

Increased frequency of LFD testing for children, young people and staff in schools and FE Providers – FAQs

KEY MESSAGES

- Up to one in three people who have COVID-19 can spread the virus without knowing. Regular LFD Testing and reporting of test results is one of the most effective ways to reduce the risk of transmission of Covid-19 and support the continuation of face-to-face education.
- Increasing the frequency of asymptomatic LFD testing is a useful tool when we have a rise in cases and may have an outbreak, or high prevalence of COVID-19 in a local area., This might be recommended by local Directors of Public Health (DsPH) or health protection teams (HPTs).
- It allows us to identify asymptomatic cases within a targeted group and ensure students can continue face-to-face education.
- Increased testing supports the aim of balancing the risks associated with COVID-19 whilst moving to a place that minimises the burden of implementing a system of controls on staff and parents and the impact those measures have on young people's educational experience.

FAQS

What is increased frequency of LFD testing?

- Increased use of asymptomatic LFD testing is a tool that local health teams can advise in educational settings in response to outbreaks (in individual settings or across a cluster settings) or in areas of high prevalence. The options include:

Close contact/ household testing

- Close contact/household daily LFD testing may be advised by local health teams for secondary schools aged pupils and FE students (and staff) in households of close contacts (identified by NHS Test and Trace), while they await the results of a PCR test.
- Local health teams may also advise that primary schools can also suggest their pupils and staff who are identified by NHS Test & Trace as close or household contacts to undertake daily LFD testing while awaiting the results of a PCR. This is left to parental discretion, and test kits for primary aged pupils can be accessed via gov.uk or their local pharmacy.

Outbreak testing

- Increased frequency of LFD testing, including daily testing for a group or cohort in secondary schools or FE provider (which can include staff) where case numbers are very high. If daily testing is advised it should be done for a minimum of 5 days, increasing to 7 days to ensure the final test is taken on a school day.
 - A one-off round of LFD testing for a wider group or cohort in a secondary school or FE provider.
- In all cases, students and pupils should continue to attend school or FE provider if they have a negative test result.
 - Participants will be asked to undertake increased frequency of LFD testing at home.

When is increased frequency of LFD testing needed?

- If a Director of Public Health (DPH) decides, in consultation with the setting, to recommend increased LFD testing, in response to outbreaks or in areas of high prevalence, the DPH will agree this with the education setting and may write a letter to the pupils/students/parents/workforce or the education setting.
- All individuals who are identified by NHS Test & Trace as close contacts of a confirmed case are strongly advised to take a PCR test.
- Public health teams may also recommend that close or household contacts (identified by NHS Test & Trace) who are exempt from self-isolation due to their age (those aged 18 and 6 months and under) or vaccination status (two doses of the vaccination) take daily LFD tests while awaiting the results of a PCR test and only attend schools/FE provider if the LFD is negative.

How and when will test kits be provided?

- If asked to undertake increased frequency of LFD testing, schools and FE providers should review their existing stocks of self-test kits first. It may be that a setting will have sufficient supplies of test kits already to begin increased testing.
- If more test kits are required, schools and FE providers should place an order as soon as possible via the [online ordering platform](#). (Remember the standard delivery timescales – orders placed by 5pm on a Tuesday will be delivered in the following week.)
- Schools and FE providers should also liaise with their Local Authority/Director of Public Health to understand if there is excess stock available to support additional testing.
- If a school or FE provider requires additional test kits sooner than can be fulfilled via the standard re-ordering process, or will run out of test kits imminently, as a last resort they should contact 119 to request an emergency replenishment.

How will increased frequency of LFD testing work in specialist settings and for pupils/students with SEND?

- In recognition of the additional considerations specialist settings have to take into account when delivering rapid asymptomatic testing, [additional guidance](#) is available for these settings and pupils with special needs.
- We recognise the difficulty of LFD swab testing for children and young people with SEND. Nasal only swabs may be more tolerable and specialist settings have the option of ordering extra nasal only test kits (Orient Gene and Acon Flow Flex).
- Special settings have a range of staff to meet different health needs and who have had training to help with taking swabs for those who cannot self-administer. Settings can also have parents/carers assist with swabbing on-site or at home. Support is also available from Medacs Healthcare.
- We are continuing to explore other approaches to testing for children and young people who are unable to have a throat and/or nasal swab.

Will increased frequency of LFD testing be used for outbreaks in primary and early years settings?

- Public health advice from UK Health Security Agency advises that there are limited public health benefits attached to regularly testing younger children with **LFD coronavirus (COVID-19) tests**. We therefore don't suggest routine asymptomatic testing of primary aged pupils.
- **Local health teams** can agree with primary schools to advise their students/pupils and staff who are identified by NHS Test & Trace as close contacts to undertake daily LFD testing. Testing primary aged children is left to parental discretion, and test kits for primary aged pupils can be accessed via gov.uk or their local pharmacy.

How is increased frequency of LFD testing different to regular twice weekly testing?

- Increased frequency of LFD testing is an additional measure implemented on the recommendation of the DPH/HPT as a response to outbreak management or areas of high prevalence and will not replace the current programme of twice weekly testing.

Will increased frequency of LFD testing be compulsory?

- All testing, whether as part of the regular programme for educational settings, or as part of an increased frequency of LFD testing intervention is voluntary. If consent has not been given, testing should not take place. If consent has been given but the child or young people refuses to test, testing should not take place.

What about boarding schools or residential settings where they have a higher number of household contacts- will increased frequency of LFD testing be used in these settings?

- Due to the nature of residential settings such as boarding schools, increased frequency of LFD testing is recommended where there is high prevalence. Settings should discuss any additional measures with their DPH or Public Health Team.

Should siblings of positive cases (or household contacts) isolate?

- In an outbreak situation, or in areas of high prevalence, local directors of public health and health protection teams can implement daily LFD testing for secondary aged or FE students in households or close contacts (identified by NHS Test and Trace) while they wait for the results of the PCR test. They may also advise for primary school pupils to undertake daily LFD testing, however this is left to parental discretion.