



Dear Colleague

ENHANCED SURVEILLANCE OF COVID-19 IN SCOTLAND – CONTINUATION OF THE COMMUNITY SURVEILLANCE PROGRAMME

From the
Interim Chief Medical Officer
Dr Gregor Smith

1. Public Health Scotland, on behalf of Scottish Government, has established epidemiological surveillance in the community for COVID-19, as part of the Enhanced Surveillance of COVID-19 in Scotland Programme. The programme became operational through triage hubs and clinical assessment centres across all Health Boards in Scotland from 27th April 2020.

07 Aug 2020

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For action:

NHS board Chief Executives
NHS board Medical Directors
NHS board Nursing Directors
NHS boards Primary Care Leads
NHS board Hub and Assessment Centre Leads
NHS board Directors of Public Health
NHS CPHMS
NHS board diagnostic laboratories
NHS reference laboratories
Health & Social Care Partnership Chief Officers

2. The initial 12-week programme of data collection concluded on 17th July 2020. Many thanks for your participation to date, as part of our ongoing collective commitment to fight COVID-19. You have supplied data which has contributed to a sample size of over 5,000 patients. Your efforts contributed to:

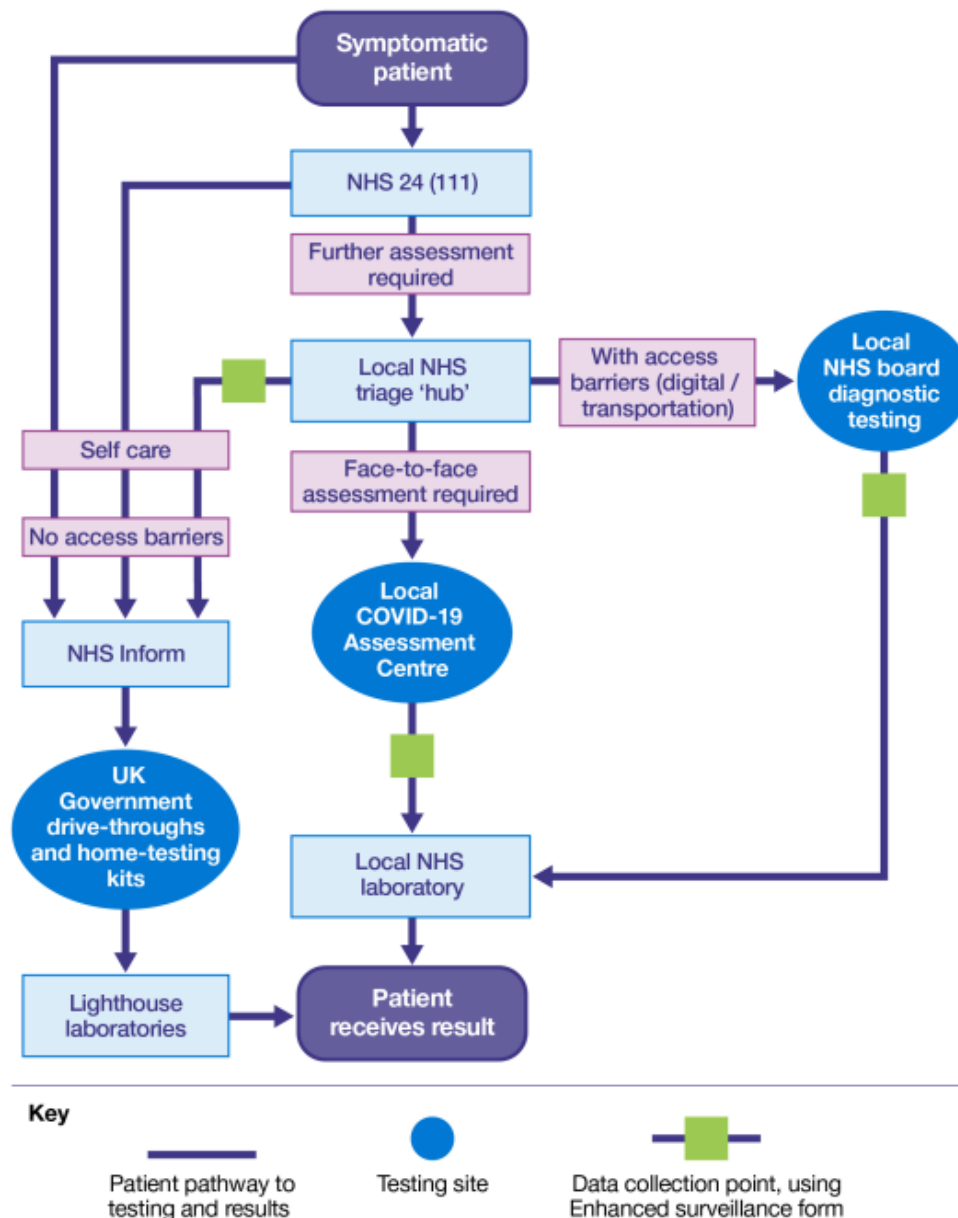
- a. the confirmation of what symptoms are more likely to be associated with COVID-19;
- b. identification of patients at higher risk of infection;
- c. informing the Scottish Government with the evidence required to move from [Scotland's route map](#) phase 2 to phase 3.

3. It is very important that this programme **continues** to monitor the prevalence of COVID-19 infection and patient characteristics with funding committed for a further 12 weeks, until 9 October 2020. We request that all NHS boards continue to be involved in recruiting patients who have mild illness and remain unwell at home or moderate illness and are referred for a face to face consultation.

4. We expect the surveillance programme to continue throughout the winter and more details will be provided in due course.

The programme is dependent on your support to sustain it into the next phase. Here's why this is so important:

- a. By gathering a wide statistically robust sample, we can understand the rate of positivity and incidence, clinical presentation and changes of COVID-19 over demography, geography and time.
 - b. Having continuity of this surveillance will contribute to our system for reporting early warning signals to the First Minister, to prepare for any resurgence of transmission of the virus and to prepare for winter planning.
 - c. Your data will support local intelligence, local service planning and local patient clinical management.
 - d. As soon as COVID-19 vaccines are available, the data from the community surveillance programme will be the only well-established source of information to estimate how effective these vaccines will be against COVID-19. It is, therefore, crucial that this programme is ongoing so that there are no gaps in the surveillance data and no delays in public health action.
 - e. Scotland is a key partner in the wider COVID-19 surveillance programme in Europe (IMOVE-COVID-19 consortium), and, therefore, maintaining our sample size and regular feed of virological results and metadata is essential. This collaboration is important to answer specific questions that could not be efficiently answered by countries acting alone.
5. The surveillance programme relies on three testing pathways for gathering the surveillance data, as indicated by the three data collection points in Figure 1 below (green boxes). The Scottish Government have confirmed that all people are [entitled to testing as part of Test and Protect](#), if they experience COVID-19 symptoms.



6. The Community Surveillance Protocol outlines how patients with mild and moderate symptoms, presenting to services, should be recruited, if they are pursuing a PCR test.
7. For patients with mild symptoms, calling NHS24 (111):
 - a. If a patient is referred to Local NHS assessment hubs for clinical triage/assessment of COVID 19 symptoms, does not require further face to face consultation and self-care is recommended, then they will be directed to [NHS Inform to book a diagnostic test](#) via the UK government testing route.

- b. The person should be asked to answer question from the Enhanced Surveillance Form either with the Triage Hub clinician on the call, or in a follow up conversation. An online web based form is in development which allows patients to self-complete the surveillance form. NHS Inform have agreed to send a text to point the patient to the form address, to encourage completion from the 80-85% of callers with digital access.
 - c. Until this digital solution is available, support must be provided for clinical or support staff to continue to complete the appropriate Enhanced Surveillance Form, towards the end of a Triage Hub call, or during a follow up call by non-clinical staff members.
8. For patients with moderate symptoms:
- a. People who have been assessed via the Local NHS triage hubs and need further face to face assessment will be referred to COVID Community Assessment Centres (CAC) or alternative sites if these have been stepped down.
 - b. The CAC/alternative site offering a PCR test in the centre must complete an enhanced surveillance data collection form with the person, face to face.
9. We ask that all NHS board COVID-19 Hubs ensure those with access barriers to testing (digital or transport) are supported with alternative routes e.g. via home visits.
10. The Community Surveillance National team will continue to work closely with local leads to implement the surveillance protocol, as the physical locations for clinical assessment and testing adapt in preparation for the winter pressures.
11. Please get in touch with Public Health Scotland, if you have any queries. Email: nss.hpscoronavirus@nhs.net and mark to the attention of the Enhanced Surveillance Cell.

Yours sincerely

Gregor Smith
Interim Chief Medical Officer