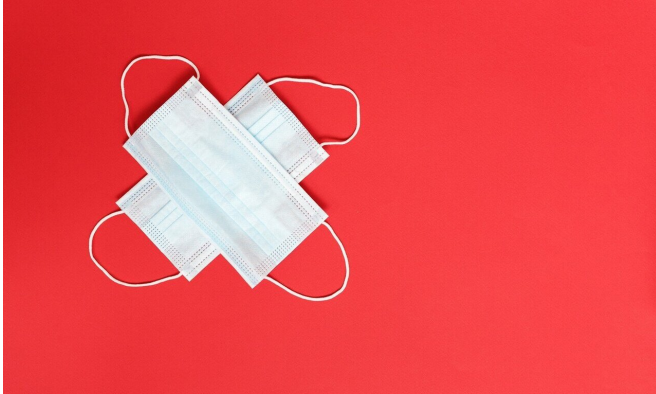


Concern over COVID-19 track, test and trace

26 June 2020



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Writing an analysis piece in the *BMJ*, Peter Roderick from Newcastle University and colleagues question why the government has eroded England's established system of local infectious disease control and created a parallel system which relies on private companies for testing and contact tracing.

They warn that the Government's "abysmal response" means that many suspected cases will have been missed.

They are concerned by clear and reported failings in this [parallel system](#), warning that many suspected cases will have been missed, and arguing that contact tracing and testing "should be led by local authorities and coordinated nationally."

Historically, England's system of communicable disease control has relied on experience and close cooperation between local health services and local authorities, they explain.

That local system has gradually been eroded over several decades. But instead of prioritising and rebuilding this system at the start of this epidemic, the government has created a separate system which steers patients away from GPs, avoids local

authorities, and relies on commercial companies and laboratories to track, [test](#), and contact trace.

They point to several areas of concern, including compliance with the notification system for suspected cases, a reliance on outsourced private testing services with no clear public health standards, and a centralised, commercially-run contact tracing programme with no proactive input from local authorities or use of their experience in communicable disease control.

Peter Roderick, a barrister and Principal Research Associate in the Population Health Sciences Institute at Newcastle University said: "The established legal notification system for making sure local authorities know about suspected COVID-19 cases in their area has not been followed, whilst confirmed cases are only notified to Public Health England. This has deprived local authorities of the early and detailed information they require to respond effectively to local outbreaks."

The experts say immediate steps should be taken to ensure that NHS 111 COVID-19 call centres and the COVID-19 clinical assessment service should be reintegrated immediately into [primary care](#) and practices resourced to resume care, they write. Official advice to those with COVID-19 symptoms should also be amended to direct them to contact a GP or NHS 111.

These steps, however, "do not amount to a coherent and adequate public health response to the epidemic in England," and that "Such a response requires [local authorities](#), NHS, and PHE laboratories to be sufficiently resourced to take the lead on contact tracing and testing, and general practices being resourced to support patients, under central coordination."

There's still time to change tack on this ad hoc system for COVID-19 tracking, testing, and [contact tracing](#), they say. England must rebuild and reintegrate a strong communicable disease control

system, and they urge the secretary of state to make this happen.

More information: Peter Roderick et al. Getting back on track: control of covid-19 outbreaks in the community, *BMJ* (2020). [DOI: 10.1136/bmj.m2484](https://doi.org/10.1136/bmj.m2484)

Provided by Newcastle University

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