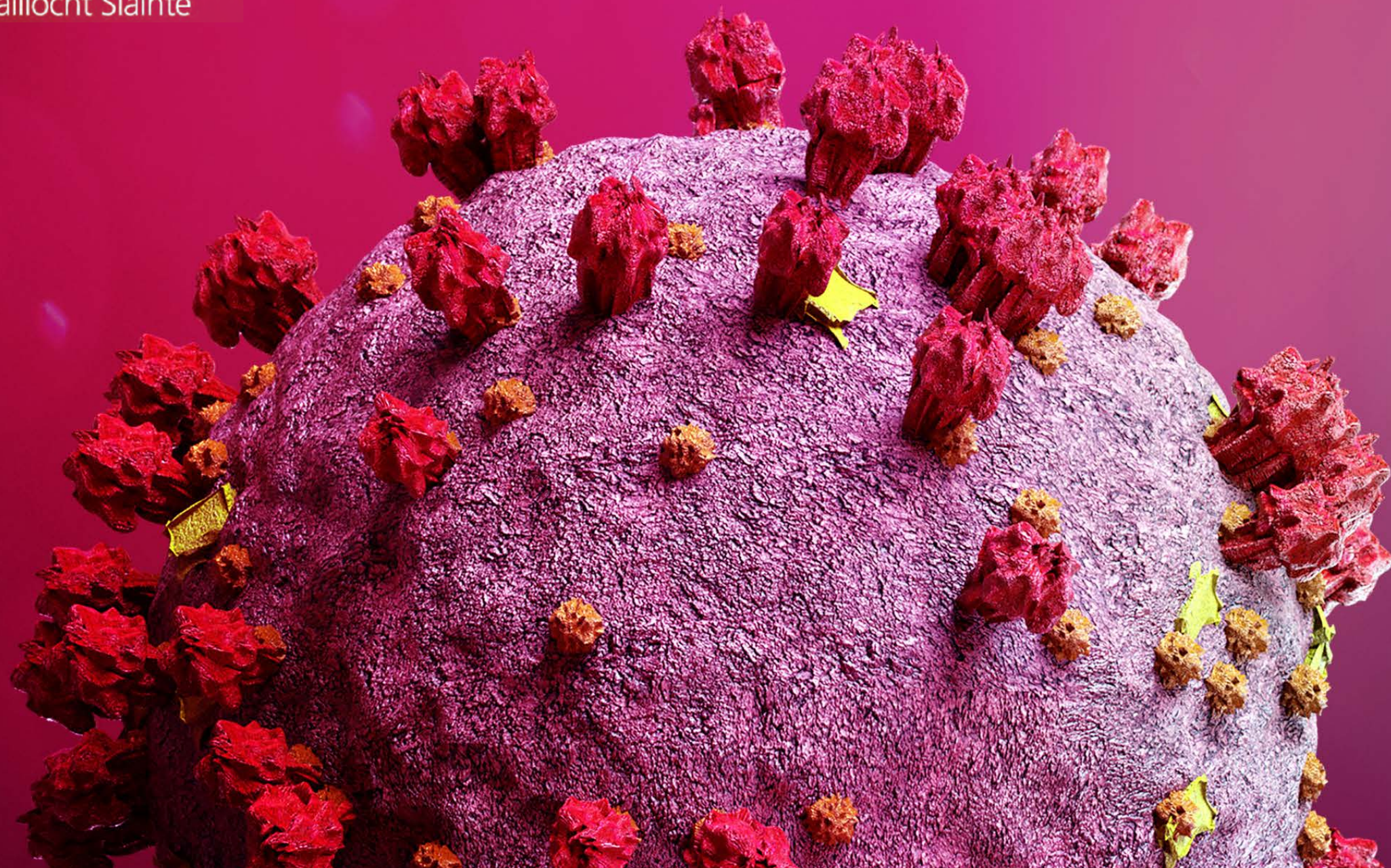




**Health
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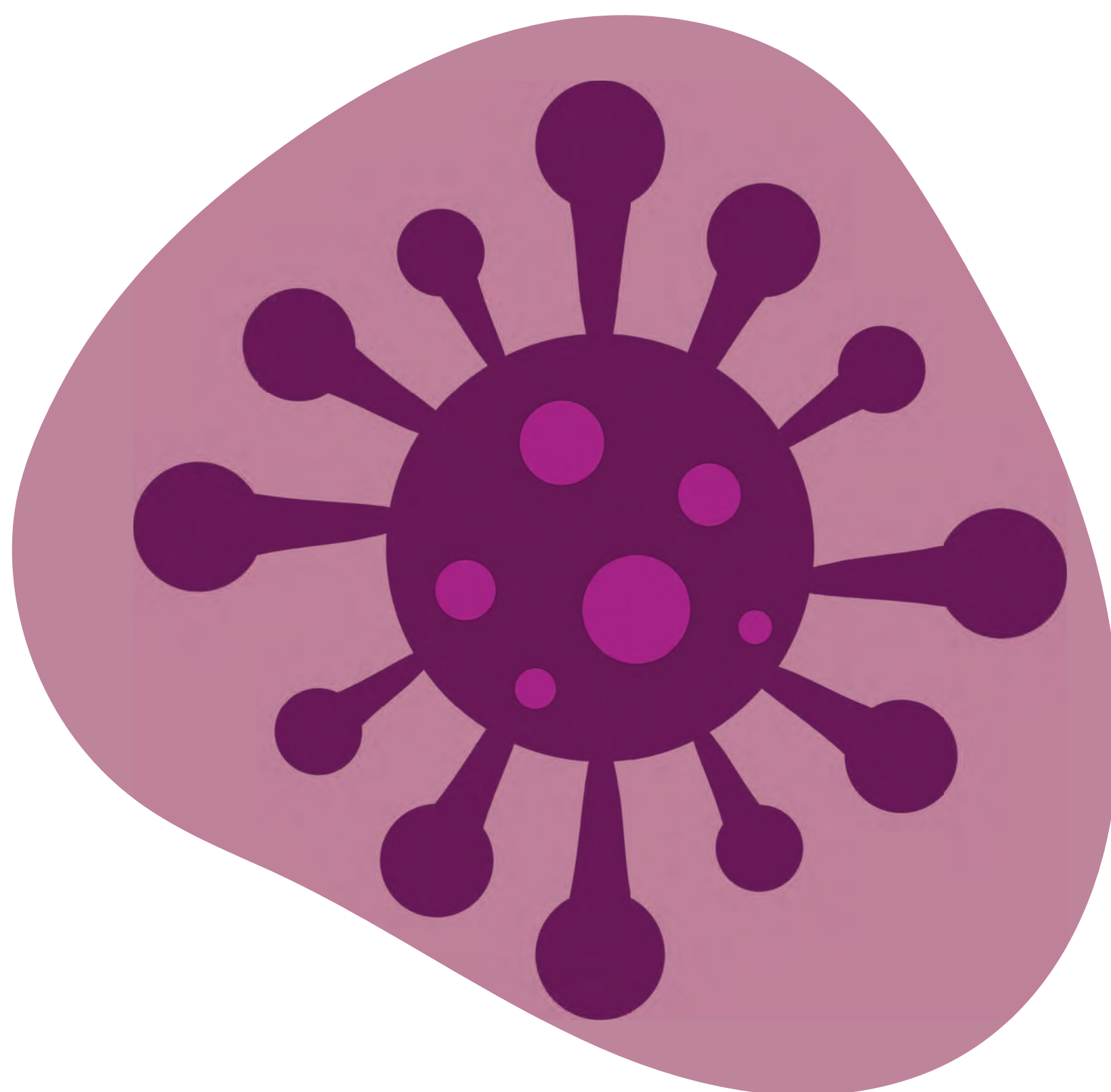
An tÚdarás Um Fhaisnéis
agus Cáilíocht Sláinte



A ROUND UP OF OUR

REPORTS, REVIEWS AND ADVICE

Submitted to support the National Public Health
Emergency Team to inform its work in April 2021





Unvaccinated healthcare workers

HIQA advised NPHET on developing policy for healthcare personnel who do not avail of COVID-19 vaccination.

Policies developed and enacted should be based on the 'intervention ladder' principle. This means that interventions are progressive, and for example, could start with providing evidence-based information and subsequently, utilise one-to-one conversations, testing and/or additional PPE.

"The past year has been very challenging for healthcare personnel and we have advised NPHET that any policy introduced regarding COVID-19 vaccination should be built on a model of encouragement and support."

Dr Máirín Ryan, HIQA's Deputy CEO and Director of Health Technology Assessment



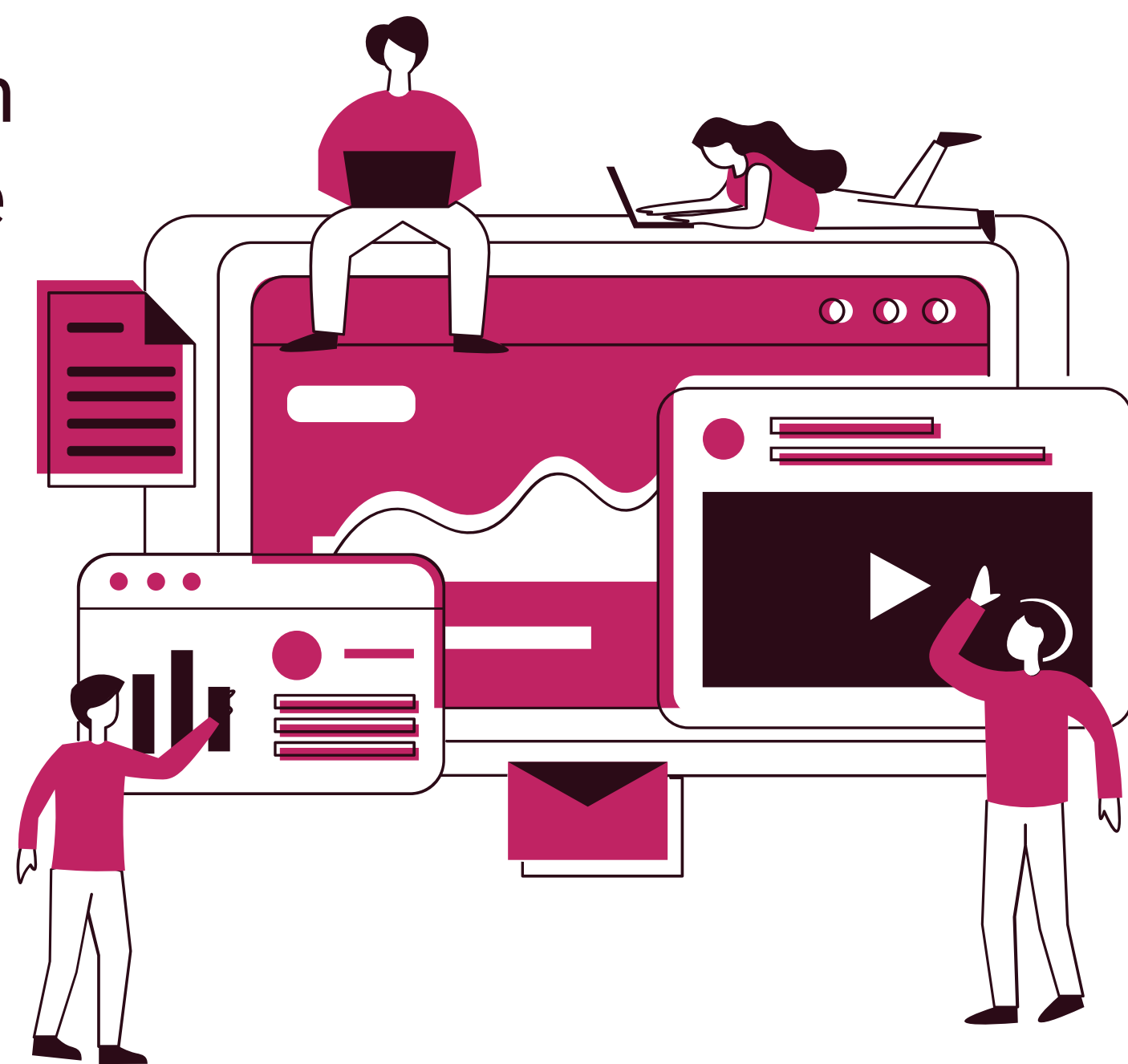


DATA COVID-19 DATABASE

Once a week we update our database of public health guidance on COVID-19 to include latest guidance from governments, public health organisations and NGOs.

The database is mostly used by relevant stakeholders in the Health Protection Surveillance Centre, the National Public Health Emergency Team, the Department of Health, and Health Service Executive.

However, it is accessible and available on our website for everyone and if you are interested in finding out more about how other countries are reacting to COVID-19, we encourage you to use it.





Duration of immunity

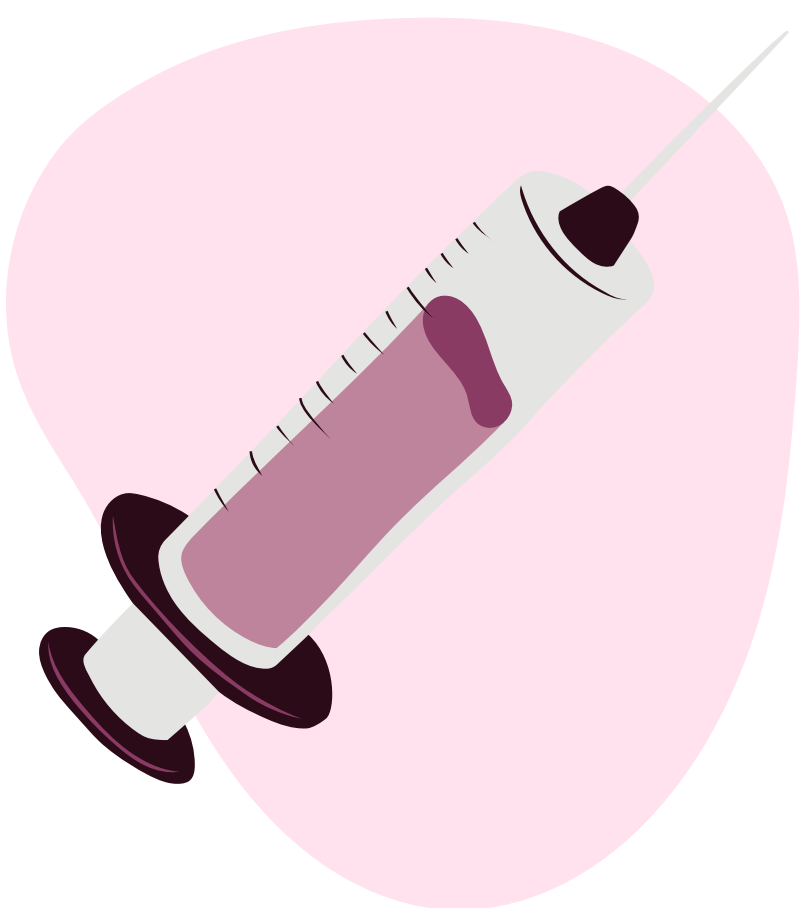
We have completed our seventh review into the duration of immunity following a SARS-CoV-2 infection.

We found that immunity post-infection is highly likely to last a minimum of **six months**.

We advised NPHEt that the **risk of reinfection** with SARS-CoV-2 during that period is **very low** and no evidence was found to suggest that immunity declines over this period.

To note...

The body of evidence relating to protective immunity is rapidly expanding and HIQA has advised the continued review of the data before future policy changes.



HIQA advised no change to the 6 months presumptive immunity post-infection.



Limit the spread

We updated our international review of public health measures and strategies to limit the spread of COVID-19.

We noted a reduction in the 14-day incidence rate of new cases in 11 of the studied jurisdictions, including in Ireland, which had led to a move to ease COVID-19 restrictions in most of these countries.

However, incidence remains high in a number of countries...

including in Austria, Belgium, France, Germany and Sweden, where some restrictions have been extended, either nationally or regionally, since the last review in March.

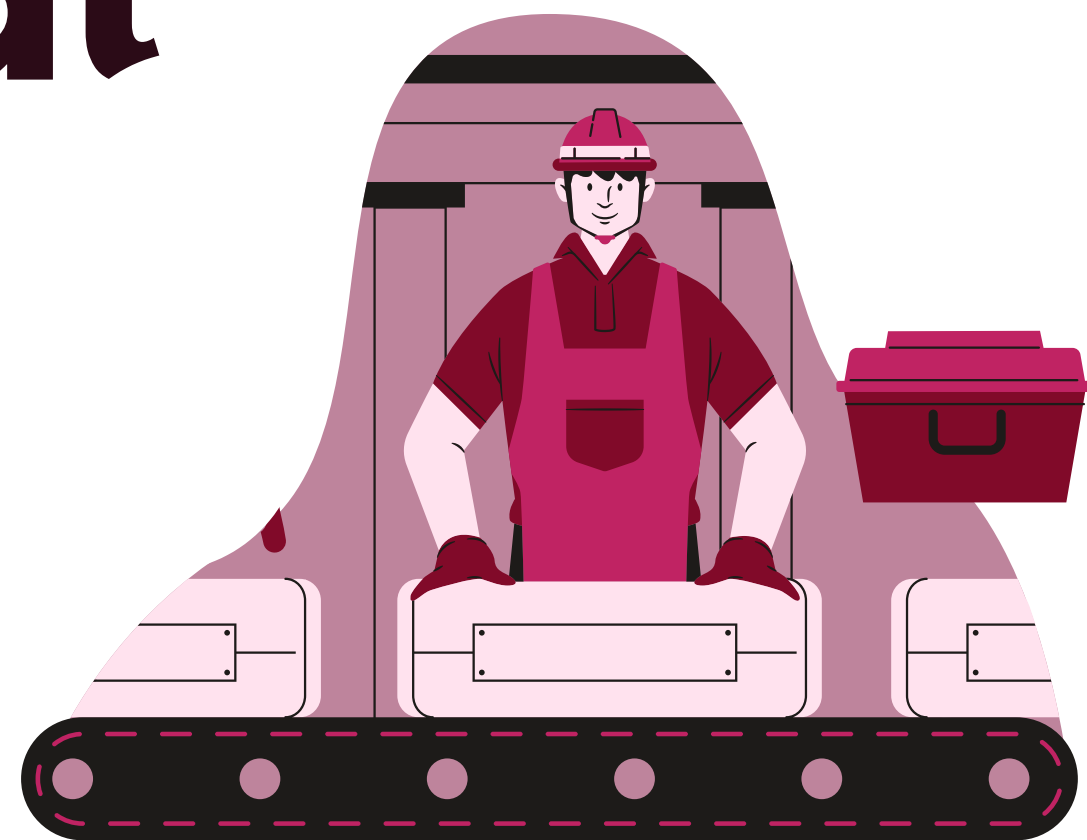


As of 16 April, only Ireland, Spain and the UK had fully reopened face-to-face teaching for all primary and secondary school students.





RADTs for meat processing plant workers

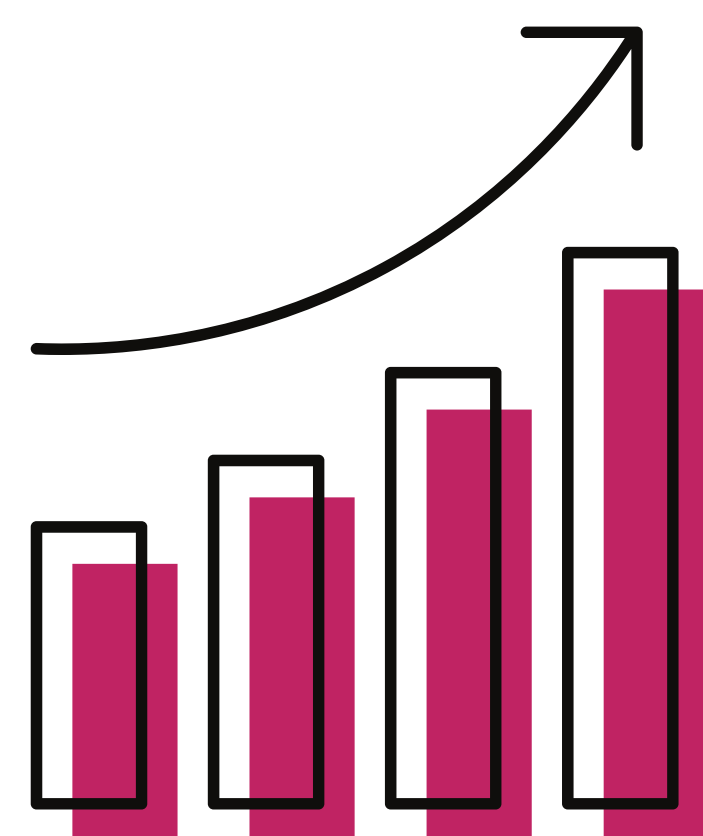


We reviewed the potential impact of different serial testing scenarios using Rapid Antigen Detection Tests (RADTs) to detect SARS-CoV-2 in meat processing plant workers

We found that the preferred testing strategy used RADT-based serial testing once weekly with positive antigen tests confirmed by RT-PCR. This scenario increased the detection of cases, reduced the number of days of infectious individuals being in a plant and reduced the overall cost relative to the current practice of monthly RT-PCR testing. Twice weekly RADT-based serial testing could also be considered.

We modelled nine different serial testing scenarios...

using RADTs in meat processing plants in Ireland, including the current monthly RT-PCR model and not testing at all.



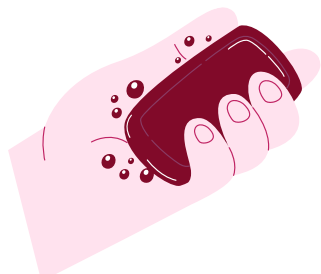
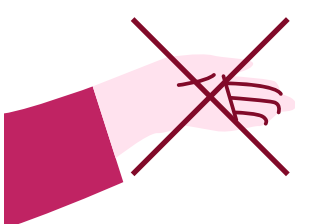


PROTECTIVE MEASURES FOR VULNERABLE GROUPS

We updated our review of public health guidance on COVID-19 issued to protect vulnerable groups who may be at risk of severe illness twice in April.

Our review summarises the variety of protective measures being taken to protect vulnerable groups who are at high risk of severe illness from COVID-19 across 14 countries.

Advice for vulnerable groups typically includes stay at home, practice hand hygiene, physical distancing and avoid contact with others.



Our latest report included a change of high risk grouping definitions from Switzerland. It also included updated advice for those in high risk groups from Denmark, CDC, Northern Ireland, Scotland and England.

We have updated this report



times



Guidance for residential care facilities

We updated our rapid review of guidance for residential care facilities in the context of COVID-19 once in April.

Our latest report included a summary of infection prevention and control guidance for vaccinated residents in residential care settings in a number of countries.

Residential care facilities (RCFs) in Ireland and across the world have been affected by outbreaks of COVID-19. Our rapid review summarises the guidance issued by national and international agencies to protect residents and staff of RCFs in the context of COVID-19.





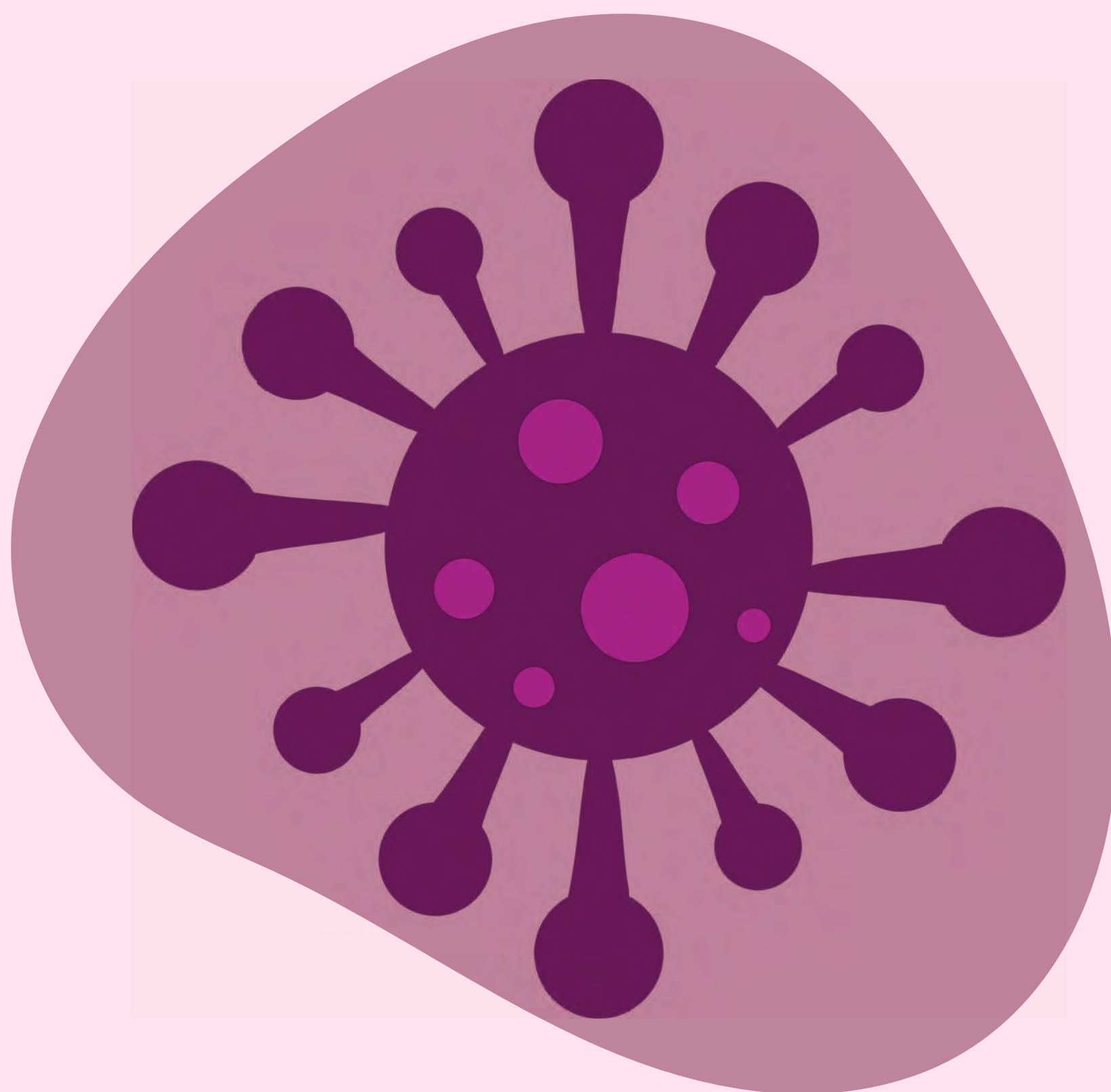
Minimum age for mask wearing

Updated since March 2021

We advised NPHET that no change was necessary to the current minimum age of mask wearing in schools, as the measures being used in schools so far have successfully mitigated the spread of SARS-CoV-2.

However, as there is growing uncertainty regarding the impact of the increased transmissibility of the B.1.1.7 variant, we will continue to update and review this advice as new evidence becomes available.







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