

SBAR on Test & Protect Programme

The purpose of this SBAR is to update the Board of the progress being made to augment the Test & Protect programme in line with the requirements set out by Scottish Government.

Situation

NHS Lanarkshire has a clear Scottish Government requirement to ensure a minimum of 50 wte contact tracers on duty, 8am to 8pm, 7 days a week. This number does not include other supporting roles such as team leaders and investigative officers.

Background

NHSL has undertaken a substantial recruitment programme in order to meet its workforce requirements. The following table describes the current staffing position.

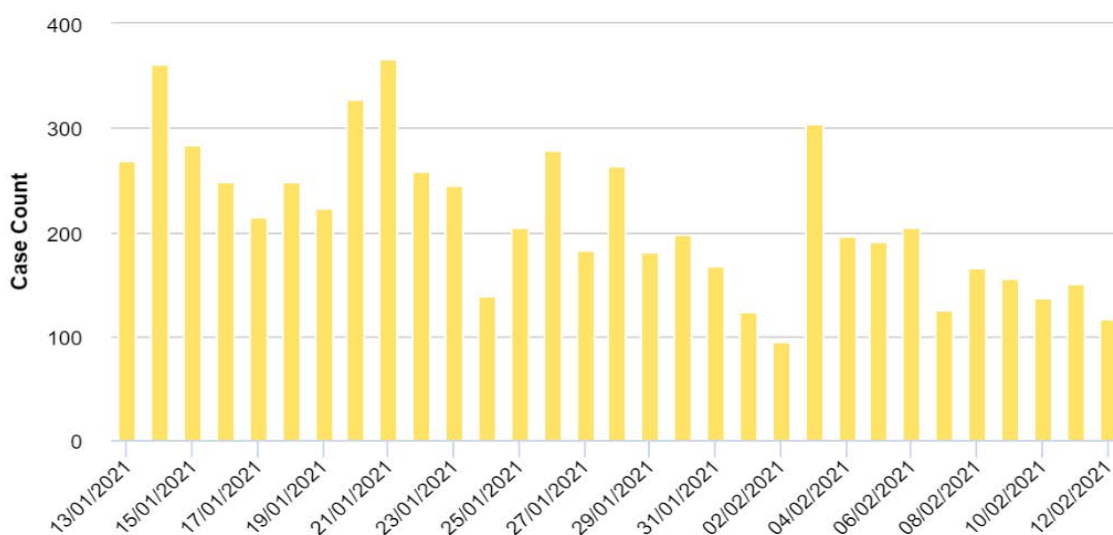
Post	(Number) & WTE in post	Comment
B3 Contact Tracer	(120) 87.2	Additional recruitment currently moving to recruit 15wte to bolster numbers
B3 Contact Tracer (Council)	(19) 15.2	31st March end of contract local authority staff involvement will cease at the end of March unless there is a decision to extend their contracts.
Contact Tracer (borrowed from other NHSL services)	(7) 5.6	Return to service health improvement and audiology. This will reduce borrowed staff capacity to 7 (5.64) at the end of January.
B5 Team Leader	(15) 13.5	Additional recruitment currently moving to recruit an additional 1wte team leader
B5 Data Analyst	(1) 1	
B6 Investigating Officers	(14) 10.65	This includes 2.5wte staff borrowed from Health Improvement who will return to their posts in mid-Feb.
B7 Service Manager	(2) 2	Maternity cover one service manager will begin maternity leave in April. Cover has been arranged.
B3 Admin Assistant	(1) 1	

Assessment

The following data provides an overview of activity and epidemiology over the last couple of months.

Positive Cases (last 30 days)

The chart below shows the distribution of new NHS Lanarkshire positive cases in the last 30 days to the 12-02-21 (NB 12/02 is an incomplete day).



Case Interview and Case Completion Rates

The average case interview completion rate inside 24 hours of notification on CMS is a measure of how quickly a contact tracer manages to interview the case, identify contacts and any events/settings of interest. Monthly average rates are listed below.

September	74.0%
October	71.8%
November	91.2%
December	91.4%
January	95.2%
February (to 10/02)	96.3%

The average case completion rate inside 24 hours of notification CMS is a measure of how quickly the wider team manage to complete all other investigative activity associated with a case before it can be closed off.

September	53.4%
October	56.3%
November	84.4%
December	86.0%
January	91.7%
February (to 10/02)	92.0%

From mid-November to mid-December positive case numbers dropped well below the peak seen in October and remained consistent throughout this period. This allowed us to further develop our service to ensure it is well prepared for more challenging periods. We used this time to introduce record audits, review operating procedures, carry out one-to-ones and complete the Healthcare Support Worker Standards. Our primary focus has been improving the skills and knowledge of our contact tracers to improve the service.

On the 1st February the service returned to calling all identified contacts of positive cases. Over the period of the winter pressures we were routinely using SMS messages to communicate with contacts.

Future of the Test & Protect Workforce

The return to calling all contacts will reduce the number of cases a contact tracer will be able to complete in a shift because of additional call time. With current staffing levels and infection rates, service capacity is more than sufficient to meet current demand. However, there are risks ahead:

Community Asymptomatic testing - modelling indicates as many as an additional 600-800 new cases a day could be found nationally. NHS Lanarkshire accounts for around 17% of the national total meaning we could potentially expect an extra 100 -130 cases a day by April. This is likely to be a worst case scenario.

Expansion of LFD tests to schools and workplaces - in addition to the case finding outlined in the previous point, contact tracing LFD cases will result in a higher admin load for Test & Protect. LFD tests with positive/negative PCR tests will need to be reconsidered and isolation advice to the cases and contacts changed as required. This will put a greater demand Test & Protect time.

Testing of close contacts - it is anticipated that we will be asking close asymptomatic contacts to seek a PCR test to actively pursue potential cases.

School reopening and loosening of restrictions - from 22nd Feb schools will return and at some point in the spring we expect COVID restrictions will be relaxed, at least to some extent. Both these events will inevitably result in increases in cases and increased demand on Test & Protect.

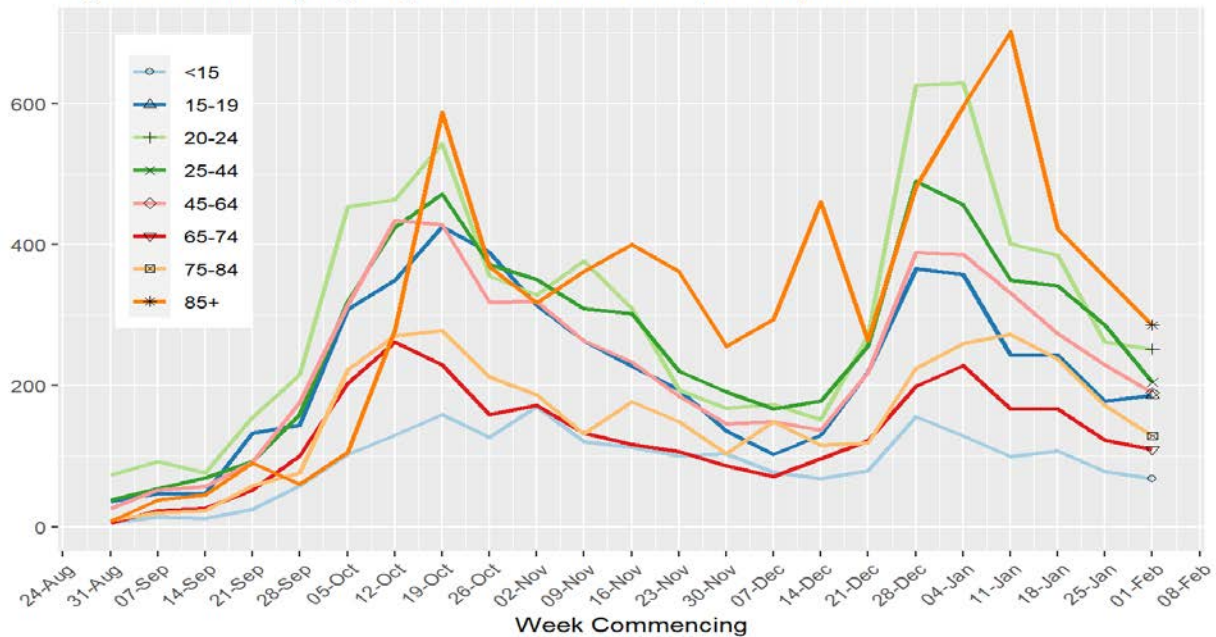
For these reasons, it is imperative we maintain the Test & Protect workforce.

Age and Rate of Infection

The current age related epidemiology since August 2020 can be seen in Graph 1 below. The surge in cases over the Christmas and New Year period largely mirrors the pattern seen in the October wave, with the highest rate of infection in the 20 – 24 age group, followed by the 85+ age group. Since January infection rates have continued to fall in all age groups.

Graph 1

Figure 15: Weekly Age Specific Covid Rates per 100,000



Recommendation

The Board is asked to:

- note the development in service capacity since September 2020; and
- note the information provided which provides an overview of service delivery during the period in question and a summary of the risks ahead.

Peter King
 Test & Protect Manager
 12th February 2021