

BOCC Minutes - Tuesday 23rd June

TO: Business & Operational Continuity Committee Incident Management Communications Group (for info)

Please find below minutes from the BOCC meeting of the 23rd June

1. Introduction

Andrew Rogan (AR) welcomed Lynn Thomas (LT), St. John Ambulance, and Andy Liggins (AL), City of London, who provided updates on testing in the workplace.

2. Type of testing

LT briefed members on the 2 main testing methods available for detecting coronavirus and their effectiveness. These includes:

- Antigen test: indicates if a person currently has the virus at the current moment of testing.
- Antibody test: which indicates if a person previously had the virus and developed antibodies against the infection.

There is uncertainty about the antibody test as it has not been fully concluded that a person would be able to fight off a second infection. Furthermore, one of the best indicators is checking for any related symptoms. Public Health England confirmed that those who are asymptomatic can be infected and spread the virus but may not show symptoms themselves. LT confirmed that self-swabbing was not as effective and stated that saliva testing would be an easier self-assessment method. AL emphasised the importance health and social distancing measures.

St John Ambulance has been looking at the return to normality for sports such as football and horse racing. Professional footballers were constantly tested using the antigen test and such testing had been extending to include immediate support staff.

3. Testing in the workplace

AL and LT sought members opinions on how often they believe staff should be tested in the workplace, what measures they had in place, and what the Hospital or Government could do to support a return to work.

AR noted that some firms were considering temperature testing. Members raised concerns about effectiveness of temperature testing, such as not having a qualified test administrator, data protecting concerns, its effectiveness, non-cooperating staff, and disturbing factors such as high temperature as a result of physical activities. LT confirmed temperature testing was not completely reliable as some people with COVID19 may not exhibit this symptom. LT recommended that firms used effective

temperature checkers such as walk through scanners and ear thermometers. A member stated that they were advised to introduce a sign at their entrance which noted that entrance into the building inferred consenting to a check and that firms should have their cool down areas outside the building.

The Chair asked how soon should employees be tested after they have been exposed to someone with the virus. LT said that testing would be better if the person had symptoms and that it would be difficult to conduct frequent routine testing. Where someone exposed others, they should immediately inform their contacts and ask them to self-isolate and to get tested. Testing is now quicker, and results can be issued within 48 hours. Other employees at work should continue to follow health and social distancing guidelines.

AR asked members about their current measures and processes. A member confirmed that they considered both antibody and antigen testing but were not convinced due to the associated challenges such as the reliability of the tests, costs, and managing the data. Additionally, the member confirmed that temperature testing was implemented in the Asian market earlier in January 2020 and would soon be introduced in the London branches.

LT stated that questionnaires about symptoms were extremely useful, as they made people evaluate themselves. Another member noted that other places such as hospitals required visiting patients to be quarantined for 2 weeks and to be tested 72 hours prior to the appointment in order to attend.

A member asked if TFL and Overland Trains operators had any plans on testing passengers. AL advised he was not aware of any such pans

Action: AL to provide UKF with updates on the TFL and Overland Trains Testing.

4. Testing Centres

AR asked members for views on the benefits of having limited testing facilities in various areas around the city. A member noted that it was too early to determine as they were still trying to understand antigen testing. Other members stated that they were considering launching their own testing in the workplace in collaboration with health care services, and that they hade temperature testing in place but were considering other testing.

Members confirmed that more data on the effectiveness of the antigen testing would help firms in making better decisions. Regarding the usefulness of the testing centres, a member stated that it might not be useful at the current period, but it would be later when people return to work. LT stated point of care tests were being developed and that it had the potential to change everything.

Action: LT to provide UKF with more data on antibody and antigen testing for circulation among members.