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  2. Coronavirus (COVID-19) (<https://www.gov.uk/coronavirus-taxon>)
  3. Healthcare workers, carers and care settings during coronavirus (<https://www.gov.uk/coronavirus-taxon/healthcare-workers-carers-and-care-settings>)
  4. SARS-CoV-2 VOC: investigating and managing individuals with a possible or confirmed case (<https://www.gov.uk/government/publications/sars-cov-2-voc-investigating-and-managing-individuals-with-a-possible-or-confirmed-case>)
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England (<https://www.gov.uk/government/organisations/public-health-england>)

Guidance

# Guidance for investigating and managing individuals with a possible or confirmed SARS-CoV-2 Variant of Concern

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## Introduction

In response to the emergence and spread of new SARS-CoV-2 variants of concern (VOC) in different countries and regions, specific precautions and actions are required in relation to the management of patients who have recently returned from areas where these VOC are known or are believed to be circulating, as well as their contacts.

This guidance is for healthcare staff in primary and secondary care and provides advice on the investigation and management of patients who may be infected with a new SARS-CoV-2 VOC.

## Identifying those requiring specific measures to manage SARS-CoV-2 variant risk

This guidance applies to 'persons at risk' of infection from SARS-CoV-2 VOC.

Persons at risk include:

- those who have been in or transited through any of the countries listed within the travel ban to the UK (<https://www.gov.uk/guidance/transport-measures-to-protect-the-uk-from-variant-strains-of-covid-19>) and who develop symptoms of COVID-19 within 10 days of departure or transit (or date of sampling for a positive SARS-CoV-2 test if asymptomatic)
- those known to be infected with a VOC listed below, based on sequencing results and regardless of travel history
- contacts of individuals described above

Travel-associated risk alone is sufficient to take action; actions should not be delayed pending sequencing results.

## Specific VOCs identified by sequencing

This list will be updated when necessary:

- VOC202012/02, first identified in South Africa and also known as 20C/501Y.V2, B.1.351
- VOC202101/02, first identified in Japan, ex Brazil (GISAID ID: EPI\_ISL\_792680 to 792683)

## Entry and isolation guidance

Travel measures to protect the UK against new international variants may change over time. The latest information of travel measures is available from the Department for Transport (<https://www.gov.uk/government/organisations/department-for-transport>).

Travellers who are permitted to enter the UK from countries listed within the travel ban (<https://www.gov.uk/guidance/transport-measures-to-protect-the-uk-from-variant-strains-of-covid-19>) to the UK are currently required to self-isolate for 10 days on arrival along with their household. Any contacts identified in the UK should also self-isolate for 10 days from the last date of contact after the traveller returns to the UK.

## General principles relevant to the management of COVID-19 in the context of risk from new VOC

Current evidence is that the mechanism of transmission of novel variants is no different to those for SARS-CoV-2 generally. The following principles apply:

- anyone seeking routine or emergency care (whether or not they present with COVID-19 symptoms (<https://www.gov.uk/government/publications/wuhan-novel-coronavirus-initial-investigation-of-possible-cases>)) should be asked about recent travel to the countries listed in the travel ban and whether they are a contact of a returning traveller from these countries
- all persons at risk in the community should be advised to follow the stay at home guidance (<https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection>) if they develop COVID-19 symptoms
- healthcare workers should continue to follow current COVID-19 infection prevention and control (IPC) (<https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control>) advice and use the recommended personal protective protection (PPE) for individuals on the high risk pathway
- commonly used PCR assays are expected to be able to detect VOC and should continue to be used for testing patients with possible COVID-19

### Persons at risk seeking routine or elective care

Any person at risk seeking access to non-urgent outpatient, ambulatory or primary care, or elective treatment, should defer their appointment until their 10-day isolation period has ended unless their need is considered urgent (see below).

### Persons at risk seeking emergency care

Any person at risk who requires urgent care should continue to access emergency NHS services whether for COVID-19 symptoms or for other, non-COVID reasons.

Regardless of the reason for their presentation, any person at risk requiring emergency admission or care should immediately be isolated in a single room with en-suite bathroom facilities and tested for COVID-19 using a standard PCR test. They should remain in a single room under strict isolation for the duration of their stay. If these facilities are not available, they should seek IPC advice.

Information on dates and places of travel, and any contact with possible or confirmed cases of COVID-19 should be recorded. Healthcare staff should ensure systems are in place that enable these cases to be easily flagged and identified.

### Persons at risk admitted to hospital with a negative test on admission

Persons at risk should be managed in isolation in a single room with en-suite bathroom facilities, and with appropriate infection control procedures, for the duration of their isolation period.

These patients should have a SARS-CoV-2 **PCR** test on admission. If negative, subsequent testing should be according to NHS testing regimes while in hospital. If the patient develops new symptoms compatible with COVID-19, they should be tested again immediately.

## **Management of persons at risk admitted to hospital with a positive SARS-CoV-2 test on admission or who subsequently test positive**

If a person at risk has a positive test for SARS-CoV-2, discuss further risk assessment and appropriate case-management with the local/regional specialist infectious diseases centre.

Hospitals must also contact their local health protection team (<https://www.gov.uk/health-protection-team>) with the details of these individuals.

## **Guidance on sample handling for laboratory staff**

Samples from persons at risk, and where the SARS-CoV-2 infection status is unknown, should be handled at containment level 2 plus<sup>[footnote 1]</sup> (or higher) but with no attempt at virus culture.

All samples positive for SARS-CoV-2 **RNA** from persons at risk should be sent to the Respiratory Virus Unit, PHE Colindale for whole genome sequencing.

For positive samples, further laboratory handling of any untreated sample should be at containment level 3, again with no attempt at virus culture. Samples that have undergone a validated inactivation process may be handled at containment level 2 (or above). Viral culture should be performed in the Colindale Reference laboratories along with fast tracking of samples for further analysis.

## **List of Specialist Infectious Diseases Centres and Contact Details**

### **East of England**

Cambridge University Hospitals NHS Foundation Trust (Adults) 01223 245151: ID consultant on call

### **London**

Barts Health NHS Trust (Adults) 0207 3777 000: ID consultant on call

Guy's & St Thomas' NHS Foundation Trust (Adults & paediatrics) 0207 188 7188: ID consultant on call

Imperial College Healthcare NHS Trust (St Mary's) (Paediatrics) 0203 312 6666: Paediatric ID consultant on call

London North West University Healthcare NHS Trust (Northwick Park and Ealing) (Adults) 0208 864 3232: ID consultant on call

Royal Free London NHS Foundation Trust (Adults) 0207 794 0500: ID consultant on call

St George's University Hospitals NHS Foundation Trust (Adults & paediatrics) 0208 672 1255: Clinical infection consultant on call

University College London Hospitals NHS Foundation Trust (Adults) 07908 250924: ID SpR on call

## Midlands

University Hospitals Birmingham NHS Foundation Trust (Adults & paediatrics) 0121 424 2000: ID consultant on call

University Hospitals of Leicester NHS Trust (Adults) 0300 303 1573: ID consultant on call

University Hospitals of North Midlands NHS Trust (Adults) 01782 672904

## North East & Yorkshire

Hull & East Yorkshire Hospitals NHS Trust (Adults) 01482 875875: ID consultant on call

Sheffield Teaching Hospitals NHS Foundation Trust (Adults) 0114 271 1900: ID consultant on call

The Newcastle upon Tyne Hospitals NHS Foundation Trust (Adults & paediatrics) 0191 233 6161: ID consultant on call (adult or paediatrics)

## North West

Alder Hey Children's Hospitals NHS Foundation Trust (Paediatrics (with Liverpool)) 0151 228 4811: ID consultant on call

Liverpool University Hospitals NHS Foundation Trust (Adults & paediatrics (with Alder Hey)) 0151 709 0141: ID consultant on call

Pennine Acute Hospitals NHS Trust (Adults) 07966 621211: ID SpR on call

## South East

Brighton and Sussex University Hospitals NHS Trust (Adults) 01273 696955: ID consultant on call

Oxford University Hospitals NHS Foundation Trust (Adults & paediatrics) 0300 304 7777: ID consultant on call

## South West

Royal Devon and Exeter NHS Foundation Trust (Adults) 01392 411611: Microbiologist on call

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1. Conducted in a biosafety level-2 laboratory with biosafety practices and procedures that are typically found at biosafety level-3

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