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| Committee: | Dated: |
| Community and Children's Services | 29/01/2021 |
| Subject: | Public |
| Implementation of Lateral Flow Testing in the City of London | |
| Which outcomes in the City Corporation's Corporate Plan does this proposal aim to impact directly? | 1, 2, 4 |
| Does this proposal require extra revenue and/or capital spending? | N |
| If so, how much? | £NA |
| What is the source of Funding? | Grant funding from DHSC for COVID contingencies |
| Has this Funding Source been agreed with the Chamberlain's Department? | Y |
| Report of: | For Information |
| Director of Community and Children's Services | |
| Report author: | |
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Summary

In early December, it was announced that a number of local authorities including Hackney and the City of London Corporation would be receiving a stock of lateral flow devices in order to carry out mass testing of asymptomatic residents. Directors of Public Health will determine how to prioritise the allocation of these new tests, based on the specific needs of their communities, and will determine how people in the local area are tested. Lateral flow testing (LFT) testing in the community has support from the key political leaders and executive staff in the City of London Corporation.

Recommendation

- Members are asked to note the report.

Main Report

Background

1. We know that one in three people who have coronavirus never show any symptoms however that does not mean they are not infectious. Lateral flow devices (LFDs) are one of the newly developed tools that are being used to help detect and fight the virus. These LFD devices can help identify people who have high levels of virus who do not have symptoms and would not otherwise be coming forward for a test. They are fast acting and do not require processing in a laboratory unlike PCR tests, they are therefore very useful in community settings to enable key workers to continue

working in their roles while minimising the risk of transmitting infection if they are asymptomatic.

2. The key aims of these LFT testing sites include mitigating against the significant impact Covid-19 is having on key workers in a range of settings and to provide rapid testing. The testing will prioritise key workers within the Square Mile, who are essential to keeping the Square Mile a place to live and work. Key groups within this will include social care, children's services, court, schools, libraries, markets and consumer protection staff, cleaners, carers and volunteers, etc. The key aim of LFT testing is to ensure that the City of London is able to service its resident population and keep key services maintained for its worker populations.

Evidence Base for LFT testing

3. Evaluations from Public Health England and the University of Oxford show LFD tests are accurate and sensitive enough for specific case uses within the community setting.
4. Preliminary data from the University of Liverpool¹ which showed a sensitivity of 48.9% was reassessed through re-categorisation by cycle thresholds which led to a sensitivity improvement of circa 10%. This means a more accurate estimate of the sensitivity from the Liverpool pilot is around 58.9%. In addition, the difference between expert reviewers administering the test and other non-clinical testers administering the test disappeared over the 2-week period – which suggests training is a key factor in ensuring higher sensitivity from the LFDs. While further work is undertaken to understand the evidence on sensitivity, it is important that LFD is used in conjunction with other infection control measures.

How Lateral Flow Device Testing Works

5. Lateral flow tests are self-administered. The following is a step-by-step description of how the tests are carried out and subsequently deliver a result (source: PHE):
 1. A swab sample is taken by the user from the nose and/or mouth.
 2. The swab is then mixed with a buffer solution. This release and breaks up the virus fragments.
 3. Some of the solution is then dropped onto the lateral flow device where the solution containing the virus fragments is drawn down onto an absorbent strip.
 4. The virus fragments then move along the strip and they reach a set of labelled antibodies. The labelled antibodies recognise specific parts of the viral fragments and bind strongly to them.

¹ <https://www.gov.uk/government/publications/innova-lateral-flow-sars-cov-2-antigen-test-accuracy-in-liverpool-pilot-preliminary-data-26-november-2020>

5. The virus fragments, bound by the labelled antibodies, will then reach the test zone of the device where a line of fixed antibodies also recognise and bind the virus fragments.
6. After about 5 minutes a coloured band will appear at the control zone telling the user that the test has worked.
7. A positive result is shown by a coloured band at the test zone which indicates that the virus is present. The result will be ready 10-30 minutes later.

Clinical governance

6. A clinical standard operating procedure (SOP) for LFT testing has been adapted for north east London in consultation with borough leads, NHS Partners, Hub Logistics. This is an adaption of the national SOP and ensures a high standard of clinical governance across each test centre within each borough.

Site set-up

7. A NEL lateral flow group was established very quickly with the remit to set up one site per borough and complete a 'bid' in the form of Annex A - the turnaround time was less than 5 days, which left very little room for negotiating sites, costing the sites and providing an adequate epidemiological case for siting the test centre.
8. Annex A bids were agreed for all borough sites in NEL and boroughs quickly worked to pull logistic teams together, only to be informed that we were required to use Hub Logistics as our sole provider for staff and equipment.
9. The NEL Lateral Flow Delivery Group has agreed for each site to be inspected by Hub Logistic leads with borough leads, and, once a site was approved as suitable for a LFT test centre, the borough conducts a risk assessment of the site and Hub Logistics completes the full site set up. Any issues which arise at this stage were brought to the NEL Lateral Flow Deliver Group.
10. Clinical compliance was assured with strict adherence to the clinical SOP and using a train the trainer approach for training.

Golden Lanes Site

11. In terms of the required timeframe and resources available, a decision was made to site the City of London lateral testing site at the Golden Sports Hall / Badminton Court. Unlike other authorities the Golden Lane Sports Centre is the only local authority commissioned sports centre within the Square Mile. No other immediately available and viable locations were identified at the time.
12. A process of ongoing risk assessment and risk management is taking place in relation to the Golden Lane site. As long as appropriate social distancing is maintained, lockdown requirements are complied with, clinical waste is

appropriately disposed of, hands, face and space guidance followed, then no additional public health risk has been identified in relation to the location of the testing site at the Golden Lane Sports Hall.

13. A 'soft launch' of the in the run up to Christmas to allow officers to evaluate and adapt its operation while keeping numbers low.
14. There has been some reported anxiety amongst Golden Lane residents about the location of the site with direct contact with DCCS having been made by less than 5 residents.
15. Local members have assisted with the development of signage to the site using public routes. A video has been made to aid users in finding the centre and following the social distancing requirements.
16. The site is due to move from the Golden Lane in order to increase the number of tests that can be offered and provide better geographical access to keyworkers and targeted residents (keyworkers, volunteers and carers) across the City.

Alternative Sites

17. A number of alternative sites have been looked at re: lateral flow testing, including:
 1. **Guildhall** – sites within the Guildhall complex were looked at for lateral flow testing but were / are not viable due to the inability to have symptomatic and asymptomatic testing on the same site.
 2. **Barbican Exhibition Halls** – both halls were considered but would require up to 3 months work to be viable. The approximate cost of bring one of the halls back into operation is £250K.
 3. **Chartered Institute of Insurance Building (CII)** – discussions have taken place with City Surveyors re: the possibility of using the CII for lateral flow testing. However, these are limited by a potential tenant having already been identified for the CII.
 4. **Museum of London** – an approach has been made to the Museum of London re: possible use of space there for lateral flow testing.
 5. **80 Leadenhall** – discussions are at an advanced stage re: repurposing the sexual health clinic to provide lateral flow testing.

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