

Asymptomatic staff testing

Frequently Asked Questions

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General FAQs

1. What do you mean by asymptomatic staff testing?

Asymptomatic means someone who has no symptoms of a disease, in this case coronavirus.

Evidence has shown that people infected with COVID-19 can have no symptoms and still transmit the virus to others without being aware. It is important that we take steps to reduce the risk of transmission by identifying those who may not know they have the virus and therefore staff without symptoms will be tested.

Some NHS services have already used this approach to identify asymptomatic health care workers with the virus, and we are now expanding this to all very high risk areas.

2. Why are asymptomatic staff in Tier 3 areas being tested?

Tier 3 areas are areas that have been determined as very high risk with large community prevalence of the virus. ONS data suggest that healthcare workers are at greater risk of catching the virus, and not everyone shows symptoms.

Detecting positive cases sooner reduces the risk of the virus being passed on to patients, colleagues, and family members and beyond in the community.

Weekly testing can detect the great majority of staff who may not know they have the virus and are potentially infectious to others.

3. Why aren't Asymptomatic staff being tested in areas designated Tier 1 and Tier 2?

We are prioritising the areas of greatest need – this means staff working in those areas with the highest rates of COVID-19. As testing capacity increases and new technology becomes available, further expansion of asymptomatic testing to areas in other tiers will be considered.

Targeted testing of NHS staff will continue in trusts with high nosocomial rates in other areas when recommended by local and regional teams.

4. When will testing of asymptomatic staff begin?

We are making arrangements for asymptomatic testing of staff to start as soon as possible for healthcare workers in acute settings (hospitals, cancer-protected surgery hubs etc), and then in other healthcare settings in Tier 3 areas, including mental health, primary, and community care settings.

5. How will asymptomatic testing be prioritised across healthcare settings?

Asymptomatic staff testing will initially focus on acute settings (all hospital services, maternity, cancer-protected surgery hubs etc) followed quickly by other settings including mental health, community care, and primary care.

6. How frequently will staff be tested?

Staff will be tested weekly.

7. Who should get tested?

All patient facing staff in very high risk (Tier 3) areas will be tested weekly, including clinical (doctors, nurses, allied health), porters, cleaning staff, and high risk groups for example haematology staff working with transplant patients etc.

Local determination should be applied to identify those staff eligible for testing, in discussion with regional testing teams.

Local and regional teams may wish to consider prioritising those patient facing staff (including bank and/or agency staff) with a high level of patient interaction and staff who work with the organisation's most vulnerable patients.

8. What is defined as 'patient facing' staff?

Staff who are 'patient facing' generally refers to those staff involved in direct interaction with patients e.g. (such as doctors, nurses, allied health etc), porters, catering and domestic staff etc.

Testing FAQs

9. Who will provide the asymptomatic testing?

Testing capacity will be provided locally by the NHS ('pillar 1') and where applicable by the government laboratories ('pillar 2').

10. What methodology is available for asymptomatic testing?

PCR (swab) testing will be used. As new technology based on the testing of saliva (LAMP) is introduced we anticipate that this will become the predominant methodology used for staff testing programmes. LAMP stands for 'loop mediated isothermal amplification', which is quicker than the usual PCR swab tests and can be done at greater volume.

11. How will asymptomatic testing be rolled out?

Local arrangements made with regional testing teams will determine the most effective way to roll out asymptomatic testing at a local level.

12. Is there enough capacity?

Testing capacity has been increased in NHS labs this capacity allows us to roll out asymptomatic testing out to NHS staff.

As LAMP technology is implemented it will increase the amount of testing capacity available to us for further testing.

Staff FAQs

13. What will the test show me?

The test detects the presence of the virus and will tell you if you are currently infected with COVID-19. However, the test doesn't distinguish between live or dead virus and therefore viral swabs can sometimes continue to detect viral DNA for a few weeks following infection.

14. Who should get tested?

If you are working in a patient facing role you should be tested weekly.

Patient facing generally refers to roles involved in direct interaction with patients, including clinical staff (such as doctors, nurses, allied health etc), porters, cleaning staff etc across pathways and settings.

15. I am Agency or Bank staff, should I get tested?

Yes, this applies to all patient facing staff, including agency and bank staff. The trust will arrange your tests.

If you are being tested weekly in another setting and have evidence of your result this will be acceptable in lieu of another test.

16. I live in an area that is defined as a different tier to the one I work in e.g live in Tier 3 but work in Tier 2 area. What does this mean for me?

You must continue to follow your employers risk management procedures/protocols. Your employer may wish to carry out weekly testing to ensure that they keep you and patients safe.

17. Is testing voluntary? What happens if I refuse to have a swab?

All testing is voluntary; however, we strongly encourage staff to get tested to keep themselves, their colleagues, patients, and families safe.

Testing is a critical part of managing infection control. Your employer will discuss any concerns you might have and carry out a risk assessment in the normal way to ensure you and patients remain safe.

18. How will I get a test, and who will arrange it?

Asymptomatic staff testing will be arranged on a local basis and your employer will have details on how you can access testing, including for agency or bank staff. On occasion it may be possible that you will be asked to travel beyond your usual place of work for a test, however this will be discussed with you in advance.

[Organisation to address process according to local arrangements]

19. What if I miss a test or cannot be tested for any reason?

[Organisation to address process according to local arrangements]

20. What do I need to do to take the test?

[Organisation to address according to local arrangements, including:

- Consent
- Process]

21. Will I be taxed if my employer pays for my swab test?

You may have seen some information in the media recently about coronavirus testing kits that are purchased by employers being a taxable benefit. We want to reassure you that this is not applicable to our staff and you will not be taxed for taking a COVID-19 test.

22. How often should the test be done? Can I get a test every day?

Asymptomatic staff testing will be undertaken weekly. In order to allow testing of all asymptomatic patient facing staff, you cannot get a test more frequently than weekly.

23. Could there be a 'false positive' test?

With any test, it is possible that a false positive result could happen. However, when the infection is common this chance is remote unless you have already been infected with the virus within a few weeks of the test.

24. When will I get the results of my test?

The results of the swab tests are usually back within 48 hours. As new methods of testing are rolled out, including LAMP, this timeframe may reduce.

25. How will I get the results of my test?

You will be informed of how your results will be returned when you take your test - usually you will receive your results via a text message.

26. Who will my results be shared with?

Your data will be handled in strict confidence. Only you and those who need to know your result for health and safety reasons (e.g. occupational health, your line manager, HR, and/or employing Bank/Agency if applicable) will be made aware of your results.

It is a statutory requirement for all positive results are reported to Public Health England as Covid-19 is a notifiable disease.

If your employer does not have an Occupational Health department your results would be shared with your line manager or HR.

27. What actions do I take upon receiving my result?

If you receive a negative result you do not have to take any action. You will be tested again in the following week.

If you receive an inconclusive result, you may need to be tested again. Please alert the Occupational Health team and your line manager.

If you receive a positive result need to follow the guidance, isolate at home for 10 days from the date of the test and notify the Occupational Health team and your line manager.

28. What happens if I test positive?

If you test positive for COVID-19 you must self-isolate for 10 days from the date of the test. If you remain well and without symptoms, you can return to work on day 11.

29. If I test positive, what does this mean for my family / people I share a house with?

All members of your household should self-isolate for 14 days from the day your test was taken.

However, if any member of your household develops symptoms of COVID-19, they should isolate for at least 10 days from the onset of their symptoms, in line with the [stay at home guidance](#).

30. What happens if a colleague tests positive? Will I have to isolate?

If you test negative for COVID-19 as part of routine testing, remain asymptomatic, and were wearing appropriate PPE when the contact occurred you can remain at work and do not have to isolate. You must isolate immediately and follow the guidance if you develop symptoms.

If you were tested as part of contact tracing investigation, then you should follow instructions from the local health protection team.

31. If I test positive will this be classed as sick leave?

Absence following a positive test should not be recorded as sick leave, unless you become unwell.

32. If I need to self-isolate, will I still be paid?

Yes, in line with previous guidance developed for NHS employers, if you hold a permanent NHS contract or are employed on a trust bank, you will still be paid as though you were at work, while self-isolating following a positive COVID-19 test or direction to from the Occupational Health team.

33. What if I work for a contractor, will I still be paid?

Your employer is responsible for determining your pay if you need to self-isolate or develop COVID symptoms during or after a period of self-isolation and become unwell.

34. If I only work for an Agency, will I still be paid?

The Agency is responsible for determining your pay if you need to self-isolate or develop COVID symptoms during or after a period of self-isolation and become unwell.

35. I cannot afford to be away from my workplace, how will my employer support me?

In line with previous guidance developed for NHS employers, if you hold a permanent NHS contract or are employed on a trust bank, pay you receive for self-isolation or if you become unwell with COVID-19 is based on the pay you would normally receive if you were at work. For example, if you would normally receive extra pay for working unsocial hours, these payments will be included in the calculation for self-isolation or COVID-19 related sick pay.

If you are not employed by an NHS organisation or trust bank, for example, employed by an Agency, your employer is responsible for determining your pay.

36. If I test positive, will all the patients I have had contact with need to be traced?

This will normally not involve Test and Trace. Local arrangements will be made to determine which of your contacts (colleagues and patients) could have been exposed to the virus. These contacts will then be offered testing to determine if they could be carrying the virus asymptotically.

37. If I test positive, do I continue asymptomatic testing?

If you test positive for COVID-19 by swab test you will be exempt from being retested within a period of 90 days from the test, unless you develop new possible COVID-19 symptoms.

This is because fragments of inactive virus can be persistently detected by the swab test in the respiratory tract for some time following infection. If you are found to be positive for COVID-19 by swab test within 90 days from your initial illness onset, depending on your symptoms and advice from an infection specialist, you may need to self-isolate again.

Additional consideration will be given to staff who are immunocompromised regarding retesting for COVID-19 by PCR.

38. Where can I find more information?

Your employer will have arrangements in place. You should speak to your line manager or HR team.

Further information about support can be found on the NHS Employers website:

<https://www.nhsemployers.org/covid19/health-safety-and-wellbeing/support-available-for-nhs-staff>

Line Managers FAQs

39. How often should my staff be tested?

Asymptomatic testing for staff will be undertaken on a weekly basis.

40. For Agency workers, is the trust or the Agency responsible for testing workers in Tier 3 areas?

It is the Trusts responsibility to test regular agency staff.

41. A number of my staff have tested positive and need to self-isolate. How do I arrange cover for my team?

Line managers should raise any concerns about staffing levels through divisional management structures.

42. Do I need to keep a record of the test results received by my staff?

If notified that a staff member has tested positive, you should record their absence during the isolation period via the usual processes.

43. If a member of my team needs to self-isolate, how do I record this on the system?

Line Managers should follow the same process for any other staff members that are required to self-isolate.

You should record staff absence through normal staff reporting systems. If you have any concerns about staffing levels in your area, you should escalate any concerns through divisional management structures.

44. I am a manager and have workers with pre-booked shifts through an agency. What are their entitlements if they need to self-isolate?

Workers must seek advice from their agency regarding entitlements.

45. Do my staff need to be tested again before they can return to work?

No. Asymptomatic staff who have tested positive for COVID-19 should self-isolate for 10 days following their first positive test result.

If they have finished the self-isolation period and have no symptoms, they can return to work without a further test.

46. If an employee requires psychological / emotional / practical / support what should they do?

Further information about support for staff can be found on the NHS Employers website:

<https://www.nhsemployers.org/covid19/health-safety-and-wellbeing/support-available-for-nhs-staff>

Contact

Any further questions on asymptomatic staff testing can be referred to:

nhsi.stafftesting@nhs.net