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5th February 2021

Deputy Alan Kelly
Dáil Éireann,
Kildare Street,
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Re: PQ 4286/21 To ask the Minister for Health the number of cases of healthcare acquired Covid-19 reported to the Health Protection Surveillance Centre in 2020; the breakdown of those cases into nursing homes and hospitals; the number of deaths among those cases; and if he will make a statement on the matter.

Dear Deputy Kelly

I refer to the above Parliamentary Question which has been referred by the Minister for Health to the Health Service Executive for direct response.

Reporting on the number of cases of Hospital-Acquired COVID-19 by hospital group per week for 2020 was 967*, please note that reporting commenced the week ending 21/06/2020 for 2020.

*As data is collected on a weekly basis data for 2020 ends January 3rd 2021 and data for 2021 commenced January 4th 2021

Hospital level data requests for hospital acquired COVID-19 should be referred to the Hospital Groups for consideration. Data on mortality in hospital acquired COVID-19 cases is not collected nationally.

In general, it is not possible to be certain regarding where and when a person acquired infection with COVID-19. For the purpose of this surveillance activity the HSE uses a standard definition of hospital acquired COVID-19 that takes account of the ECDC case definition. This definition excludes most cases of community acquired COVID-19 and includes most cases relating to inpatients with hospital acquired COVID-19. There is extensive testing of people on admission to hospital and while in hospital to help find people with infection as quickly as possible so that measures can be taken to reduce the risk of spread of infection to others.

ECDC Definition

<u>Source of infection: healthcare (nosocomial) vs community transmission</u>

The source of a COVID-19 case can be community-associated (CA-COVID-19) or healthcare-associated (HA-COVID-19), based on the number of days until the onset of symptoms, or positive laboratory test, whichever is first, after admission to a healthcare facility (on day 1). Healthcare facilities include hospitals and long-term care facilities. This is informed by current knowledge regarding the distribution of incubation periods (Lauer SA et al. *Ann Intern Med*.

2020;172:577-582. doi:10.7326/M20-0504). If required, a case-by-case evaluation of the source should take into account COVID-19 prevalence in the institution/ward, contact with known cases in the community or the healthcare facility, and any other data that plausibly indicate the source of the infection. The case source definitions are as follows:

Community-associated COVID-19 (CA-COVID-19):

• Symptoms present on admission or with onset on day 1 or 2 after admission

• Symptom onset on days 3-7 and a strong suspicion of community transmission.

Indeterminate association (IA-COVID-19):

• Symptom onset on day 3-7 after admission, with insufficient information on the source of infection to assign to another category.

Probable healthcare-associated COVID-19 (HA-COVID-19):

• Symptoms onset on day 8-14 after admission

• Symptom onset on day 3-7 and a strong suspicion of healthcare transmission.

Definite HA-COVID-19:

• Symptom onset on day >14 after admission

Cases with symptom onset within 14 days of discharge from a healthcare facility (e.g. re-admission) may be considered as community-associated, probable or definite HA-COVID-19, or to have an indeterminate association. The designation of such cases should be made after a case-by-case evaluation.

The primary rationale for collating this data is to monitor, identify and respond to the problem, it is not an epidemiological or surveillance tool.

Additional Data:

21 June to 27 December 967 cases

27 December to 17 January 846 cases

Cumulative total 1,813

Please see below the latest available data:

Week	Total Cases	Hospital Acquired Cases
Week 52 (2020)	15,761	182
Week 1 (2021)	25,191	404
Week 2 (2021)	45,726	442

It is important to note that when community transmission rates are at the level they are, it is inevitable and unavoidable that there will be outbreaks in hospitals.

The surveillance system does not collect information on the patient outcomes. There are two reasons for this:

- First the information is reported weekly to ensure that the HSE has a very timely view of the situation and the outcome for most patients is therefore not known at the time the data is collected.
- Second, the determination of the cause of death of any individual person is complex. While COVID-19 is clearly the principal cause of death for some people, in other people who were already very seriously ill the contribution of the COVID-19 infection to their death can be difficult to determine.

Advice on Acute Hospital Infection Prevention and Control Precautions for Possible or Confirmed COVID-19 in a Pandemic Setting is available on the HPSC website.

This response from HPSC describes data on confirmed COVID-19 cases associated with nursing homes (staff or residents) notified between 2nd March and 31st December 2020. The hospital aspect of this query is being addressed by the HSE team responsible for surveillance of hospital-acquired infections. Data were extracted from Health Protection Surveillance Centre's (HPSC) Computerised Infectious Disease Reporting System (CIDR) on January 28st 2021 at 10:03 am. CIDR is a dynamic system and case details may be updated at any time. Therefore, the data described here may differ from previously reported data and data reported for the same time period in the future.

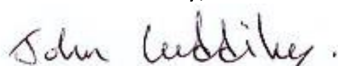
There have been 7,962 cases and 1,023 deaths reported in nursing home residents or staff that were linked to nursing home outbreaks where the source of transmission was not specified as community acquired. In addition, there have been 214 cases and seven deaths in nursing home residents or staff that were not linked to outbreaks but reported to be healthcare acquired. Table 1 provides a breakdown of confirmed cases of COVID-19 and deaths in residents and staff of nursing homes.

Table 1. Number of confirmed cases of COVID-19 and deaths in confirmed cases of COVID-19 in nursing home residents and staff

	Number of confirmed cases of COVID-19			Number of deaths in confirmed cases of COVID-19		
Description	Nursing home resident	Nursing home staff	Total cases	Nursing home resident	Nursing home staff	Total deaths
Linked to a nursing home outbreak	4632	0	7962	1022	1	1023
Not linked to an outbreak, transmission reported as healthcare acquired	31	183	214	7	0	7
Total	**4663**	**183**	**8176**	**1029**	**1**	**1030**

If you require any further information or clarification please do contact us.

Yours sincerely,



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