



Report prepared by the HSE's National Clinical Director, Health Protection

Chief Clinical Officer FINAL Report 21st May 2020

#### Introduction:

- 1. Under infectious diseases legislation, all notifiable diseases (including COVID19) are notified by medical practitioners and laboratories to Public Health Departments/Medical Officer of Health. COVID19 is now under legislation a notifiable disease.
- 2. To support this notification requirement, laboratories who undertake testing for notifiable diseases and have access to the Computerised Infectious Disease Reporting<sup>1</sup> [CIDR] system have the facility to upload named positive cases of COVID19 to the CIDR system. These can also be notified separately by email, phone or by post into Public Health Departments by clinicians or laboratories.
- 3. The CIDR System is the source for nationally reported case numbers for COVID 19.

#### **Purpose of this Review**

- 4. On the 13<sup>th</sup> May 2020, cases of COVID 19 amongst staff were uploaded by the laboratory at the *Mater Misericordiae University Hospital* [MMUH] Dublin to the national CIDR surveillance system on instruction from the Public Health Department [PHD] East. Following the uploading and validation of these cases by the Health Protection Surveillance Centre [HPSC] **244** cases were identified as needing to be included in the national daily report of new cases of COVID 19. These cases uploaded were all cases in healthcare workers in the MMUH which had occurred since the 13<sup>th</sup> March 2020.
- 5. A report setting out the facts in relation to the delays in uploading these 244 cases onto the CIDR system was commissioned by the HSE's Chief Clinical Officer.

#### **General matters**

- 6. This report acknowledges that the circumstances under discussion occurred during a period in which the demands on the health service including hospitals and public health departments were at an unprecedented level due to scale and nature of the COVID 19 response.
- 7. This report also notes that the delays in uploading information to CIDR did not delay any critical public health actions such as contact tracing.
- 8. As of the 18<sup>th</sup> May 2020 the MMUH have resolved the specific issue of uploading information to the CIDR system for staff who test positive for COVID 19.
- 9. I would like to note that both the PHD East and the MMUH have fully cooperated with and contributed to establishing the facts contained in this report.

## **Review Methodology**

- 10. The National Clinical Director, Health Protection has reviewed reports from the Public Health Department [PHD] East and from the CEO of the MMUH relating to this incident.
- 11. In concluding this report, a factual accuracy checking process was undertaken with the PHD East and with the MMUH

<sup>&</sup>lt;sup>1</sup> CIDR is an information system developed to manage the surveillance and control of infectious diseases in Ireland.

12. The Chief Clinical Officer sought and received formal assurance from the HSE's National Director Acute Operations that full COVID 19 information including for staff tested, is being uploaded onto the CIDR system by all hospitals.

## Approach to notifications by the Mater Misericordiae University Hospital

- 13. In preparing this report, the MMUH provided information in relation to the hospital's policy on the notification of infectious diseases. Historically it has anonymised staff data relating to notifiable infectious diseases diagnosis when uploading this information to the CIDR system. This policy has been in place for 25 years and is intended to protect confidentiality and respect the dignity of the staff being tested. The hospital states that this approach was introduced to encourage staff to seek a laboratory test when concerns of an infection presented.
- 14. In practice this means that the data on their laboratory results are anonymised at laboratory level, with only the hospital's Occupational Health Department having access to named healthcare worker data. In the case of staff being tested for COVID 19, this meant that the Occupational Health Department removed names from the staff samples going to the hospital laboratory and gave them codes.
- 15. The PHD East were previously advised that positive COVID 19 results for staff members of the MMUH went back to the hospital's Occupational Health Department who then identified, managed and initiated contact tracing for these staff members.

## **Summary chronology of events**

- 16. A full chronology of events is set out in Appendix 1. A summary of the chronology is provided below.
- 17. On an on-going basis the MMUH Occupational Health Department provides the PHD East with a line listing of all COVID 19 positive cases amongst staff which includes their name and date of birth. This line listing of new cases is sent to a designated email in the PHD East. All these cases are then uploaded by PHD East to the HSE's contact management and tracing IT system when contact tracing has been undertaken by MMUH.
- 18. The MMUH therefore had notified the PHD East of all COVID positive cases amongst staff, including the 244 cases which are the subject of this report.
- 19. On the 20<sup>th</sup> April 2020 because of the issue relating to uploading anonymised staff COVID 19 cases onto CIDR, discussions took place between the PHD East and the MMUH in an effort to resolve the CIDR uploading issue.
- 20. On the 21st April 2020 the MMUH laboratory uploaded 60 samples with positive results from anonymised Occupational Health data, including retrospective data, onto the CIDR system. This data would have then formed part of the national daily report on new cases of COVID 19.
- 21. Following this upload, the PHD East requested MMUH to pause uploading further cases onto CIDR until the issue of reporting with full data was resolved.
- 22. On the 11<sup>th</sup> May 2020 the PHD East reverted to MMUH and requested them to recommence uploading their remaining staff cases onto the CIDR system.

23. On the 13<sup>th</sup> May 2020, these 244 cases were uploaded by the MMUH onto the CIDR system and they were included in the national figures for COVID 19 on the 14<sup>th</sup> May 2020.

## Findings and conclusions

- 24. The reason this report was commissioned was to establish the facts relating to the delay in these 244 cases being uploaded to the CIDR system which led to a delay in them being reported as part of the daily national COVID 19 numbers report.
- 25. The original issue arose due to the historic practice of the MMUH to anonymise healthcare worker details at the time of their laboratory test results. As these personal details were held by the hospital's Occupational Health Department, the laboratory staff at MMUH were unable to upload the results to the CIDR surveillance system with their accompanying names and dates of birth.
- 26. The approach taken by the MMUH is intended to protect confidentiality and respect the dignity of the staff being tested. This approach was introduced to encourage staff to seek a laboratory test when concerns of an infection presented.
- 27. The PHD East sought the non-anonymised information to assist with the reconciliation of laboratory reported data and data from other sources including the contact tracing system.
- 28. In the period from the 14<sup>th</sup> March 2020 when the MMUH commenced in house testing for COVID 19, to the 13<sup>th</sup> May 2020, all staff members who tested positive for COVID 19 in MMUH were known to the MMUH Occupational Health Department and to the HSE.
- 29. On the 21<sup>st</sup> April 2020 further uploads were subsequently paused on the instruction of PHD East to allow for the issue of anonymisation to be resolved between PHD East and MMUH.
- 30. There was a senior personnel absence in the period after the 21<sup>st</sup> April 2020.
- 31. The issue of uploading the remaining MMUH staff cases to CIDR was not concluded until the 11<sup>th</sup> May 2020.
- 32. Uploading to CIDR restarted on the 12th of May 2020. This highlighted the delayed national reporting which gave rise to this report.
- 33. The MMUH have confirmed that they completed contact tracing for all COVID positive staff members within 24 hours of a positive test result. The delays in uploading information to CIDR did not delay any critical public health actions.
- 34. Following validation by the HPSC, it can be confirmed that none of these cases are duplicates of other cases entered on CIDR.

#### Recommendations

I. The HSE's National Director Acute Operations should write to all hospital groups with a requirement that they have a process in place to ensure that if there are any future impediments to the uploading of COVID 19 test results for healthcare workers onto the CIDR surveillance system, that these would be identified and immediately resolved.

II. The National Clinical Director, Health Protection should request all Public Health Departments to check that data on COVID 19 cases in healthcare workers which is being entered onto the HSE's contact tracing and management system has also been uploaded onto CIDR. If a problem is identified, the public health department must immediately contact the relevant hospital laboratory to resolve the reporting issue. If it is not possible to resolve reporting difficulties this way, the issue should be rapidly escalated to the National Clinical Director, Health Protection by telephone and email.

# **Appendix 1: Chronology of events**

Date	Event
14 <sup>th</sup> March	From the 14th March 2020 the MMUH laboratory undertook in house COVID 19 testing for staff and commenced electronic reporting of results to the HPSC CIDR system [without including staff names].
22 <sup>nd</sup> March	Up to the 22 <sup>nd</sup> of March 2020, the HSE's Public Health Department [PHD] East were notified by MMUH of cases by phone. In total up to this date the hospital identified 23 positive staff cases, and contact tracing was undertaken within MMUH by the hospital's occupational health department.
	The PHD East notified the MMUH by email of a change in process whereby the hospital was now required to notify the PHD East via a specific email address provided to the MMUH by the PHD East.
26 <sup>th</sup> March to date	MMUH from this date provided all future COVID positive notifications to the PHD East using this email address. These communications notified the PHD East of all staff confirmed positive cases. Confirmation of receipt received from PHD East.
	Information on COVID positive staff was provided daily via email [and on 2 dates two emails were sent] which included Name, Date of Birth, Contact Details, Address
20th April	PHD East contacted the laboratory in MMUH as they had noticed that the data in CIDR was not accurate in relation to (enhanced) information DPH East was receiving through contact tracing.
	MMUH laboratory informed PHD East that positive results for COVID 19 for staff were being uploaded on to CIDR without names but using codes and discussed how this was creating problems in relation to data quality including duplication, etc.
	PHD East were informed by the MMUH Laboratory that the use of codes was a policy decision of the MMUH and PHD East were advised to discuss with Occupational Health Department in the MMUH.
	MMUH were contacted by PHD East. PHD East were informed by MMUH that they were notifying all staff positive cases to PHD East and that the anonymising of data was a policy decision of the hospital. When PHD East asked if PHD could have the key for the codes they were informed that this was not possible.
	Senior personnel within PHD East went on unexpected sick leave and alternative cover arrangements were in place.
21st April	The HPSC requested MMUH to upload anonymised staff data on CIDR. A batch of 60 staff positive cases was uploaded at that time.
	MMUH laboratory informed PHD East that 60 notifications with codes had gone onto CIDR and that more were pending.
	PHD East advised the MMUH to hold off on uploading further positive results to CIDR until PHD East had resolved the anonymisation issue with MMUH.
	PHD East sent email to HPSC asking for advice and direction in relation to this situation.

11th May	The same issues regarding COVID19 results for healthcare workers in the MMUH were raised again within PHD East and PHD East subsequently advised the MMUH Laboratory to upload the outstanding results onto CIDR using anonymised data.
	PHD East contacted Director of HPSC to inform them of this decision and that there may as a result be an increase in notifications.
13 <sup>th</sup> May	MMUH laboratory sought confirmation from PHD East that this was their advice to upload the outstanding results onto CIDR using Codes.
	MMUH manually validated all staff positive records from the Occupational Health Department and the Covid Virtual Clinic records with the Laboratory CIDR data-set (total no=256).
14th May	On May 14 <sup>th</sup> these results appeared in the overall number of daily new cases of COVID19.
15th May	An internal report was prepared by MMUH
	An HSE Report was commissioned by the HSE's Chief Clinical Officer.