

Dear colleagues,

**PUBLICATION OF COVID-19 ASYMPTOMATIC  
WEEKLY TESTING GUIDANCE – FOR  
EMPLOYERS AND STAFF ON THE  
IMPORTANCE OF WEEKLY ASYMPTOMATIC  
TESTING**

1. This letter provides additional guidance to NHS and care home employers on the importance of eligible staff undergoing weekly asymptomatic routine COVID-19 testing, and what to do, should staff choose not to be tested.
2. This supplements the [guidance](#) that was issued to NHS Chief Executives on 03<sup>rd</sup> July.
3. This guidance is only applicable for weekly asymptomatic testing. Where a staff member has symptoms, they should self-isolate and book a test as per national guidance. Where there is a local outbreak/cluster, arrangements for testing will be put in place locally by infection prevention and control teams.

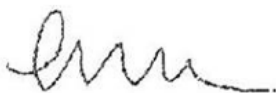
Yours sincerely,



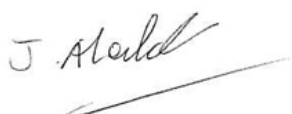
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## **Summary of weekly asymptomatic testing policy**

1. Health Boards currently offer a weekly COVID test for asymptomatic staff in the highest risk areas of oncology, elderly care and mental health wards, with stays over three months. Staff in care homes are also offered testing on a weekly basis. These groups have been considered as they are in areas caring for vulnerable patients, and consideration will be given to whether this needs to be extended.
2. We recognise that this is an uncomfortable process, and takes time out of clinical duties, and so we want to express our continued gratitude for staff for complying with the weekly asymptomatic testing.
3. Whilst the weekly testing is voluntary for staff, we do expect staff to comply as much as possible, as it is only through a collective effort that this will be effective in protecting staff and patients. This additional guidance will provide more information on why asymptomatic testing of staff is so important.
4. Weekly asymptomatic testing is designed to protect vulnerable patients and people in care homes and to reduce the risk of asymptomatic transmission of coronavirus, by monitoring and identifying positive cases and being able to efficiently put into place measures to protect staff and patients.
5. Asymptomatic and pre-symptomatic people can transmit infection to others, and routine weekly testing is important for identifying cases and isolating asymptomatic, but infected members of staff.
6. Weekly testing has been carried out in care homes since 15<sup>th</sup> June and in health services since the 08<sup>th</sup> July, and the majority of staff attend their tests regularly. We are really encouraged by the high voluntary compliance rate amongst staff and would like to thank the staff that have participated to date. However, there are still staff who declined to be tested.

## **Efficacy of Routine Testing**

7. It is estimated that 5% of all COVID-19 cases in the UK have been in Healthcare Workers (HCWs). The risk is 6 fold higher than that of the general population and exposure to COVID-19 is considered to be multifactorial, involving transmission within both community and healthcare settings
8. Testing of asymptomatic healthcare workers can contribute to reducing the risk of transmission by early identification and introduction of additional interventions to reduce the risk.
9. A study by Imperial College London estimates that weekly screening of HCW and other high risk groups is estimated to reduce their contribution to SARS-CoV-2 by 23%, on top of reductions achieved by self-isolation following

symptoms, assuming results are available within 24 hours.<sup>1</sup> A modelling study from Public Health England indicates that periodic testing of staff can reduce infection in other staff by as much as 64%.<sup>2</sup>

10. We recognise that routine testing can be uncomfortable, and inconvenient for staff, who are continuing to provide excellent care for patients. We would not be asking staff to participate in the testing, if we did not believe that it would be beneficial to the safety of staff and patients.
11. We continue to look at the evidence of the benefits of testing and establish ways that we can best protect staff and patients from the virus. We will keep staff informed about any changes to the latest evidence on testing, and we will endeavour to implement any innovations in testing procedures as these become available.
12. With a rising rate of infection in the community, where the R rate is currently estimated to be between 1.1 and 1.5 and a sustained rise in positive cases in most local authority areas, it is even more important that as many as staff as possible are attending their tests regularly, to ensure we are identifying asymptomatic positive staff, and protecting the most vulnerable patient groups.

### **Employer Actions to Support Routine Testing**

13. The Scottish Government is working with Health Boards and care homes to communicate the importance of staff testing in reducing asymptomatic transmission. Employers should be encouraging staff to participate in the weekly testing.
14. Health Boards have been asked to report testing levels each week, as well as any positive tests. Health boards should monitor uptake at a local level to identify and respond in areas where testing rates are lower. We are in regular contact with the Testing Single Points of Contacts to support Health Boards and help them to overcome any capacity issues with staff testing.
15. Employers should consider a range of options available to them to increase uptake including greater promotion and engagement, clearly advertised and regular appointment times, accessibility, and convenience for staff. We expect employers to be flexible with the way they deliver routine staff testing, so as many eligible staff as possible can participate.

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<sup>1</sup> Grassly NC, Pons-Salort M, Parker EPK, White PJ, Ferguson NM, on behalf of the Imperial College COVID-19 Response Team Comparison of molecular testing strategies for COVID-19 control: a mathematical modelling study. *The Lancet Infectious Diseases* 2020. [https://doi.org/10.1016/S1473-3099\(20\)30630-7](https://doi.org/10.1016/S1473-3099(20)30630-7)

<sup>2</sup> Evans S, Agnew E, Vynnycky E, Robotham J. The impact of testing and infection prevention and control strategies on within hospital transmission dynamics of COVID-19 in English hospitals. <https://www.medrxiv.org/content/10.1101/2020.05.12.20095562v2>

16. Employers should support training of staff to ensure those administering swab tests, are equipped to deliver these tests with minimal discomfort. The Scottish Government will continue to monitor the availability of less invasive tests, and to keep testing policy under review in light of the latest evidence and prevalence rates.
17. Good infection prevention and control (IPC) practice remains of primary importance in minimising the risk. This includes symptom vigilance, hand hygiene, increased environmental cleaning and physical distancing, as much as is practical.

### **Barrier to Testing & Seeking Resolutions**

18. Where staff members are choosing not to attend weekly tests, the employer should first engage with individuals to understand the reasons.
19. If staff have been unable to have a weekly test due to the process, timing of the test, or capacity issues, we expect employers to try and find ways which allow more staff to be tested.
20. Employers are expected to engage with their workforce about all ways to reduce nosocomial transmission, including the weekly testing of asymptomatic staff.
21. Employers should work in partnership with employees and their representatives to identify barriers to testing, to seek resolution of any issues that arise and to understand the individual circumstances behind refusal and seek satisfactory resolution.