| *** | | Doc. Number PSR-007 |
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DOCUMENT VERIFICATION

Prior to using this document, the user is responsible for verifying that the revision and effective date are current.

REVISION HISTORY

| Rev. | Effective Date | Changes Made to Document |
|------|----------------|--------------------------|
| 1 | 09-Sep-2021 | First issue |
| | | |
| | | |

1. Content

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2. Introduction

The purpose of this document is to summarise the post-market surveillance report for Innova LFD kits where DHSC is distributor or manufacturer. This report covers the period 7th - 27th August 2021.

This report includes inputs from Intertek Inbound Testing, Product Complaints, Qualtrics survey, Real World Performance Monitoring, CAPAs, SCARs and Variants of Concern.

3. Methodology

The methodology for data collection was established in the PMS plan PMS-0001 Revision 2, dated 29-July-2021.

(Refer to Attachment 01)

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4. Findings /Results

4.1 Intertek Testing

49 Inspection reports received between the reporting window of 7th - 27th August 2021. 4,109 samples were analysed for lateral flow performance, all of which passed. The SKU codes aligned to these samples were TK2193.

A total of 81 inspections were carried out between 7th - 27th August 2021. These 81 inspections were reflective of 59,000,000 units of TK2193 produced. Each lot contained a total of 1,000,000 units. There was a requirement for 21 lots to be re-inspected for an amber flag raised for concerns regarding the integrity of the extraction tubes. Re-inspection of the affected lot numbers found no issues with product beyond acceptable quality limit (AQL) standards.

(Refer to Attachment 02 for input report)

4.2 In-House manufacturing inspection

There were no inspection reports received by DHSC for Innova product in the specified reporting window. (Refer to Attachment 02 for input report)

4.3 Product complaints

- DHSC has received a total of 19 complaints between 7th 27th August 2021. 3 complaints came through Innova
 and 16 from MHRA (yellow card). The number of kits distributed (3s, 7s and 25s) during this period was 40.3
 million.
- No lot trend was identified within this period.
- Trending category shows 7 complaints for "Faulty test results" however investigations are still going on to determine if the fault is with the kit or IT error on the website
- 10 out of 19 Complaints have had the investigation completed and are due for final review before the complaints can be closed.
- There were no new hazards identified for this reporting period.

A summary of the received complaints is below

| No | Complaint category | Reportability | Investigation | Investigation results |
|----|----------------------------------|---------------|---|-----------------------|
| 1 | 1 Damaged Item | No | No trend | No further actions |
| 2 | 1 Packaging error | No | No trend | No further action |
| 3 | 1 empty extraction buffer sachet | No | No trend | No further action |
| 4 | 1 faulty item | No | Not enough information/no trend | No further actions |
| 5 | 7 Faulty test results | No | No trend/Investigations on going for 25Ts | No further action |
| 6 | 1 Leakage | No | No trend | No further actions |
| 7 | 3 Missing item | No | Not enough information | No further action |
| 8 | 3 Not a product complaint | N/A | N/A | N/A |
| 9 | 1 Unknown description | N/A | N/A | N/A |

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4.4 Qualtrics survey

- A total of 292 reports were recorded through the Qualtrics Survey for period 7th 27th August 2021. The number
 of kits distributed (3s, 7s and 25s) during this period was 40.3 million.
- No Injuries were reported.
- 67.5 % of the end user completing Qualtrics survey answered 100% of the survey questions during 7th 27th August 2021.

| Complaint category | Reportability | Investigation | Investigation results | |
|--------------------|---------------|---------------|-----------------------|--|
| 5 Damaged items | No | No trend | No further actions | |
| 28 Missing items | No | No tend | No further actions | |

• Qualtrics summary - User Experience

| Question | Yes | No |
|----------------------------|-----|----|
| Swab easy to use? | 299 | 16 |
| Test Strip easy to use? | 295 | 20 |
| Easy to get sample? | 287 | 28 |
| Test worked as instructed? | 275 | 40 |
| Manual easy and clear? | 304 | 11 |

(Refer to Attachment 03, for data)

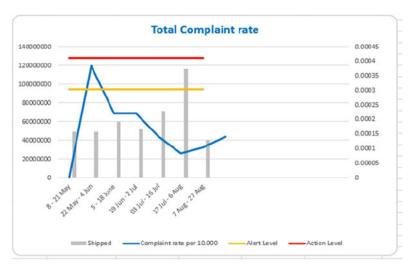
4.5 Combined Complaints Data (Yellow Card, Control Tower and Qualtrics Complaints) – Trending

This table shows the trending data for the combined LFD complaints (Yellow Card, Control Tower and Qualtrics Complaints) vs distributed LFD test kits for the last reporting periods.

Alert and Action thresholds have been established using an average derived from the last reporting periods. These thresholds will remain consistent. And will provide an ongoing benchmark for identifying trends through continual monitoring.

The data this 7th - 27th August 2021 shows an increase on the number of total/Combined complaints rates due to the reduction of distributed volume. The Percentage went above the Alert level. Complaints were monitored for this period, and there were not specific concerns.

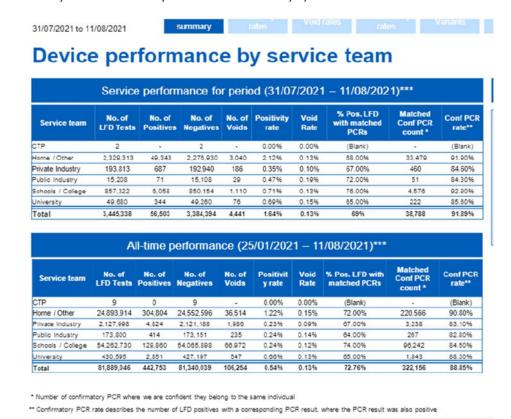
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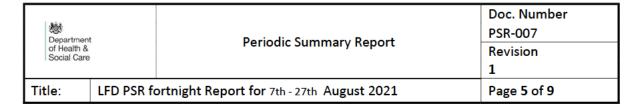
(Refer to Attachment 03, for data)

4.6 Real World Performance Monitoring

This is the summary slide from the data provided in attachments 4, 5, and 6.



For this reporting period that is 2 days shorter than usual***, the average void rate of 0.13% performs according to expectations. At service team level, there was no significant variance from that. Overall positivity for DHSC 3/7 self-testing was 1.64%. Positivity in Home/Other has been highest (2.12%), in line with prevalence. The confirmatory PCR rate across all services has been above expectations with an average of 91.89%.



Actions:1 site was escalated to the Integrator team due to the confirmatory PCR rate being below the 70% threshold.

The average void rate of 0.12% performs according to expectations. The overall positive rate for the DHSC 3/7 self-test across all service teams was 1.71%. Positivity in Home/Other has been highest (2.10%), thus measuring the number of positive LFDs detected in line with prevalence. The confirmatory PCR rate across all services has been above expectations in all service teams, with an average of 93,27%.

Actions:1 site was escalated to the Integrator team due to the void rate being above the 1.2% threshold and above the lower CI of 1.2% for void rates

14/08/2021 to 27/08/2021 summary rates Volto rates variants

Device performance by service team

| Service performance for period (14/08/2021 – 27/08/2021) | | | | | | | | | |
|--|---------------------|---------------------|---------------------|-----------------|-----------------|--------------|------------------------------------|--------------------------------|-----------------|
| Service team | No. of LFD Tests | No. of Positives | No. of Negatives | No. of Voids | Positivity rate | Void Rate | % Pos. LFD with matched PCRs | Matched Conf PCR count * | Conf PCR rate** |
| стр | 3 | | 3 | | 0.00% | 0.00% | (Blank) | | (Blank) |
| Home / Other | 2,323,215 | 48,692 | 2,271,864 | 2,659 | 2.10% | 0.11% | 74.00% | 38,185 | 93.30% |
| Private Industry | 181,923 | 689 | 181,052 | 182 | 0.38% | 0.10% | 76.00% | 524 | 89.30% |
| Public Industry | 13,939 | 83 | 13,838 | 18 | 0.80% | 0.13% | 78.00% | 65 | 89.20% |
| Schools / College | 800,528 | 7,766 | 791,766 | 998 | 0.97% | 0.12% | 81.00% | 6,261 | 93.90% |
| University | 41,231 | 263 | 40,898 | 70 | 0.84% | 0.17% | 68.00% | 179 | 87.70% |
| Total | 3,360,839 | 57,493 | 3,299,421 | 3,925 | 1.71% | 0.12% | 75% | 43,214 | 93.27% |

| All-time performance (25/01/2021 – 27/08/2021) | | | | | | | | | |
|--|---------------------|---------------------|---------------------|-----------------|---------------------|--------------|------------------------------|--------------------------------|-----------------|
| Service team | No. of LFD Tests | No. of Positives | No. of Negatives | No. of Voids | Positivit y rate | Void Rate | % Pos. LFD with matched PCRs | Matched Conf PCR count * | Conf PCR rate** |
| CTP | 12 | 0 | 12 | - | 0.00% | 0.00% | (Blank) | | (Blank) |
| Home / Other | 27,585,259 | 380,890 | 27,184,790 | 39,579 | 1.31% | 0.14% | 74.00% | 266,070 | 91.20% |
| Private Industry | 2,336,666 | 5,602 | 2,328,872 | 2,192 | 0.24% | 0.09% | 89.00% | 3,876 | 83.90% |
| Public Industry | 189,890 | 506 | 189,127 | 257 | 0.27% | 0.1496 | 67.00% | 339 | 84.10% |
| Schools / College | 55,174,055 | 138,539 | 54,987,420 | 68,096 | 0.25% | 0.1296 | 75.00% | 103,655 | 85.20% |
| University | 455,569 | 2,898 | 452,076 | 595 | 0.84% | 0.1396 | 88.00% | 1,901 | 87.70% |
| Total | 85,741,451 | 508,435 | 85,122,297 | 110,719 | 0.59% | 0.13% | 73.92% | 375,841 | 89.46% |

^{*} Number of confirmatory PCR where we are confident they belong to the same individual

The average void rate of 0.12% performs according to expectations. The overall positive rate for the DHSC 3/7 self-test across all service teams was 1.71%. Positivity in Home/Other has been highest (2.10%), thus measuring the number of positive LFDs detected in line with prevalence. The confirmatory PCR rate across all services has been above expectations in all service teams, with an average of 93,27%.

Actions:1 site was escalated to the Integrator team due to the void rate being above the 1.2% threshold and above the lower CI of 1.2% for void rates

(Refer to Attachment 04, 05, 06 for data)

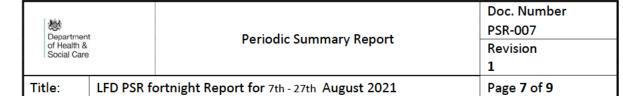
4.7 CAPA

- The below CAPAs were opened to address:
 - o MHRA Audit on the 25-26 May
 - o RWPM Real World Performing Monitoring findings
 - o Innova Medical Group Recall in the USA

^{**} Confirmatory PCR rate describes the number of LFD positives with a corresponding PCR result, where the PCR result was also positive



| No | CAPA | Start | Problem statement | Status/ progress | Due |
|----|-------------------------|---------------------|--|---|--------------------------------------|
| | No | Date | | Status, p. 56. 555 | date |
| 01 | CAPA- 21-04- 0005 | 14- April- 21 | This CAPA is raised to address 3 yellow card complaints reported to DHSC by MHRA related to Latex allergy after using the LFD test kit. | Closed | 30 July 2021 |
| 02 | CAPA- 21-04- 0006 | 21- April- 21 | Process for investigating and following through the product quality related incidents by opening CAPAs across the test and trace programme. | Completed pending VOE | VOE due date: 28-Oct- 21 |
| 03 | CAPA- 21-06- 0010 | 08- Jun- 21 | CAPA raised to address the discrepancies/inconsistencies between the IFUs, leaflets and online information. | Action implementation stage. Action over-due | 08-Sep- 21. |
| 04 | 21-06- 0011 | 08- Jun- 21 | CAPA raised to address the lack of unified complaints system for receiving direct complaints under the design and responsibility of DHSC | Completed pending VOE | VOE Due Date: 01-Oct- 21 |
| 05 | CAPA- 21-06- 0012 | 08- Jun- 21 | CAPA raised to address inconsistencies in the reporting criteria for the complaints which require clinical input. | Action implementation stage. Action overdue | 08-Sep- 21 |
| 06 | CAPA- 21-06- 0013 | 08- Jun- 21 | CAPA raised to strengthen the PMS plan and appropriate PMS activities | Completed pending VOE | VOE Due date: 28-Oct- 21 |
| 07 | CAPA- 21-06- 0014 | 08- Jun- 21 | CAPA raised to address the lack of regulatory clinical performance resource and oversight of PMPF studies | Action implementation stage. Overdue – In process of agreeing additional actions | 08-Sep- 21 |
| 08 | CAPA- 21-06- 0015 | 08- Jun- 21 | CAPA raised to address the non-conformities identified in LFD risk management process related to lack of communication between diff organization for risk assessment, lack of literature review for risk benefit evaluation and lack of risk control measure in Hazard traceability matrix | Action implementation stage. Action Overdue | 08-Sep- 21 |
| 09 | CAPA- 21-06- 0016 | 08- Jun- 21 | CAPA raised to address the non-conformities identified in SCAR process related to poorly defined proposed corrective action plan and lack of effectiveness check for SCAR-2021-026 | Action implementation stage. | 08-Sep- 21 |
| 10 | CAPA- 21-06- 0017 | 08- Jun- 21 | CAPA raised to address the lack of evidence identified in LFD technical file to demonstrate whether the tests continue to be fit for purpose and that they meet the intended performance stated by DHSC. | Action implementation stage. Action Overdue | 08-Sep- 21 |
| 11 | CAPA- 21-06- 0018 | 09- Jun- 21 | CAPA raised to address the schools supply issues and schools are having to cease testing due to supply shortages | Root cause investigation stage | 09-Sep- 21 |



| No | CAPA No | Start Date | Problem statement | Status/ progress | Due date |
|------------|-------------------------|-------------------|--|--------------------------------|---------------|
| 12 | CAPA- 21-06- 0019 | 09- Jun- 21 | CAPA raised to address the high void test for LFD identified at | Root cause investigation stage | 09-Sep- 21 |
| 13 | CAPA- 21-06- 0020 | 09- Jun- 21 | CAPA raised to address the high void test for LFD identified at | Root cause investigation stage | 09-Sep- 21 |
| 14 | CAPA- 21-06- 0021 | 09- Jun- 21 | CAPA raised to address the high void test for LFD identified at | Root cause investigation stage | 09-Sep- 21 |
| 1 5 | CAPA- 21-06- 0022 | 09- Jun- 21 | CAPA raised to address the high void test for LFD identified at | Root cause investigation stage | 09-Sep- 21 |
| 16 | CAPA- 21-06- 0023 | 09- Jun- 21 | CAPA raised to address the high void test for LFD identified at | Root cause investigation stage | 09-Sep- 21 |
| 17 | CAPA- 21-06- 0024 | 09- Jun- 21 | CAPA raised to address the high false positive rate for LFD 25S identified at | Root cause investigation stage | 09-Sep- 21 |
| 18 | CAPA- 21-06- 0025 | 09- Jun- 21 | CAPA raised to address the high false positive rate for LFD 3s and 7s identified at | Root cause investigation stage | 09-Sep- 21 |
| 19 | CAPA- 21-06- 0026 | 09- Jun- 21 | CAPA raised to address the high false positive rate for LFD 3s and 7s identified at | Root cause investigation stage | 09-Sep- 21 |
| 20 | CAPA- 21-06- 0027 | 09- Jun- 21 | CAPA raised to address the issue of University LFD kits failing to flow | Out for closure | 09-Sep- 21 |
| 21 | CAPA- 21-06- 0030 | 09- Jun- 21 | CAPA raised to address the issue registering the test results from OLT and schools | Root cause investigation stage | 09-Sep- 21 |
| 22 | CAPA- 21-06- 0031 | 11- Jun- 21 | CAPA raised to demonstrate DHSC'S compliance towards nonconformity identified in Innova USA voluntary recall notice with regards to Public Health Risk Assessment and clinical performance data | Closed | 11-Sep- 21 |
| 23 | CAPA- 21-06- 0032 | 11- Jun- 21 | CAPA raised to demonstrate DHSC's compliance towards nonconformity identified in Innova USA voluntary recall notice with regards to QMS requirements | Action implementation stage | 11-Sep- 21 |
| 24 | CAPA- 21-06- 0033 | 11- Jun- 21 | CAPA raised to demonstrate DHSC's compliance towards nonconformity identified in Innova USA voluntary recall notice with regards to Supplier Management | Action implementation stage | 11-Sep- 21 |
| 25 | CAPA- 21-06- 0034 | 18- Jun- 21 | CAPA raised to address the Non-conformity identified regarding the IFUs supplied with the LFD 25s kits | Action implementation stage | 28-Sep- 21 |

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4.8 SCAR - Supplier Corrective Action Report

No SCARs raised for LFD in this period 7th - 27th August 2021. There are no open SCARs for LFD products.

4.9 Variant of Concern Data VoC Not available this period.

4.10 Risk Management

DHSC Risk management File RMF-0001 has been updated to Revision 5.

(Refer to Attachment 07 for data)

5. Conclusion

Batch issues

• No lot trending was identified during this period.

User incidence

- DHSC has received a total of 57 total complaints between 7th 27th August 2021 from all sources. This
 is a rate of 0.014 per 10,000.
- 40.2 Million were distributed (3s, 7, and 25s) LFD kits between 7th 27th August 2021.
- No reports related to injury received from Qualtrics survey.
- 67.1% of the end users completing Qualtrics survey answered 100% of the survey questions during 7th 27th August 2021.

Trends and analysis

- Trending category shows 7 complaints for "Faulty test results". 3 complaint investigations with no
 further action by DHSC and 4 complaint investigation to be conducted.
- There were no new hazards identified for this reporting period.
- DHSC has received a total of 19 complaints between 7th 27th August 2021. 3 complaints came
 through Innova and 16 from MHRA (yellow card). The number of kits distributed (3s, 7s and 25s) during
 this period was 40.3 million.
- The number of users using the Qualtrics survey went down from 1005 last reported period to 592 end users this period 7th - 27th August 2021

PHCO: Public Health Clinical Oversight

• Public Health Clinical Oversight reviewed events for clinical input and clarification on the reportability during the PSP Patient Safety Panel.

<u>Recall</u>

• DHSC has not instigated a recall.

6. Actions

| No | Added | Action | Responsible Name/Email | Due Date | Status |
|----|---------|---|------------------------|-----------|-----------------------|
| 2 | 15-Aug- | Risk management file RMF-0001.Rev4 to | | 2 Sep 021 | Completed |
| | 2021 | be updated with new hazards identified during the period | | | CO-135 was used to |

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| | | | 001 to Rev5 |
| | | | |

7. Attachments

Attachment 01: PMS-0001, PMS Plan for the DHSC Covit-19 LFD Devices (3 and 7 kit) Rev2, 29-July-2021

Attachment 02: Intertek testing Report

Attachment 03: DHSC PSR – Complaints & Qualtrics data

Attachment 04: RWPM Innova 3s and 7s Attachment 05: RWPM Innova 25s Attachment 06: RWPM Innova Assisted

Attachment 07: RMF Rev5 & HTM Hazard-Traceability-Matrix Rev4

| | Job Title | Name | email |
|-------------|-----------------|------|-------|
| Compiled by | Regulatory Lead | | |