

- To:
- All NHS Acute, Mental Health, Community and Foundation Trusts:
 - Chief Executives
 - Medical Directors
 - Directors of Nursing/Chief Nurses
 - Chief Financial Officers
 - HR Directors/Chief People Officers
 - All Primary Care Networks
 - All GP Practices
 - All Infection Prevention and Control Leads
 - All Pathology Network Directors and Leads
 - All Regional Scientific Officers

NHS England
Wellington House
133-155 Waterloo Road
London
SE1 8UG

20 September 2023

- cc.
- NHS England Regional Directors
 - All Integrated Care Boards Chief Executives

Dear All,

RE: COVID-19 testing policy update – changes to order and supply

We are writing to inform you that, as of the 1 October 2023, the ordering and supply of Lateral Flow Devices (LFD), will transition from UK Health Security Agency (UKHSA) to NHS England. This is in line with [previous letters](#) regarding NHS testing [policy and guidance](#).

How this ordering and supply transition will affect the programme is detailed below.

Overview

From 1 October 2023, LFDs for all NHS use cases (with the exception of patients eligible for COVID-19 Antiviral Therapies) will be ordered through and delivered to NHS Trusts by NHS Supply Chain.

All UKHSA operated ordering and delivery mechanisms, including [GOV.UK's the home](#)



[delivery channel](#) will be closed. NHS Trusts who had previously relied on UKHSA for ordering and delivery of their LFDs – either direct to their organisation or via the home delivery channel – will need to take action to receive supplies going forwards.

Changes to ordering tests for existing NHS use cases

Currently, NHS Trusts order tests through UKHSA. Those patients and staff who are required to test (other than for antiviral testing, see below) are also currently able to access tests via GOV.UK and 119, which are fulfilled by UKHSA.

From the end of September, these routes will cease, and new arrangements are set out below:


- For NHS Trusts - From 2 October 2023, supply will be made via the 'Foundry'. This ordering route will open from 30 September 2023 and NHS Trusts who currently order from UKHSA will need to switch their ordering mechanism to order via this route from that date. Where NHS Trusts do not currently order from UKHSA, e.g., to supply satellite clinics or acute respiratory infection hubs, ICBs should ensure that ordering routes via other local NHS organisations are provided. All NHS Trusts are encouraged to ensure they have ordered sufficient kits to mitigate for any delays during the transition.
- For patients and staff who access tests themselves - Orders via GOV.UK and 119 will cease from 26 September 2023. NHS staff who are still required to test in line with the March 2023 guidance should obtain tests from their organisation. ICBs should ensure that all staff who need to test in line with the guidance are able to access tests; this may be facilitated by a local NHS Trusts supporting staff across the wider system.

Where local arrangements are in place for other NHS organisations to order tests, ICBs should ensure that ordering routes continue to be provided. This may be facilitated by an NHS Trust supporting its local system. A table of the relevant dates is set out below.

Last order date via GOV.UK/119	Last delivery via GOV.UK/119	Foundry opens	First delivery via Foundry
26 September 2023	29 September 2023	30 September 2023	2 October 2023

Changes to reporting tests for existing NHS use cases

Results reporting via GOV.UK and 119 will cease for existing NHS use cases from 30 September 2023. From this date, NHS staff and patient results should be reported via the



current collection through Strategic Data Collection Service (SDCS). It is important that patients on the antiviral programme continue to report their results via GOV.UK and contact the relevant healthcare service to seek treatment in the usual way.

No changes to NHS patient and staff testing use cases

There are no changes to the patient testing approach as detailed in the [letter from 31 March 2023](#). There remains no requirement for routine testing prior to elective care admission. For discretionary testing or where advised locally following risk assessment with appropriate advice from medical directors, nursing directors or directors of infection prevention and control (IPC), (e.g. for placement on wards that predominantly care for patients who are severely immunocompromised or to support pre-operative risk assessment for elective surgery), these tests should be provided to patients by their treating NHS Trusts as set out above. There are no changes to the staff testing approach as detailed in the letter from 31 March 2023.

For other settings, such as Primary Care, if a risk assessment has been undertaken with appropriate advice from IPC and the provision of tests is deemed necessary, ICBs are to make arrangements to supply the tests utilising stocks ordered through NHS Trusts.

Testing of Patients Eligible for COVID-19 Antiviral Therapies

The testing approach for highest risk patients potentially eligible for COVID-19 treatments has not changed, and ordering will remain via GOV.UK or 119. If the test returns positive, the patient is to contact their GP practice, NHS 111, or hospital specialist who will decide if they require an assessment for COVID-19 treatment. Full details can be found [here](#).

Financial arrangements

PCR – The changes will not affect the PCR funding and procurement guidance published in March 2023.

LFD – Orders for LFDs for NHS use cases ordered through and delivered to NHS Trusts by NHS Supply Chain will continue to be free of charge to NHS Trusts until 31 March 2024. Order volumes will be reviewed to ensure that orders meet reasonable expectations. From 1 April 2024, NHS Supply Chain will charge NHS Trusts for their orders per normal operating procedures. In line with the change in charging arrangements from 1 April 2024, NHS England will issue allocations to ICBs in 2024/25 for distribution to NHS Trusts in their 2024/25 contract arrangements.



No changes to other associated guidance and collections

Existing [UKHSA guidance on the management of COVID-19 patients](#) remains in place, and should be followed along with the appropriate IPC measures detailed in the [IPC Manual for England](#). The Manual should be adopted as mandatory guidance for IPC measures in all settings where NHS services are delivered. Any IPC measures beyond those contained in these publications are a matter for local decision making based on local factors such as the type of services delivered and local epidemiology.

Providers should continue to self-assess the effectiveness of their IPC measures and compliance with national guidance using the [IPC Board Assurance Framework](#).

Data on hospital onset COVID-19 infections should continue to be collected as part of the COVID-19 weekly sitrep data collection.

We thank you for all you continue to do to keep patients and staff safe during this transition.

Yours sincerely,

Professor Sir Stephen Powis
National Medical Director
NHS England

Dame Ruth May
Chief Nursing Officer
NHS England

Dr Kiren Collison
Interim Medical Director of Primary Care
NHS England

Professor Em Wilkinson-Brice
National Director for People
NHS England