

To:

- ICS leads
- All CCG accountable officers
- All NHS Foundation Trust and Trust:
 - Chief executives
 - Medical directors
 - Chief nursing officers and chief people officers
 - HR directors
- All PCNs and all GP practices
- All community pharmacy
- All NHS primary care dental contract holders
- All Primary Care optometrists and dispensing opticians
- All Pathology incident directors
- All Regional Chief Scientific Officers

Cc:

- Chairs of ICS
- All CCG chairs
- Chairs of NHS trusts and foundation trusts
- All Local Authority chief executives
- NHS regional directors
- NHS regional directors of commissioning

23 February 2022

Dear colleague,

Living with COVID-19 white paper – update

Earlier this week the Prime Minister outlined the plan for Living with COVID-19.

We are writing to provide you an initial update in the light of this plan and to outline the areas that are being reviewed and may change, and to highlight those areas that will remain the same.

NHS staff who test positive

Healthcare staff who have tested positive for COVID-19 should not attend work until they have had two negative LFD test results taken 24 hours apart. The first test should not be taken before day 5 after their initial positive test.

These tests need to be 24 hours apart, and providing they are medically fit, they can return to work on the morning of day 6 providing they tested negative 24 hours earlier.

UKHSA will be updating the guidance for staff and patients exposed to COVID-19 and this will be posted on the UKHSA guidance pages on the [24 February](#).

In line with previous NHS England and NHS Improvement [guidance](#) published in March 2020, NHS organisations and their subcontractors are expected to ensure that any member of staff, including bank and sub-contractor staff, who have to be physically present at an NHS facility to carry out their duties, receives full pay for any period in which they cannot attend work as a result of public health advice.

As throughout the pandemic, it is vital that organisations continue to work closely with their sub-contractors to manage infection risk.

For Agency staff, in line with [previous guidance](#) published on NHS Employers website, the agency must ensure that the staff being sent to undertake a shift have not tested positive for COVID-19.

The [Temporary COVID-19 - Terms and Conditions guidance](#), which includes arrangements for COVID-19 related sickness absence will remain in place. As such, there should be no immediate change in the payments made to eligible individuals who are required not to attend work due to COVID-19.

For Primary Care staff, in line with previous [guidance](#) published by NHS England and NHS Improvement, general practices must ensure staff are not required to work if they test positive for COVID-19.

Testing for patients and staff

The Prime Minister outlined changes to a variety of testing protocols; we will be writing to you in the coming weeks with the specific detail of the various testing protocols for patients and staff. Current testing protocols should continue until further guidance is received.

For now, NHS staff should continue to access their tests via the universal offer online until advised otherwise and community pharmacies will continue to provide a supply of tests until 31 March. In extremis, regional testing leads will have a supply of tests to be accessed on an emergency basis provided to them by UKHSA. We will communicate further about testing provision for NHS staff and patients as this is agreed with UKHSA and DHSC.

Reporting test results remains a requirement and we should encourage all staff to report the results of their twice weekly asymptomatic tests whether positive or negative at <https://www.gov.uk/report-covid19-result>.

Infection, Prevention and Control

There are no immediate changes to IPC requirements. This includes the requirement for staff, patients and visitors to wear a mask/face covering in healthcare settings. The consistent application of IPC measures, alongside the roll out of the vaccine programme and staff and patient testing, remains the most effective defence against the entry and spread of COVID-19 in healthcare settings.

Visiting guidance

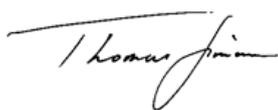
The visiting guidance is being reviewed in light of the Living with COVID-19 plans and we will be communicating the outcome of this review shortly so that visitors can attend hospitals and healthcare settings in a manner that continues to protect patients and staff.

COVID treatments

Supporting the roll-out of COVID-19 treatments for non-hospitalised patients remains a NHS priority. Since 10 February, COVID-19 medicine delivery units have been able to assess patients who test positive via a lateral flow or PCR test (previously only PCR). The Prime Minister has said symptomatic testing for vulnerable patients will remain available which will support access to COVID-19 treatments but we will notify you of any further changes. The latest information for the NHS is available at: www.england.nhs.uk/coronavirus/community-treatments/.

Thank you for your ongoing support.

Yours sincerely



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