,567 out of 210,620)

The survey provided data on denominators (staff and residents) as well as estimates of infections, mortality, and risk factors for infection since the start of the pandemic, to provide figures for prevalence.

Vivaldi then undertook multivariable analysis to identify characteristics of high-risk care homes, controlling for other factors (below).

¹ The number of confirmed cases reported to the care home since the start of the pandemic as a proportion of the total number of residents or staff in that care home. It is an unweighted estimate and does not reflect survey non-response

² These figures are not representative and may contain duplicates. However, results for symptomatic staff are not available as they were not tested within the homes.

Conclusions

Regular use of 'bank' staff (healthcare professionals who do temporary work in different settings as needed) is an important risk factor for infection in residents and staff.

Infections in staff are a risk factor for infection in residents and infections in residents are a risk factor for infection in staff. However, the magnitude of this effect suggests staff are more likely to transmit infections to residents than vice versa.

Emerging data suggests that the number of new admissions, and return of residents to the care home from hospital, may be important risk factors for infection in residents and staff. This has only been tested in unadjusted analysis due to a high proportion of missing data across these variables.

Region is an important risk factor for infection in staff and residents, but its effect is different in staff and residents. This may be due to temporal differences in the timing of testing between staff and residents.

Important transmission risk is now likely to focus on staff, who will now be tested weekly via the new whole home testing rollout.