

CABINET – 26 JANUARY 2021

PROCEDURAL MATTERS

4a

Members Questions**Question (1) Angela Goodwin (Guildford North):**

Some building-based services for adults with learning disabilities are continuing to run and are providing an essential lifeline for carers. These services are of course being delivered according to strict protocols to ensure the safety and health of both staff and those attending. The implementation of lateral flow testing for asymptomatic staff would help ensure that these facilities are maintained during these difficult times and I understand that such a scheme is in the pipeline, with pilot studies planned for February.

1. Given the very high rates of infection in the county and that the scheme has already been approved, is it not possible to bring forward the start date of implementation by building on the experiences of other authorities who have already introduced this testing?
2. Please give some detail as to who will be prioritised for testing, how the tests will be carried out and whether particular attention will be paid to engaging with those communities who are traditionally harder to reach?
3. Will the implementation of lateral flow testing be affected by?
 - a. Concerns over the accuracy of the tests?
 - b. Focus on the vaccination programme

Reply:

1. We share your concern about the high rates of COVID-19 infection across the county, and we will continue to use all the tools available to us in our efforts to drive case rates down. Lateral flow tests are one of those tools, if used in combination with other vital infection prevention control measures such as wearing appropriate PPE, that could potentially help in reducing transmission of the virus. Since approval of the targeted community testing programme by the local governance structure of the COVID-19 response, the public health team have been working on all the elements required to successfully implement this at the necessary scale within Surrey. The public health team is in regular contact with multiple other local authorities, ensuring that we are using lessons learnt from their programmes to inform the set-up of our own. We have submitted our application to the DHSC and hope to have our initial asymptomatic testing sites live in the first phase of roll-out in February, before extending the service more widely across the county. This is a large-scale operation with lots of logistical complexities, including the setup of multiple sites, recruitment of a large workforce and co-ordination of multiple partners across the system, and we are working hard to get this service up and running as quickly as possible. It is therefore not possible that we will be able to bring forward the start date for implementation any sooner than is already planned.

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2. We intend to initially make this testing available to those people who are required to leave home for work and who are unable to access asymptomatic testing through other routes, in alignment with recent national government directives. This will include essential workers, including staff in early years settings who are not covered by the roll-out of asymptomatic lateral flow testing in primary, school-based nursery and maintained nursery school staff. The tests will be carried out at asymptomatic testing sites. We are not currently able to offer onsite testing in workplaces as part of community testing. We are also in the process of setting up access to testing via community pharmacies and are also exploring whether we can use mobile testing sites to supplement these sites. One of the aims of our targeted community testing is to increase access to testing for vulnerable and hard to reach population groups. We will be using targeted communications strategy to help reach our target populations, and we also hope to use a mobile testing site or pop up testing site model to reach specific population groups.
 - 3a. We are aware of concerns regarding the accuracy of lateral flow tests. If someone tests positive on a lateral flow test, it is highly likely that they have COVID-19. This is especially the case as the prevalence of the virus in the community at the moment is high. If someone tests negative on a lateral flow test however, there is a chance they might still have COVID-19. This is because the evidence so far has shown that there is a risk of false negatives in cases of lower viral load, but the tests are more able to pick up positive cases with higher viral loads. For this reason, we are advising that a negative test should not be used as reassurance for settings or individuals to modify infection and prevention control measures or behaviours intended to suppress the virus. There is some evidence that individuals with higher viral loads are more infectious, therefore it is important that lateral flow tests are able to pick up these infectious individuals. The primary aim of this testing is to identify these asymptomatic positive cases that would otherwise have not been identified, to ensure these individuals and their contacts self-isolate appropriately.
 - 3b. There is co-ordination of targeted community testing programme with the vaccination programme as part of the system wide response to the COVID-19 pandemic. Appropriate resources are being allocated to enable its delivery alongside the vaccination programme.

Mrs Sinead Mooney
Cabinet Member for Adult Social Care and Public Health
26 January 2021