Halton Borough Council

COVID-19 Outbreak Control Plan

for

Educational and Childcare settings and Provision

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Section 1

Educational and childcare settings and provision COVID-19 Outbreak Control Plan

Overview

COVID-19 is a rapidly evolving situation; guidance is being developed at a fast pace, therefore subject to change with little notice. This plan will be kept under review, particularly section 8 that provides links to national guidance and other relevant information to support outbreak control.

The term educational and childcare settings and provision is used to include early year's settings: child minders, nursery schools, full day care, wrap-around care: out of schools clubs, breakfast and after school clubs, link clubs and holiday clubs: primary schools, secondary schools, colleges and universities.

The purpose of this plan is to outline the Local Authority and multi-agency response to a COVID-19 outbreak in an educational and childcare settings and provision in Halton Borough Council

Aims and Objectives

Aim

The plan aims to ensure an effective and coordinated approach to educational and childcare settings or provision COVID-19 outbreak.

The outbreak control plan is important to manage outbreaks, provide advice and reassurance, prevent transmission and assist to create conditions whereby lockdown restrictions can be safely relaxed.

Objectives

- The plan has been developed to ensure clarity related to operational roles and responsibilities for each responding organisation in the event of a COVID-19 outbreak
- The plan provides the mechanism to assist responders to activate an effective and coordinated multi-agency approach to any outbreaks.
- This plan is integral to supporting the primary objectives of the NHS Test and Trace service which aim to control and reduce the spread of infection, save lives, and in doing so help to return life to as normal as possible, for as many people as possible, in a way that is safe, protects the health of our local community.
- Actions undertaken as part of the outbreak control response aim to prevent a return to lock down in a geographical area or setting. However, in some exceptional circumstances local lock downs could be put in place where this is deemed appropriate.

Definition of a COVID-19 Outbreak

- Two or more confirmed cases with symptoms of coronavirus (COVID-19) arising within the same 14-day period in people who work at or attend the educational and childcare settings or provision, or there is a high reported absence which is suspected to be COVID-19 related.
- **Note:** the educational and childcare settings or provision does not need to notify the Health Protection Team or Local Authority Public Health Team if they are informed of a positive test result by a parent or other source, they should make this information known to Halton: Operational Director for Education, Inclusion and Provision, Ann McIntyre

Background

Overview of Covid-19 Symptoms

The most common symptoms of coronavirus (COVID-19) are recent onset of:

- New continuous cough and/or
- A high temperature (over 37.8 degrees)
- A loss of, or change in, your normal sense of taste or smell

Mode of transmission

COVID-19 is passed from person to person mainly by large respiratory droplets and direct contact (close unprotected contact, usually less than one metre). These droplets can be directly inhaled by the person, or can land on surfaces which another person may touch which can lead to infection if they then touch their nose, mouth or eyes.

Incubation period

The incubation period (i.e. time between exposure to the virus and developing symptoms) is between 1 and 14 days (median 5 days).

When is a person infectious?

A person is thought to be infectious 48 hours before symptoms appear, and up to seven days after they start displaying symptoms.

Can children pass on the infection?

There is some uncertainty about how much asymptomatic or mildly symptomatic children can transmit the disease but the evidence so far from a number of studies suggests children are less likely to pass it on and do not appear to play a major role in transmission. Most children with COVID-19 have caught the infection from adults and not the reverse. This is unlike ‘flu.

When one case occurs in educational and childcare settings or provision

The response to a single case has many of the same features as the response to an outbreak. It is managed using a preventative approach; where two cases are linked in time to a setting then this suggests transmission and requires a more active approach

- See supplementary guidance for detailed advice on approach to single case

Section 2

Notification and Activation of the Outbreak Control Plan

Notification

- If an educational and childcare settings or provision has two or more confirmed cases, or there is a high reported absence which is suspected to be COVID-19 related the educational and childcare settings or provision should promptly report to the local PHE NW team refer to section 3 for contact details
- **Note:** it is also probable that some outbreaks will be identified by either the PHE NW local health protection team or the local authority public health team and in turn the educational and childcare settings or provision will then be contacted by one of these teams.
- If in doubt and further advice is required please contact the PHE NW Health Protection Team

Educational and childcare settings or provisions should inform Halton Operational Director for Education, Inclusion and Provision, Ann McIntyre

Activation

- If a child who attends the educational, childcare settings or provision or staff member who works at the setting tests positive for COVID-19 then the educational, childcare settings or provision will be contacted by a contact tracer.
- This contact tracer may be based either in the Local Authority or the local Health Protection Team.
- This will also be the case if a visitor who was at the premises was linked back to the location for example if there has been use of the facilities by the wider community

- Public Health England (PHE) Consultant in Communicable Disease (CDC) and Director of Public Health (DPH) will decide if an outbreak control team (OCT) is required, if so PHE would lead on declaring an outbreak and carry out an initial risk assessment (RA).

Note

- The great majority of outbreaks are dealt with as part of normal service and may not require an Outbreak Control Team (OCT) to be convened.

- Most outbreaks can be managed using existing guidance and standard operating procedures (SOPs).
- If the initial RA indicates a complex situation requiring an OCT, relevant stakeholders will need to be engaged, there are a set of checklists to support this process.

Roles and Responsibilities

- The responsibility for managing outbreaks is shared by all the organisations who are members of the OCT.
- Leadership for managing incidents and outbreaks of COVID-19 will be agreed jointly at the first OCT meeting. This may be PHE, LA or other appropriate agency depending on the situation.
- Roles and Responsibilities are covered in detail in section 6

When to convene an Outbreak Control Team (OCT)

- Large number of close contacts
- Cluster of cases
- High numbers of vulnerable people as potential contacts within the setting
- Potential impact on service delivery if staff are not in the workplace for 14 days from exposure
- Death or severe illness reported in the case or contacts
- Significant likelihood of media or political interest in situation

When an OCT has been convened they will decide on the response actions required.

Response arrangements

- On the same day as they are notified of the outbreak the **Headteacher /provision manager** or appropriate member of the leadership team at the educational setting or provision will be asked to work with a **contact tracer** to identify direct and close contacts of the cases during the 48 hours prior to the child or staff member falling ill. This is likely to be the pupils/children and teacher/keyperson of that class/group.
- The social distancing measures put in place by educational settings outside the classroom/room in line with the Covid-19 Risk Assessments should reduce the number of other direct/close contacts.

Communication

Effective communications is a vital part of the response to an outbreak.

- The parents, carer, children and teachers, childminders etc. will need information and a set of letters has been produced to support how information is shared.

- In most cases, it will be PHE or the local authority who coordinate communications activities. If an OCT is set up, it will be the communications representative of the organisation leading the response who will lead communications.

- Whoever is leading, will have responsibility for updating the Cheshire Resilience Forum Communications Cell on the position and actions being taken.

- While media interest will vary dependent on the scale and nature of the outbreak, in all cases, consideration should be given to who the spokesperson will be for the outbreak. A media protocol has been established outlining where responsibility for responding to media enquiries sits.

A communications toolkit has been developed to support the response. This includes information leaflets, letters and a media protocol. Any variation from the content provided should be agreed by Director of Public Health and Operational Director for Education, Inclusion and Provision in advance of issuing.

Refer to media protocol for suggested content is in documents attached in the pack.

Identifying a contact in an educational and childcare settings and provision setting

A contact tracer will work with the school to identify who is a contact where there is any ambiguity

- A contact is defined as a person who has had contact (see below) at any time from 48 hours before onset of symptoms (or test if asymptomatic) to 7 days after onset of symptoms (or test):
- a person who has had face-to-face contact (within one metre) with someone who has tested positive for coronavirus (COVID-19), including:
    - being coughed on, or
    - having a face-to-face conversation, or
    - having skin-to-skin physical contact, or
    - any contact within one metre for one minute or longer without face-to-face contact
- a person who has been within 2 metres of someone who has tested positive for coronavirus (COVID-19) for more than 15 minutes
- a person who has travelled in a small vehicle *with* someone who has tested positive for coronavirus (COVID-19) or in a large vehicle *near* someone who has tested positive for coronavirus (COVID-19)
- people who spend significant time in the same household as a person who has tested positive for coronavirus (COVID-19)

- **Note:** A person who wore appropriate PPE or maintained appropriate social distancing (over 2 metres) would not be classed as a contact.(see supplementary guidance for advice on what is appropriate PPE)

Issuing advice to contacts

Before the next day:

- All identified direct and close contacts will be asked to go home from educational and childcare settings or provision and advised to self-isolate for 14 days starting from the day they were last in contact with the case.
- Contacts should be sent home as soon as practicable possible, understanding that some children or staff may not be able to go immediately and provision will need to be made to support the staff or children until they can go home.
- **For example**, if the case tests positive on Thursday and was last in educational and childcare settings or provision on the previous Monday the first day of the 14 day period is on the Monday.
- Household members of contacts do not need to self-isolate unless the contact develops symptoms.
- Further information on the national stay at home guidance is online, it will be detailed in the letter sent to all contacts.
- A contact tracer will provide a standard letter to the educational, childcare settings or provision containing the advice for contacts and their families; the educational and childcare settings or provision will be asked to send the letter to the identified contacts.
- Contacts of contacts should not be asked to leave.

Recording information

- Educational and childcare settings and provision should record all detail required using the PHE Template Resource Pack for Educational and childcare settings and provisions). The educational and childcare settings and provision retains this document. It will enable them to identify patterns of illness.
- You would record your normal registers for daily attendance/ absence for your provision and for DfE as required.

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Actions related to Educational and childcare settings and provisions closure

- The educational and childcare settings or provision would not usually need to close on public health grounds.
- Educational and childcare settings or provisions will generally only need to close if they have staff shortages due to illness or being identified as contacts.
- It is expected that only the class of a confirmed case will need to be asked to stay home.
- If there are a number of confirmed cases across different classes and year groups concurrently then the educational and childcare settings and provision

may be required to close by the Health Protection Team in consultation with other partners.

Testing

The NHS Track and Trace system is the route to access testing.

- Contacts will not routinely be tested unless they develop symptoms (contract tracer may provide advice on this).
- Contacts will be advised, should they develop symptoms, that the parent/carer should arrange for the child to be tested via the NHS web site https://www.nhs.uk/conditions/coronavirus-covid-19/testing-and-tracing/ or by contacting NHS by dialling 119 via telephone
- The same applies to any parent or household member who develops symptoms.
- Any staff who develop symptoms can apply for key worker testing. This is available via an online link https://www.gov.uk/apply-coronavirus-test-essential-workers.
- Educational and childcare settings and provisions staff can also contact local public health teams
- In Halton if they need a satellite centre slot or the spaces are full, the head/provision manager should send a completed testing request form to public.health@halton.gov.uk

Advice for Non-contacts

- The local Health Protection Team will provide a template warn and inform letter for the wider educational, childcare settings or provision.
- Head teachers / managers will be required to issue this letter before the start of the next day.
- The letter aims to reinforce universal prevention measures: hand hygiene, respiratory hygiene, frequent cleaning and social distancing.

Additional Cleaning Requirements

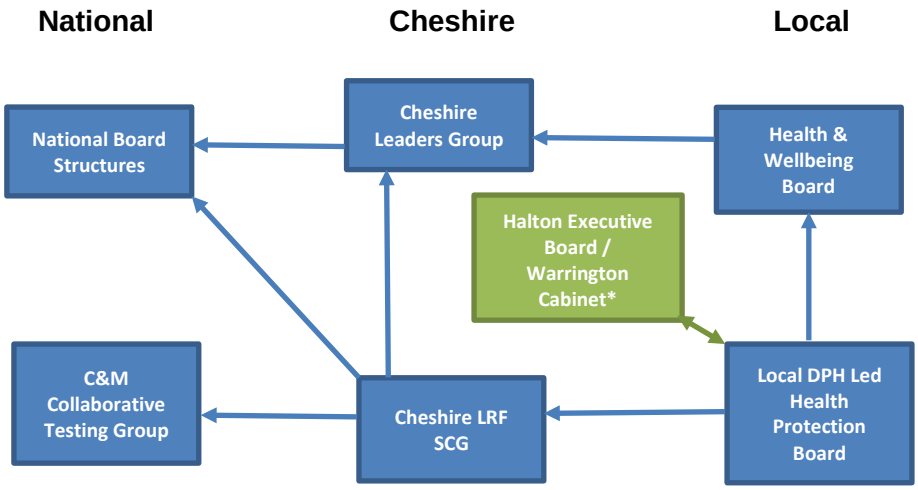
- Regular, thorough cleaning for all areas, focusing on shared spaces and high touch points e.g. door handles, photocopiers, drinks areas should be maintained at all times as this is one of the most effective prevention measures.

- Cleaning an area with normal household disinfectant after someone with suspected coronavirus (COVID-19) has left will reduce the risk of passing the infection on to other people.

- Appropriate personal protective equipment such as disposable or washing-up gloves and aprons for cleaning should be used.

Command & Control

Framework for Governance across Cheshire



Stand down / declaring the end of an Outbreak

- It is important that there is continued vigilance for new potential cases as well as adherence to infection prevention and control principles once the outbreak is over to reduce the chance of a further outbreak.
- The OCT will decide when the outbreak is over and will make a statement to this effect.
- If there has been no OCT convened the outbreak will be declared over by the DPH / other nominated lead /PHE
- The decision to declare the outbreak over should be informed by ongoing risk assessment and considered when:
    - there is no longer a risk to the public health
    - the number of cases has declined;
- The outbreak will usually be declared over when there have been no new cases of confirmed or suspected COVID-19 within a continuous 14-day period.

Section 3

Key contacts

For COVID-19 health protection queries related to educational and childcare settings and provisions, including advice on what to do if someone has symptoms or testing information

Local Authority Health Protection Team

Email: Halton Borough Council Public Health (COVID Response)
Public.Health@halton.gov.uk

To notify suspected outbreaks Public Health England (PHE)

North West Health Protection Team

Monday to Friday 9 am to 5 pm 0344 225 0562

Out of Hours PHE Contact:

PHE on call via the Contact People 0151 434 4819

For educational and childcare settings and provisions advice, including any potential staffing issues in relation to illness and or isolation

Halton Borough Council

Ann McIntyre - Operational Director Education, Inclusion and Provision -Schools and Special Education

Ann.Mcintyre@halton.gov.uk

01515117332

Tracey Coffey - Operational Director Children and Families

Tracey.Coffey@halton.gov.uk

01515116790

Jill Farrell – Divisional Manager Education (0-19) - Early Years

Jill.Farrell@halton.gov.uk

01515117288

Section 4

Further information

Testing

How can a parent arrange testing?
The parent can arrange for any child to be tested via NHS UK or by contacting NHS 119 via telephone if they do not have internet access.

Will the educational and childcare settings and provision be informed of any test results?
The educational and childcare settings and provision will be informed if a child or staff member tests positive as part of NHS Test and Trace.
The educational and childcare settings and provision will not be informed of any negative results.

All education and childcare workers are considered essential workers and can apply for a test if they are symptomatic via https://www.gov.uk/apply-coronavirus-test-essential-workers.

Can they be tested if they do not have symptoms?
No. People should only be tested if they have symptoms.

How can a staff member get tested?
If any staff contact develops symptoms then they can apply for a test via https://www.gov.uk/apply-coronavirus-test-essential-workers.

If they need a satellite centre slot or those spaces are full, the head should send a completed testing request form to public.health@halton.gov.uk.

Testing request form included in outbreak pack.

Stay at home advice

Direct to Stay at home guidance for isolation advice for child/staff member and their households. The person with symptoms should isolate for 7 days starting from the first day of their symptoms and the rest of their household for 14 days.

For any additional information – refer to PHE NW COVID-19 Template Resource Pack for Educational and childcare settings and provision s

Cleaning

What additional cleaning is necessary following a symptomatic or confirmed case?

It is important to concentrate on regular cleaning of frequently touched items / surfaces. This is likely to be highly effective as high contact surfaces will present the main risk in terms of indirect transmission. So long as regular cleaning is thorough and maintained at all times there is no need for additional cleaning.

- Cleaning an area with normal household disinfectant after someone with suspected coronavirus (COVID-19) has left will reduce the risk of passing the infection on to other people.
- Wear disposable or washing-up gloves and aprons for cleaning.

- Using a disposable cloth, first clean hard surfaces with warm soapy water. Then disinfect these surfaces with the cleaning products you normally use. Pay particular attention to frequently touched areas and surfaces, such as bathrooms, grab-rails in corridors and stairwells and door handles.
- If an area has been heavily contaminated, such as with visible bodily fluids, use protection for the eyes, mouth and nose, as well as wearing gloves and an apron.
- All the disposable materials should be double-bagged, then stored securely for 72 hours then thrown away in the regular rubbish after cleaning is finished.

Wash hands regularly with soap and water for 20 seconds, and after removing gloves, aprons and other protection used while cleaning

Section 5

Glossary

Key words and abbreviations

COVID-19 outbreak. Two or more cases with symptoms of coronavirus (COVID-19) that is recent onset of: new continuous cough and/or high temperature >37.8 and/ or a loss of, or change in, normal sense of taste or smell (anosmia) in isolation or in combination with any other symptoms arising within the same 14-day period in people who work or have visited in the setting

Cluster. A cluster is defined as a situation where a number of cases have a possible but as yet unconfirmed epidemiological link.

LAPH. Local Authority Public Health

OCT Outbreak Control Team

PHE. Public Health England

Suspected. A cluster/outbreak, with two or more cases of illness with symptoms consistent with COVID-19 infection (as per the COVID-19 case definition).

Testing pillars. There are five pillars to testing, 1 is locally managed NHS swabbing, 2 is commercial testing, 3 is antibody testing, 4 is surveillance testing and 5 is diagnostics.

Section 6

Roles and Responsibilities

Local Authority Director of Public Health

- Have overall responsibility for the health of the population including the surveillance, prevention and control of communicable diseases and infections.
- To be represented on the OCT either in person or through an appropriate deputy.
- Work with NHS England Regional Team and CCGs to ensure the release of relevant local resources required to manage the outbreak.
- Keeping elected members, Health & Wellbeing Board and senior management informed of the outbreak as appropriate.
- Where agreed, act as the public health lead for the LA in relation to providing response.
- These tasks may vary according to the nature of circumstances of the outbreak.

PHE Consultant in Communicable Disease Control/Consultant in Health Protection / Consultant Epidemiologist on behalf of PHE Centre

- To declare an outbreak following appropriate consultation.
- To convene the OCT and ensure membership is appropriate.
- To Chair the OCT where this is a community associated outbreak unless a different Chair has been agreed by the OCT.
- To make arrangements for the OCT to receive administrative support.
- To identify what additional resources/personnel might be needed e.g. public health practitioners or IT Systems.
- Depending on the nature and scale of the incident, to inform the relevant PHE director and ensure PHE briefings are prepared as outlined in the IERP.
- To ensure the initial responses and investigation is begun and actions documented within 24 hours of the time the potential outbreak has been recognised.
- To provide epidemiological advice relevant to the outbreak and support analysis and interpretation of data.
- To ensure that an incident room is set up if required at an appropriate venue having regards to the nature of the outbreak.
- To arrange, in conjunction with environmental health colleagues and/or infection control colleagues, for appropriate identifications and follow up of any contacts.
- To ensure that appropriate control measures for contacts and others at risk is recommended and to arrange this through the relevant commissioner if necessary, this includes isolation advice and support as required.
- To identify the need for advice from relevant experts and request advice as appropriate.
- Liaise with clinicians (primary or secondary care) over need for specific testing and management of cases.
- To agree with the OCT who will lead the media response.
- To ensure appropriate bodies and officers are kept informed and updated

- Where appropriate to liaise with colleagues in adjacent PHE Centres where more than one PHE Centre is involved or may be involved.
- To co-ordinate the written final report on the outbreak and to ensure that the outbreak recommendations are acted upon.
- To ensure the constructive debrief is held and lessons learned disseminated and acted upon as necessary.
- To ensure all documentation relating to the outbreak is correctly managed and disseminated, incorporating information governance and data protection requirements.
- The above tasks may vary according to the nature or circumstances of the outbreak.
- Local Authority Environmental Health Practitioner (representative of Chief Environmental Health Officer [or equivalent])
- Attend OCT meetings, or be represented by a suitable deputy who will report directly back.
- Investigate potential sources of the outbreak and secure relevant improvements as appropriate where the LA is the enforcing authority e.g. for food safety, health and safety, health protection. Where the health and safety enforcement falls to the Health and Safety Executive, the LA should advise the OCT.

  Actions in relation to investigation and control include:
  - be responsible for arranging the collection and transport of appropriate specimens to the laboratory for screening of patients, contacts and staff;
  - undertake appropriate food, water and environmental sampling and be responsible for the collection and transport of food samples, to a suitable microbiology laboratory;
  - undertake site visit as necessary;
  - be responsible for ensuring the infection control advice is implemented by the potential/suspected source of the outbreak, using relevant legal powers as necessary and working closely with PHE staff or relevant local authority or provider service Infection Prevention and Control team;
  - ensure the normal arrangements for the collection and disposal of clinical waste remain appropriate. If necessary, discuss with OCT and contractors as to the changes required;
  - be responsible for informing relevant food and non-food businesses of hazards when appropriate;
  - to arrange, as necessary, for the identification, removal and safe disposal of contaminated (or potentially contaminated) food;
  - to ensure continuity of evidence;
  - provide help and advice with the epidemiological aspects of the outbreak, including the investigation of cases (and contacts where appropriate).

Local testing lead

- To present to the OCT relevant testing information relating to the outbreak.
- To identify resources to enable testing to be undertaken speedily and efficiently and to report on this to the OCT.
- Provide mechanisms for out of hours communications with the CCDC, OCT, the public and other stakeholders as appropriate.
- Ensure regular briefing of LA field staff.

- To identify resources to enable tests to be undertaken speedily and efficiently and to report on this to the OCT.
- These tasks may vary according to the nature of circumstances of the outbreak

Clinical Chief Officer of CCG

- Ensure 24/7 availability of relevant staff for supporting management of incidents / outbreaks through their corresponding community health services.
- Ensure the release of local NHS resources required to manage the outbreak.
- As lead commissioners of their local health care services to alert hospitals/ community services and ensure that they have arrangements to cope with a potential influx of patients or enquiries.
- Arrange for communication with relevant healthcare staff in the local area.
- These tasks may vary according to the nature of circumstances of the outbreak.

Lead Press Officer

- The designated lead press officer will be nominated by the OCT and may be from any of the key organisations; their role is listed below.
    - Provide advice to the OCT on media relations.
    - Contribute to the preparation of press releases and statements
    - Ensure such material is circulated appropriately, including to all members of the OCT and relevant others as agreed by the OCT.
    - In collaboration with other press officers of all key organisations and the OCT nominated media spokesperson, organise press conferences and media briefings as appropriate.
    - Be the initial point of contact for all media enquiries.

- **Note**: The designated media spokesperson refers to the person nominated by the OCT and press officers of the relevant organisations would be expected to work closely with this person

Chief Executive of Community and Mental Health Provider Trusts

- Ensure that clinical services are available for the management of cases and contacts as required.
- Co-operate with the requests of the OCT.
- Ensure that medical, nursing and other staff to assist the OCT in the management of the outbreak.
- Ensure that all necessary resources are available to the OCT as appropriate.
- In liaison with CCGs, agree mechanisms for ensuring appropriate resources including staff with the necessary skills and training are available to support surge capacity in the event of an incident / outbreak.
- These tasks may vary according to the nature of circumstances of the outbreak

Head Teacher, nominated educational and childcare settings or provisions lead

- Co-operate with the requests of the OCT/ Health Protection Lead
- Ensure that staff assist the OCT/ Health Protection Lead in the management of the outbreak.
- Arrange for communication with relevant parents, pupils and staff

LA Educational and childcare settings and provisions lead

- Co-operate with the requests of the OCT/ Health Protection Lead
- Agree content of communication for relevant parents, children and staff
- Ensure availability of relevant staff for supporting management of outbreaks

Section 7

Suggested members of OCT

Usual Members:

Local Authority Director of Public Health (or nominated deputy)
Health Protection Public Health Consultant
Local Authority Environmental Health Practitioner
PHE Consultant in Communicable Disease Control/Consultant in Health Protection or Consultant Epidemiologist
Consultant Microbiologist /Virologist
Communications Manager
Administrative Support

Additional Members: (this is not an exhaustive list)

Local Authority Educational and childcare settings and provisions Lead
PHE Consultant Epidemiologist
PHE Health Protection Surveillance/Information Officer
PHE Data Analyst/Statistician
PHE Health Protection Nurse/Practitioner
PHE Director (if relevant)
PHE Emergency Preparedness Manager
NHS England Strategic Commander
NHS Community Provider co-ordinator
CCG Representative
North West Ambulance Service
Local Authority or provider service infection prevention and control nurse
General Practitioner
Consultant Physician
Immunisation co-ordinator
Pharmaceutical Advisors
Legal Adviser (PHE or LA as appropriate)

Others who may be called upon to attend include representatives from:

Health & Safety Executive
Care Quality Commission
Ofsted
Relevant institution e.g. School, University, Business

Section 8

Key national guidance

Social distancing guidance

• Stay at home: guidance for households with possible coronavirus (COVID-19) infection: https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection#ending-isolation

• Guidance on social distancing for everyone in the UK: https://www.gov.uk/government/publications/staying-alert-and-safe-social-distancing

• Guidance on shielding and protecting people who are clinically extremely vulnerable from COVID-19: https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19

Guidance for contacts

• Guidance for contacts of people with possible or confirmed COVID19: https://www.gov.uk/government/publications/guidance-for-contacts-of-people-with-possible-or-confirmed-coronavirus-covid-19-infection-who-do-not-live-with-the-person/guidance-for-contacts-of-people-with-possible-or-confirmed-coronavirus-covid-19-infection-who-do-not-live-with-the-person

• Guidance for contacts of people with confirmed coronavirus (COVID-19) infection who do not live with the person : https://www.gov.uk/government/publications/guidance-for-contacts-of-people-with-possible-or-confirmed-coronavirus-covid-19-infection-who-do-not-live-with-the-person/guidance-for-contacts-of-people-with-possible-or-confirmed-coronavirus-covid-19-infection-who-do-not-live-with-the-person

Specific guidance for settings / workplaces:

• Guidance to help employers maintain safe workplaces during the COVID-19 epidemic: https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19

• Guidance for the construction industry and those working outdoors: https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19/construction-and-other-outdoor-work

• Guidance for factories, plants and warehouses: https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19/factories-plants-and-warehouses

• Guidance for labs and research facilities: https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19/labs-and-research-facilities

• Guidance for offices and contact centres: https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19/offices-and-contact-centres

• Guidance for people working in, delivering to, or visiting other people's homes: https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19/homes

Guidance for restaurants offering takeaway or delivery: https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19/restaurants-offering-takeaway-or-delivery

• Guidance for shops, branches and stores: https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19/shops-and-branches

• Guidance for people who work in or from vehicles: https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19/vehicles
• Guidance for transport operators: https://www.gov.uk/government/publications/coronavirus-covid-19-safer-transport-guidance-for-operators/coronavirus-covid-19-safer-transport-guidance-for-operators
• Guidance for NHS employers about the health, safety and wellbeing of staff: https://www.nhsemployers.org/covid19/health-safety-and-wellbeing
• Guidance for NHS leaders on workforce management: https://www.england.nhs.uk/coronavirus/workforce/
• Guidance for the employers of staff in health and social care settings: https://www.gov.uk/government/publications/covid-19-management-of-exposed-healthcare-workers-and-patients-in-hospital-settings/covid-19-management-of-exposed-healthcare-workers-and-patients-in-hospital-settings
Coronavirus (COVID-19) advice for accommodation providers: https://www.gov.uk/guidance/covid-19-advice-for-accommodation-providers

Testing
• NHS: Testing for coronavirus: https://www.nhs.uk/conditions/coronavirus-covid-19/testing-and-tracing/

Infection Prevention and Control (IPC)
• IPC for healthcare settings: https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control
• PPE: https://www.gov.uk/government/collections/coronavirus-covid-19-personal-protective-equipment-ppe
• COVID-19: putting on and removing PPE – a guide for care homes (video):
• COVID-19: management of exposed healthcare workers and patients in hospital settings:
• 5 moments for hand hygiene: with how to hand rub and how to handwash. Posters: https://www.who.int/infection-prevention/campaigns/clean-hands/5moments/en/
• Catch it. Bin it. Kill it. Poster: https://campaignresources.phe.gov.uk/resources/campaigns/34/resources/2665

Cleaning and waste management
• Safe management of healthcare waste: https://www.gov.uk/government/publications/guidance-on-the-safe-management-of-healthcare-wasteand-social-care
• COVID-19: cleaning in non-healthcare settings: https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings

Coronavirus Resource Centre posters
• https://coronavirusresources.phe.gov.uk/