NW STAC advice regarding exclusion and repeated positive results in care home residents and staff, with a note for non-care home based individuals

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In some individuals, there is a long tail of PCR positivity lasting several weeks which may not be indicative of infectious.

- Care home staff or residents with COVID-19 symptoms should isolate for 10 days (14 days for residents) from onset of symptoms (or positive test date if tested when asymptomatic).
- False negative tests for COVID can occur, particularly when staff are new to taking the swabs. For those residents where there is a strong suspicion of COVID-19 based on clinical findings, residents should stay in isolation for the full period of 14 days, even if they have a negative swab.
- Those who test COVID-19 positive when asymptomatic but go on to develop symptoms in isolation should isolate for 10 days from the onset of symptoms (14 days for residents).
- Staff or residents must have been fever free (temp <37.8c, without taking paracetamol or other fever reducing medication) for 2 days before ending isolation.
- A cough and loss of taste and smell are known to persist for a longer period therefore should not be used as a basis for remaining in isolation

If the above criteria are met, then a second positive test within 6 weeks of symptom onset (or 1st positive test if asymptomatic) should not result in exclusion, unless the positive test has been preceded by two or more negative tests (see Table 1 for example scenarios).

- Cases that test positive more than 6 weeks after the initial positive result should be managed as a new case.
- Cases that test positive after two successive negative tests should be managed as a new case.
- Regardless of prior test results, staff or residents who become symptomatic or whose symptoms worsen should self-isolate and be tested again.

Asymptomatic immunosuppressed residents who test positive after 2 weeks isolation should be isolated for a further week as a precaution. If the test result after the third week is still positive but the resident has no symptoms, they should be allowed to come out of isolation as long as IPC measures are maintained.

RESIDENTS	Routine testing schedule (weeks)									
		W1	W2	W3	W4	W5	W6	W7	W8	W9
Repeated positive results A resident develops symptoms and/or tests positive and is excluded for 2 weeks. They are tested 1 month later (week4) and are still positive. As long as they have no new symptoms, no exclusion is necessary. If they remain positive the next month (week 8) they should be managed as a new case and excluded.	E.g. 1	+ve	0	0	+ve	0	0	0	+ve	0
Repeated positive results with negative results	E.g. 2	+ve	ο	+ve	-ve	0	+ve	ο	+ve	0
between them A resident develops symptoms and/or tests positive and is excluded for 2 weeks. If they are subsequently tested more frequently than monthly (e.g. at hospital) and they have both positive a negative results, if a positive result is up to 6 weeks after the initial positive, no isolation is required as long as the resident is asymptomatic (example 2). However, if a positive result follows two or more successive negative results at any time, they should be excluded and treated as a new case (example 3).	E.g. 3	+ve	0	-ve	-ve	+ve	0	ο	0	ο
Immuno-suppressed residents* An immunosuppressed care	E.g. 4	+ve	-ve	0	+ve	0	ο	ο	+ve	0
home resident tests positive and is managed as a new case. If they are tested at end of their isolation and are negative they can come out of isolation (example 4). If still positive they should be isolated for a further week (example 5). If the 4 week test is positive they do not need to isolate, but if they remain positive the next month they should be treated as a new case.	E.g. 5	+ve	+ve	0	+ve	0	0	0	+ve	0

Table 1: A table to aid interpretation of repeated positive test results as part of routine monthly screening for determining isolation of care home residents Red shaded squares indicate that the resident is in isolation for 14 days from symptom onset (or date of test if asymptomatic). +ve = positive test result, -ve = negative test result, **O** = not tested, D=Day, W=Week

* Those on active cancer treatment and those with HIV, bone marrow transplant, and solid organ transplant patients who are taking certain immunosuppressive drugs; those with inherited diseases that affect the immune system. Also those who are on oral or intravenous corticosteroids or other medicines called immunosuppressants that lower the body's ability to fight some infections (e.g., mycophenolate, sirolimus, cyclosporine, tacrolimus, etanercept, rituximab).

STAFF	Routine testing schedule (weeks)						
	Week	W1	W2	W3	W4	W5	W6
Repeated positive results After an initial positive test and isolation a staff member is tested weekly (example 1) or intermittently (example 2) and continue to test	Example 1	+ve	+ve	+ve	+ve	+ve	+ve
positive. If asymptomatic, no exclusion is necessary unless it has been over 5 weeks since the initial result.	Example 2	+ve	+ve	0	+ve	0	+ve
Repeated positive results with negative results between them A staff member develops symptoms and/or	Example 3	+ve	-ve	+ve	-ve	-ve	+ve
tests positive and is managed as a new case. After the initial exclusion period they are tested and have positive and negative results. Even if	Example 4	+ve	-ve	-ve	+ve	-ve	-ve
it within 6 weeks of the initial test, if a positive result follows two or more successive negative results they should be excluded and treated as a new case.	Example 5	+ve	0	-ve	0	-ve	+ve

Table 2: A table to aid interpretation of repeated positive test results as part of routine weekly screening for determining isolation of care home staff Red shaded squares indicate that the positive test result would lead to the exclusion of the individual for 10 days from symptom onset (or date of test if asymptomatic). +ve = positive test result, -ve = negative test result, **O** = not tested, D=Day, W=Week

OUTBREAK TESTING	Day/Week	D1	D4	W2	W3	W4 (D28)	W5	W6
After activation of the rapid testing pathway an individual tests positive on day 1, or day 4 after re-testing. They are re-tested on day 28 and are still positive. No isolation is required. However, if still positive at week 6, they should be isolated and managed as a new case.	Example 1	+ve	0	0	0	+ve	+ve	+ve
	Example 2	-ve	+ve	0	0	+ve	-ve	-ve
Any individual that was negative on both initial screens (D1&D\$) and tests positive at day 28 should be managed as a new case. This would mean that the outbreak is still ongoing.	Example 3	-ve	-ve	0	0	+ve	+ve	+ve

Table 3: A table to aid interpretation of test results as part of rapid whole home outbreak testing for residents and staff. Red shaded squares indicate that the positive test result would lead to the exclusion of the individual for 10 (14 for a resident) days from symptom onset (or date of test if asymptomatic). +ve = positive test result, -ve = negative test result, **O** = not tested, D=Day, W=Week. The same principles as described in Tables 1&2 again apply.

Note for any individual who is not a care home resident or staff.

The same principles can be applied to individuals who are not residing or working in care home settings:

- Individuals that test positive more than 6 weeks after the initial positive result should selfisolate for 10 days from the date of the test
- Individuals that test positive at any point after two successive negative tests should be managed as a new case and self-isolate for 10 days from the date of the test
- Regardless of prior test results, individuals who become symptomatic or whose symptoms worsen should self-isolate and be tested again.

For your information, below is the definition of **Repeat/New** Outbreak.

A new outbreak in a setting is defined as two or more epidemiologically linked suspected and/or confirmed cases among residents or users and/or staff in the same setting with onset during a 14-day period, and with <u>no new cases for 28 days</u> since the onset of symptoms in the last case or since the last COVID positive test in an asymptomatic case among residents or users and/or staff in the same setting.