



Department
of Health &
Social Care

Update to Local Areas on Testing Policy

11th September 2020

Our priority is to test to find as many positive cases as possible and protect those at highest risk.

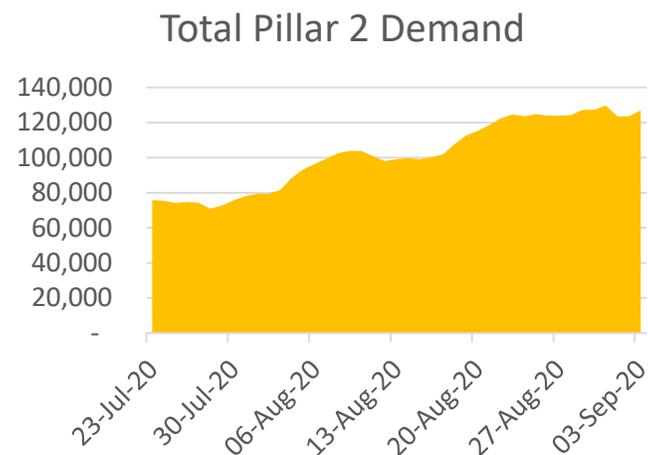
- The best way to manage outbreaks, keep R down, protect the public and support the economy is to **find as many positive cases as fast as possible**, and **rapidly isolate contacts**. This must continue to be our number one testing priority.
- Testing has a vital role to play but **it is not a silver bullet**. **Behaviours matter more** – to prevent infection and transmission, and to comply with isolation if required. Testing needs to **support and drive behaviour change**.
- To manage outbreaks, we need to **increase the number of people with symptoms who are taking a test**; and where capacity allows, **assess whether asymptomatic testing would be a useful tool**.
- Where it is used, asymptomatic testing should be targeted at those at **higher risk of infection** or those in the **highest prevalence areas** who are **not symptomatic** or are **not coming forward for symptomatic testing**.
- Individuals must be able to **access tests in a wide range of ways, adapted to local need**, with strategies in place to **understand and address accessibility** issues and **individual preferences**, particularly in the highest prevalence areas and settings.
- **Repeat testing may be required** in high prevalence areas or settings to make asymptomatic most testing useful.



Our biggest immediate challenge is that demand exceeds capacity, with knock-on effects across the service

Demand nearly doubled in the space of 3 weeks

In response, we have put in place measures to boost our testing capacity and reduce non-essential demand:



Drivers

- Prevalence is rising, and an increasing number of areas are now on the Contain watchlist.
- Scotland saw a 100% increase in demand when schools returned.
- The public are seeking testing when not symptomatic, sometimes inappropriately advised by schools, workplaces or for travel purposes.

To increase capacity:

- ↑ Secured 3,500 **additional tests a day**, with plans to secure further 46,000 a day by end-Sept
- ↑ Scaled back testing appointments in **low-prevalence areas**: 50% reduction in SE and Wales, 60% in SW
- ↑ Looking to deploy innovations such as **cohort pooling** across closed institutions (e.g. care homes, schools and prisons).

To reduce demand:

- ↓ Scaled back **advertising** campaign.
- ↓ Communication to schools and universities about appropriate testing
- ↓ Changed **booking website and 119 call scripts** to discourage inappropriate uses



We have put in place a number of interventions to reduce inappropriate demand for testing

National

- Scaled back national advertising campaign
- The SoS is very supportive of communicating that testing should be prioritised for symptomatic people (except in specific circumstances – see appendix 1)
- Written to every school head to explain when a test is, and is *not*, needed
- Developed guidance for [universities](#)
- Changed the messaging on Regional Test Sites so only those who book can be tested
- Increased message discipline at Local Test Sites and Mobile Testing Units to ensure only those requesting a test are being tested, only walk-ins with symptoms are being prioritised (except in areas of national intervention), and tests are not being offered to those accompanying them if they are asymptomatic.

Local



We have made changes to 119, our websites (NHS.UK, GOV.UK) and test booking portal, to limit access to asymptomatic testing

 Changed 119 guidance so only those with symptoms (or in outbreak areas where asymptomatic testing is part of the agreed strategy) can order a test

 Removed the option to select 'Other' as a reason to get a test, people have to make an active decision to lie if they do not have symptoms and haven't been directed to take a test.

 Changed NHS and GOV.UK start pages to emphasise the symptoms and down play other uses

 Added 'call out' boxes as behavioural nudges to discourage inappropriate ordering

 Changed instructions so RTS need appointments to reduce inappropriate uses – e.g stopping by on the way home.

Who can get a test

Anyone with coronavirus symptoms can get a test.

Coronavirus symptoms are:

- a high temperature
- a new, continuous cough
- a loss or change to your sense of smell or taste

You can get a test for someone you live with if they have these symptoms. Do not get tests for people you live with who do not have these symptoms.

If you're asked to get a test

You can also get a test if:

- you live in England and have been told to have a test before you go into hospital, for example, for surgery
- your local council asks you to get a test
- you're taking part in a government pilot project

Important

Only get a test if you have coronavirus symptoms or have been asked to get tested.

This will help make sure people who need a test can get one.

 **Only continue if you have coronavirus symptoms or have been asked to get tested. Ordering unnecessary tests is wasting NHS resources.**