

To all practices Surrey and Sussex LMCs

29th June 2020

Dear Colleagues

Testing of Primary Care Staff and Patients for Covid 19 Antibodies

I am writing to all practices to address a number of queries that practices may have seen locally or nationally about the antibody testing programme.

This is a generic letter, the detailed arrangements for antibody testing and timing of these in each of the four ICS [Integrated Care Systems] [Sussex, Surrey Heartlands, SW London and Frimley [Surrey Heath and Farnham]] are different and GP practices should receive information describing local arrangements. This letter covers more general queries.

1. Should my practice register staff as Temporary Registered (TR) patients for the purpose of accessing Covid19 Antibody Testing?

No; practices should not do this; doing so is outside the GMS/PMS Regulations and staff do not qualify as TRs. NHS England agree with this position. In some areas this appeared to be the only way practices could actually request such an investigation, but this should not be the case with the LMC Confederation.

2. Is my practice covered by Indemnity Arrangements if taking blood from staff members for Covid19 antibody tests?

Yes; if your practice is not covered by current arrangements, then, providing staff are appropriately trained and competent to carry out this procedure, they will be covered under the Clinical Negligence Scheme for Coronavirus (CNSC). This has been established under the Coronavirus Act 2020 alongside the existing CNSGP [Clinical Negligence Scheme for General Practice] and CNST [Clinical Negligence for Trusts] managed by NHS Resolution to meet liabilities that may arise from the special healthcare arrangements put in place in response to the coronavirus pandemic incident

3. Can patients require practices to undertake NHS Covid19 antibody testing on request?

No; the relevant letter from NHS regarding this [25th May] makes it clear the roll out of antibody testing is dependent on local capacity; this includes laboratory testing capacity, and numbers of trained phlebotomists. NHS England is advising all NHS staff should be offered access to Covid19 antibody testing as capacity allows, but that registered patients can be offered testing:

- If this is clinically appropriate in terms of managing their illness
- If patients wish, should they already be having a blood test
- If they are registered patients who work as NHS staff

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4. What do the Covid19 Antibody Tests results mean?

If you test positive for SARS-CoV-2 IgG, the antibodies that are produced if the SARS-CoV-2 [Covid19] virus enters your body, this is very accurate in determining evidence of past infection and almost certainly means you have had a previous Covid19 [Coronavirus] infection.

However, there is insufficient evidence at present to confirm whether having such antibodies will protect against future risks of infection: usually the presence of antibodies does confer a degree of immunity, but again there is no evidence whether that this is the case for Covid19 or for how long it would last.

For this reason, staff and patients who test positive should still be advised, as appropriate, to follow PHE guidance in relation to Infection Prevention and Control guidance and also maintain social distancing and other hygiene precautions.

If you test negative for Covid19 antibodies this means you almost certainly have not had coronavirus (Covid19) infection in the past.

Both staff and patients can be advised that a significant proportion of people only have minor symptoms if they get Covid19 infection, or none at all, and therefore even if they had thought they had not had an infection, the antibody test is extremely reliable. Conversely, having had a pyrexical illness with respiratory symptoms, including a cough, is no guarantee of Covid19 infection as these are common symptoms of other flu-like/upper respiratory tract illnesses

Staff and patients who test positive do not need to self-isolate, as a positive test does not mean they currently have coronavirus or can infect others, unless they concurrently have symptoms suggestive of Covid19 infection, as because of the uncertainty about antibodies conferring immunity, staff or patients who are antibody positive and who develop symptoms suggestive of Covid19 infection under current guidance will need to self-isolate like everyone else.

There are no risks to having the antibody test beyond those associated with having a blood test for any other reason.

5. Will Antibody Testing affect an application for life or other insurance? [Please note this answer only relates to BMA advice for doctors and other colleagues may need to contact their own professional bodies for advice]

The BMA has liaised with the ABI [Association of British Insurers] and in most cases insurance will not be linked to antibody testing status or a recent coronavirus infection. Most insurers are currently deferring rather than refusing applications from those who have recently had a coronavirus infection. Normally applicants are expected to be back at work undertaking their normal work pattern and symptom free for at least a month before their application is considered.

If applicants have been seriously unwell, admitted to hospital, or had post-infection complications, insurers are likely to wait until they have been symptom free for three

months, and have returned to their normal work pattern, before their application is considered.

6. Does my practice have to offer staff-testing and do staff have to be tested?

No, there is no requirement to offer staff testing and this is not a GMS/PMS core contact service; many practices have reported to the LMC that staff are keen to be tested, noting the implications of both positive and negative results as above. However, having an antibody test is entirely voluntary for NHS staff and there should be no pressure to do so. It makes no difference to the assessment of an individual's risk or the need to follow Infection Protection and Control procedures.

Patients can be tested under the arrangements noted above, where either this is clinically indicated or the relevant clinician is able to offer the test/agree to the patient's request for the test, in the context of a blood test being already arranged.

7. What should happen to Test Results?

Registered patient test results will be returned to their registered GP as normal.

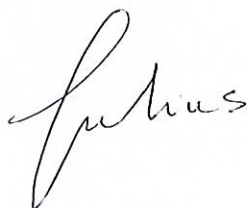
Employers should not receive staff testing results; if they do, they should pass these on to staff members individually and delete this information.

Staff should be asked to identify their own NHS GP to whom antibody test results should be sent.

There are delays in receiving some results due to laboratory capacity.

I hope this background information is helpful

Yours sincerely

A handwritten signature in black ink, appearing to read 'Julius', written in a cursive style.

Dr Julius Parker
Chief Executive