



23 June 2022

Dear Colleagues

Contact Tracing update

Thank you for engaging with the team on recent discussions about the future of contact tracing at the end of June following the transition period.

As outlined in the letter to you from WG Officer 1 <redaction s40(2)> of 30 March from 1 July tracing will be wholly targeted on protecting the most vulnerable and supporting the response to local outbreaks. Public Health Wales are working on a revised script that will help to identify cases that would benefit from a full trace. The team hope to circulate the revised script in the next week or so. Identified contacts of positive cases will receive an automatic text message directing them to the relevant guidance.

Across Wales teams have worked hard to reduce workforce numbers during the transition period. From the information provided to us, from 1 July our contact tracing workforce in Wales looks set to be around 380 core staff which is 18% of the February workforce. Teams have also retained contact details for staff who have left TTP but who would be willing to return in a Covid Urgent scenario in case a surge capacity is required. Thank you for your co-operation with this.

The Task and Finish Group established under the Transition Board to look at the future of contact tracing also recommended contact tracing staff undertake a wider health protection role. This means when they are not undertaking Covid contact tracing activities, their skills could be utilised to help with other health protection / health improvement matters. The extent to which there will be spare capacity for additional work is obviously unknown, but the Minister is keen to encourage this wider role for contact tracing staff.

To aid consistency in approach across Wales where possible, the following is a reminder of the work contact tracing staff should undertake, at the direction of regional leaders in health protection.

Priority 1

Covid support:

- Contacting positive cases to determine vulnerability, outbreaks / cluster management
- Supporting vulnerable / complex / high risk settings
- Preparing how would we influence and mobilise the public to quickly revert to testing, isolation and engagement should a VAMC emerge
- Support the 'protect' element for under-represented groups
- Provide support to facilitate anti-viral for vulnerable groups. Ensure pathways to access anti-viral are utilised and those eligible have access in a timely manner.
- Supporting administration of vaccination programmes where required including targeted work to engage disadvantaged / ethnic minority communities to promote Covid Vaccination.

Priority 2

Wider contact tracing support:

- Contact tracing for other infectious diseases as directed by PHW / Health board
- Providing advice and support in relation to managing outbreaks and incidents of other infectious diseases

Priority 3

Support for vulnerable / disadvantaged groups to address health inequalities:

- Work with vaccination services to increase uptake of childhood vaccination
- Targeted work to engage disadvantaged / ethnic minority communities to promote screening programmes (bowel, breast, cervical, diabetic eye disease); childhood vaccination
- Support healthy lifestyle programmes with intervention advice, one to one motivational interviewing
- signposting/referral into services in a variety of different scenarios, e.g. patients awaiting planned care, patients with chronic disease, women and families in pregnancy

Priority 4

Supporting Local Authority Environmental Health Activity:

- Carry out telephone 'alternative interventions' with food premises to review premises details such as ownership and assess the level of compliance with food safety)
- Raising awareness of food safety standards for premises that have not recently been inspected
- Support response to an environmental incident with public health harm by manning helpline and answer questions from members of the public affected by the incident

- Provide non face to face interventions with the care homes, schools, prisons to provide advice and guidance on IP&C/Health and Safety matters e.g. legionella

It is pleasing to see many regions have embraced this and have already started using contact tracing staff in wider roles, for example in helping with health elements of the Ukraine response, and in responding to the recent Monkeypox cases.

I also wanted to take the opportunity to update you on some changes to plans at the end of the transition period. Due to the increase in cases with the growth of the BA.4 and BA.5 Omicron sub-variants we are extending access to free lateral flow tests for the general public until the end of July to help support the change to protective behaviours and stay at home messaging. Access will also continue for visits to care homes and those on the treatment list. Due to the recent increase in prevalence levels to over 2% we are also continuing to advise regular asymptomatic testing for health and care staff.

Thank you once again for your continued support and commitment. I look forward to working with you in the months ahead.

If you have any questions at all please do not hesitate to contact my team.

Yours sincerely

WG Officer 2 <redaction s40(2)>
Cyfarwyddwr Dros Dro - Diogelwch Iechyd
Interim Director of Health Protection