

NHS England and NHS Improvement  
Skipton House  
80 London Road  
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**21 January 2021**

Dear colleagues,

### **COVID-19: Provision of tuberculosis services update**

Tuberculosis (TB) is a notifiable infectious disease and active TB disease is 'health critical' to the individual with TB and the wider community. Providers of TB services must maintain the focus on early diagnosis and the management and care of people with active TB disease during the COVID-19 pandemic.

Maintaining the provision of TB services will include ensuring TB clinics are supported, adequately staffed and recognise patient and staff COVID-19 safety. This can include provision of appropriate technology to support patients and staff. In particular:

- Maintenance of TB services and TB staff should be included in emergency planning processes.
- For TB services with only one nurse, the hospital or community service providing the service should ensure their local TB service has adequate support to maintain services during the COVID-19 pandemic.
- Guidance and risk management for clinics during the COVID-19 pandemic should be as for all other patient contact situations.  
([www.england.nhs.uk/coronavirus/secondary-care/infection-control/](http://www.england.nhs.uk/coronavirus/secondary-care/infection-control/)).
- Patients concerned about attending appointments should be reassured or offered alternative support through telephone/mobile telephone communication apps.
- To reduce person-to-person contact, a blood test (IGRA) can be used for contact tracing instead of the TST/Mantoux test.
- Physical, personal patient visits/contact should be maintained where the contact tracing process shows:
  - children are at risk of exposure to TB
  - patients have infectious or pulmonary TB, or are vulnerable contacts who are at high risk of progression to active TB disease
  - telephone or mobile telephone communication apps can be used where appropriate.

Public Health England (PHE) will maintain the National Mycobacterium Reference Service during the COVID-19 outbreak, with NHS-based laboratories, and expects laboratories to prioritise the following:

- identification of TB, drug-resistant TB and drug susceptibility testing, where indicated
- identification of non-TB mycobacteria, if clinically indicated
- data flows to enable TB contact tracing, and in particular MDR-TB.

### **Latent TB infection testing and treatment**

Latent TB testing is targeted at a high-risk group of patients. Where latent TB is identified and treated there are significant benefits for patients in terms of reducing their future risk of developing active TB.

Commissioners and providers of latent TB testing and treatment services are therefore encouraged to restore latent TB testing and treatment programmes where possible, based on local clinical advice, and taking into account current local circumstances and any potential mitigations that can be put in place to prevent risk of COVID-19 transmission. Any queries regarding this programme should be emailed to [england.tbprogramme@nhs.net](mailto:england.tbprogramme@nhs.net).

### **BCG vaccinations**

Childhood vaccination programmes are continuing, including the neonatal BCG vaccination. Therefore, maternity services and other providers of the BCG vaccination should continue to vaccinate for BCG.

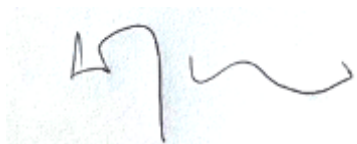
Yours faithfully,



**Matthew Fagg**

Director of Prevention

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