



Novel coronavirus (COVID-19) standard operating procedure

Symptomatic and asymptomatic staff testing

26 April 2022

This guidance has been updated to reflect the changes to the UK Health Security Agency's [COVID-19: management of staff and exposed patients or residents in health and social care settings guidance](#). It replaces previous standard operating procedures (SOPs) and FAQs for lateral flow device (LFD) use in NHS trusts and primary care and use of LFD for vaccination sites.

This guidance is correct at the time of publishing. However, as it is subject to updates, please use the hyperlinks to confirm the information you are disseminating to your staff is accurate.

Overall aim

Staff testing is an important component of the infection prevention and control (IPC) procedures which all NHS organisations and staff have a duty to follow.

This SOP (standard operating procedure) applies to all staff who are working in NHS organisations, all of whom will have access to symptomatic testing.

Patient-facing NHS staff should participate in the NHS asymptomatic testing programme. This is for all patient-facing staff including, for example, permanent and temporary staff, active volunteers, students and trust-based contractor staff. If staff members are unsure whether or not they should participate in the programme, they should discuss this with their line manager.

Also included are those working in England providing patient-facing care to NHS patients in an Independent Healthcare Provider (IHP), Prisons, Immigration Reception Centres, and other Places of Detention where a testing regime has been advised to continue. Other staff within these settings will not be eligible for free asymptomatic testing.

We must continue to keep patients and staff safe from potential transmission of COVID-19 in healthcare settings by ensuring that twice weekly testing continues for eligible staff.

Objectives

The objectives of staff testing are to:

- protect patients
- protect staff
- support the NHS in its infection control risk reduction strategy
- reduce staff COVID-19 absenteeism
- support both COVID-19 and non-COVID-19 clinical pathways

Background

LFDs detect the presence of the COVID-19 viral antigen from a swab sample. An LFD test is self-administered and produces a result in around 30 minutes.

The UK Health Security Agency (UKHSA) is responsible for the IPC guidance which informs this SOP.

Who should test and when?

Symptomatic NHS staff should test themselves using LFDs. LFD tests will continue to be available through the gov.uk portal for NHS staff in England with symptoms.

Any member of NHS staff who has symptoms of a respiratory infection, and who has a high temperature or does not feel well enough to attend work, is required to take a LFD test as soon as they feel unwell, to stay at home, and to avoid contact with other people.

If the **result of this LFD test is positive**, staff should follow the advice in the section for staff members who receive a positive LFD test result for COVID-19. (see next page).

If the LFD **test result is negative**, they can attend work if they are clinically well enough to do so and they do not have a high temperature.

From 1 April, in line with UKHSA advice, NHS staff in patient-facing roles should continue to test themselves twice a week, using self-administered LFD tests, when **asymptomatic**. This means every three to four days – to fit with shift patterns and leave requirements – for example, Wednesday and Sunday, or Monday and Thursday. Staff should be asked to perform the test at home before attending work.

Staff should undertake COVID-19 tests on an ad hoc basis if instructed by their employer or Director of Public Health in specific circumstances **such as an outbreak**. Staff will be notified via their line management structure if this applies to them

Staff undertaking COVID-19 tests as part of a **research study (e.g. SIREN)** should follow the protocols of their study. Please contact your local study coordinator for further details.

Ordering lateral flow tests

Asymptomatic NHS staff in a patient-facing role, or any NHS staff member who is symptomatic, can order LFD testing kits directly from [gov.uk portal](https://www.gov.uk) and 119.

Staff should follow the instructions and select 'yes' to the question 'Do you work for the NHS in England and take part in their staff testing programme?' Staff are encouraged to create an account when they place their first order. This should only take a few minutes and will retain ordering information, making it quicker to order tests in future. Staff can also use the same account to register results.

What to do if a test result is positive

In the event a staff member receives a positive LFD result, they are advised to self-isolate for five days but are no longer required to take a confirmatory PCR test.

Patient-facing NHS staff can return to work when they have had 2 consecutive negative LFD test results (taken at least 24 hours apart). The first LFD test should only be taken 5 days after the day their symptoms started (or the day their first positive test was taken if they did not have symptoms); this is described as day 0.

If both LFD tests results are negative, they may return to work immediately after the second negative LFD test result, provided they meet the criteria below:

- The staff member feels well enough to work, and they do not have a high temperature.
- If the staff member works with [patients whose immune system means that they are at higher risk of serious illness despite vaccination](#), a risk assessment should be undertaken, and consideration should be given to redeployment until 10 days after their symptoms started (or the day their first positive test was taken if they did not have symptoms).
- The staff member must continue to comply rigorously with all relevant infection control precautions and personal protective equipment (PPE) must be worn properly throughout the day.

The staff member should resume twice-weekly asymptomatic LFD testing when returning to work.

If the day 5 LFD test is positive, they should continue to test daily until they have received two negative LFD test results, taken 24 hrs apart. If the staff member's LFD test result is positive on the 10th day, they should discuss this with their line manager who may undertake a risk assessment.

If a staff member is tested with an LFD test within 90 days of a prior positive COVID-19 test and the result is positive, they should follow the advice for staff members who have received a positive test result for COVID-19 again, unless a clinical or risk assessment suggests that a re-infection is unlikely.

What to do if a test result is negative

If the LFD test result is negative, staff can attend work if they are clinically well enough to do so and they do not have a high temperature.

What to do if symptomatic but test result is negative

If the LFD test result is negative, staff can attend work if they are clinically well enough to do so and they do not have a high temperature.

If the staff member works with patients whose immune system means that they are at higher risk of serious illness despite vaccination, they should discuss this with their line manager who should undertake a risk assessment.

If they are still displaying respiratory symptoms when they return to work, they should also speak to their line manager who should undertake a risk assessment.

All patient-facing NHS staff should resume twice-weekly asymptomatic LFD testing when they return to work, taking the first of these tests 48 hours after the LFD test that was taken when they developed symptoms.

On returning to work, the staff member must continue to comply rigorously with all relevant infection control precautions and personal protective equipment (PPE) must be worn properly throughout the day.

Symptoms of COVID-19, flu and common respiratory infections include:

- continuous cough
- high temperature, fever or chills
- loss of, or change in, your normal sense of taste or smell
- shortness of breath
- unexplained tiredness, lack of energy
- muscle aches or pains that are not due to exercise
- not wanting to eat or not feeling hungry
- headache that is unusual or longer lasting than usual
- sore throat, stuffy or runny nose
- diarrhoea, feeling sick or being sick

Staff members who are contacts of a confirmed case of COVID-19

Patient-facing healthcare staff who are identified as a close contact should continue with twice-weekly asymptomatic LFD testing.

If you are a household or overnight contact of someone who has had a positive COVID-19 test result it can take up to 10 days for your infection to develop. It is possible to pass on COVID-19 to others, even if you have no symptoms.

Staff who are identified as a household or overnight contact of someone who has had a positive COVID-19 test result should discuss ways to minimise risk of onwards transmission with their line manager.

This may include considering:

- redeployment to lower risk areas for patient-facing healthcare staff, especially if the member of staff works with [patients whose immune system means that they are at higher risk of serious illness despite vaccination](#)
- working from home for non patient-facing healthcare staff
- limiting close contact with other people especially in crowded, enclosed or poorly ventilated spaces

Reporting LFD test results

It is a statutory duty that all test results are reported, whether they are positive, negative or invalid/void. This must be done every time an LFD test is completed.

Organisations may ask their staff to follow an established local reporting procedure, in which results are submitted by the individual to their organisation, which then collates and submits all results weekly to NHS Digital's Strategic Data Collection Service (SDCS).

Alternatively, staff can report their results at www.gov.uk/report-COVID19-result. Staff should only report results through one route to avoid double counting. It is the employing organisation's responsibility to confirm to staff which route they must follow.

The test results should be read by the staff member in line with the manufacturer's instructions. Reading the results beyond the time period in the instructions can lead to false-positive results and the test will need to be repeated. Results should be read in line with the following:

- **Negative:** The presence of only the control line (C) and no test line (T) within the result window indicating a negative result.
- **Positive:** The presence of the test line (T) and the control line (C) within the result window, regardless of which line appears first, indicating a positive result. The presence of any test line (T), no matter how faint, indicates a positive result.
- **Invalid/void result:** If the control line (C) is not visible within the result window after performing the test, the result is considered invalid.

Implementation of this standard operating procedure

NHS organisations are asked to undertake the following:

- Provide staff with information on the testing requirements for NHS staff and how to obtain tests from www.gov.uk/order-coronavirus-rapid-lateral-flow-tests.
- Provide staff with details on the requirements for reporting results – either through the national reporting platform or an individual organisation's local reporting route if preferred.

- Ensure staff members know what to do if they test positive or if they begin to develop symptoms.

If you have a problem with your test kit

If anything in your COVID-19 test kit was missing or damaged, or you were harmed using the test kit, [report the problem online](#) or call 119. Do not use the test kit if any part of it is missing or damaged.

Further information

For queries and further information about the information in this SOP, please contact the **NHS Testing Programme** at england.covid-ld@nhs.net