

## INFORMATION PACK

### Re-opening during the coronavirus outbreak: things to think about

#### What is this information pack about?

This information pack is to help you think about some of the things that will need to change in order for your workplace, service or facility to be open and operating safely during the coronavirus outbreak.

There are lots of places where people may come together and be in contact with each other. This includes:

- Workplaces
- Shops
- Restaurants and cafes
- Places of worship
- Civic buildings
- Community health, care or voluntary sector buildings
- Sheltered housing
- Houses of multiple occupancy (HMOs)
- Prisons
- Transport hubs
- Hotels
- Leisure facilities
- Schools
- Care homes
- Hospitals

We call all these places 'settings'

Whatever setting(s) you are involved with, there will be important general principles to follow in operating safely, preventing an outbreak of coronavirus in your setting and being ready to respond effectively if one or cases are identified in your setting.

#### How does this relate to government guidance?

The government has already produced specific guidance for many settings.

[CHECK IF THERE IS GUIDANCE FOR YOUR SETTING HERE](https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19)  
(<https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19>)

This information pack is intended to support the government guidance, provide guidance for settings where government guidance does not yet exist and get you started thinking about how safely using

a setting will interact with the NHS Test and Trace system if there is a case in your setting. **If anything in this information pack seems to contradict government guidance, follow the government guidance first.**

## **How can I prevent the spread of coronavirus infection in my setting?**

*The first question to ask is: is it right for my setting to be open right now?* Work through the guidance, think about the questions and make your judgement.

1. If there is government guidance to make your setting 'COVID-19 Secure', follow that guidance as far as possible
2. Begin with the 5 key principles of preventing COVID-19 infection
  - a. **Carry out a risk assessment** – look at your setting specifically
  - b. **Develop cleaning, handwashing and hygiene procedures**
  - c. **Help people avoid attending the setting and stay at home if they choose to** – the fewer people in the setting the lower the risk of infection, so working from home, providing some services online or via telephone or having delivery options may all need to be explored
  - d. **Maintain 2m social distancing, where possible** – if it isn't possible think about whether that activity needs to keep going, and if not think about measures to reduce the risk of transmission
  - e. **Ensure that people with COVID-19 symptoms (new persistent cough, fever or loss of smell or taste) do not attend the setting, or leave the setting when symptoms develop**
3. Consider the more detailed points in 'Thinking about preventing the spread of infection', discuss with others in the setting and come up with plans (See Table)
4. Prepare a plan for what you would need to do if a person in your setting was discovered to have tested positive for coronavirus, or if there was more than one person (an outbreak)

**If you take action to prevent the spread of infection, this will greatly reduce the risk that there will be an outbreak in your setting**

## **Section One: Thinking about preventing the spread of infection:**

*These questions are presented in a table that you can work through and fill in Appendix 1*

- The best way to prevent the spread of coronavirus is good hand hygiene and limiting the amount of contact people have with each other (maintaining 2 metre social distance and not having too many different people mixing)
  - Do you have somewhere for people to wash or sanitize their hands as soon as they arrive? Is there a door or door handle they have to touch on the way to this, and can this be avoided, or regularly cleaned?
  - Will people regularly be able to wash their hands during the day, e.g. after coughing?
  - How will you remind people to wash their hands?

- How will 2 metre social distancing be maintained in your space? Can you mark the ground? Do you have lifts and how will you ensure people aren't squashed together in them? What about in break rooms?
- If people who come to the setting are worried that social distancing and hygiene isn't possible, how are they going to tell you about their worries so this can be addressed? How will they feel safe to raise concerns?
- There also needs to be enhanced cleaning of the setting
  - See the government guidance on [cleaning in non-healthcare settings](#)
  - Places that are touched frequently should be cleaned very regularly (e.g. light switches, door handles, stair banisters, grab rails, lift buttons, kettle handle or hydroboil tap, fridge handle)
  - How is the setting going to be cleaned? Who will do this? Do they need extra training? Do you need to purchase additional cleaning products?
  - You will need to have a timetable for cleaning including the beginning and end of the day and more frequently for high touch points
- If anyone has symptoms of coronavirus (cough, high fever or loss of smell or taste) they shouldn't come to the setting – [they should stay at home for 7 days from symptom onset and order a test, and those they live with should stay at home](#)
  - How will you remind people not to come in if they have symptoms?
  - How will you support people to be able to stay away if they have symptoms, if they may worry about needing to work or accessing your services? Is there a way to do this from home instead?
  - How do you want people to inform you that they have symptoms and are staying at home?
  - What will you do if someone becomes symptomatic when they are at work?
- Can you ventilate your space by opening windows?
- The government is not advising that most people wear PPE beyond what they would normally have for their job – however, there is some evidence that using a simple cloth face covering can reduce the risk of infection in situations where it's hard to maintain a social distance, and some people may come to your setting wearing masks
  - Do you need a policy on the use of masks or face coverings and is this something you need to discuss with those who come to the setting?
  - It is really important that if people use masks or face coverings they do so safely. This means:
    - Wash hands before putting on
    - Don't touch the mask or your face while wearing it
    - When you take it off, dispose of it in waste or put in a plastic bag and wash your hands again
    - Do not put the mask on a worktop/chair – the mask or face covering will have lots of respiratory droplets concentrated on it and could smear this over places others will touch
  - Wearing gloves is not an effective way to prevent infection unless the person wearing the gloves has been trained to wash their hands before use, after use and not touch their face or cough into their hand whilst wearing the gloves (in this case it becomes exactly like not wearing gloves at all). Therefore day-long use of gloves should be discouraged

- The fewer contacts with other people everyone has per day, the lower the risk of spreading the virus. This is particularly important when it might be hard to maintain 2m social distancing. For example, in schools small children will be in a 'bubble' of 15 classmates and only see those classmates. This is also called 'cohorting'
  - Would a 'cohort' be possible in your setting? For example, in an office, have a team that always comes in on Tuesdays and Thursdays, and another team that come in on Mondays and Wednesdays, and the two groups do not overlap or meet each other
  - Or in a setting where you are providing care or services, can you make it so that the same workers always see the same clients, without crossover?
  - Do you normally have people who come to your setting but also others (e.g. agency or temporary workers)? Can you limit how much people crossover between settings?
- Coronavirus disproportionately affects older people, those from BAME backgrounds and those with underlying health conditions – how will you risk assess those who are coming to the setting to ensure that people are safe (which may include not having some people in the setting?)

## Section Two: If there is a positive case or an outbreak linked to your setting

It is possible that at some point someone who has visited your setting will either test positive for coronavirus, or be told that they are the contact of someone who has tested positive through the NHS Test and Trace system

[NHS Test and Trace: How it works](#)

[NHS advice: What to do if you've been in contact with someone who has coronavirus](#)

It is also possible that if one person with the infection comes to the setting, others at the setting catch it too and there is an 'outbreak' (two or more people with coronavirus infection) linked to the setting. **If you take action to prevent the spread of infection, this will greatly reduce the risk that there will be an outbreak in your setting**

Public Health from Luton Borough Council and from Public Health England will be there to help you if this happens, and risk assess what needs to be done, but it's important to start thinking about what you might need to do and how you would manage it.

If someone who has tested positive has come to the setting, other people at the setting may be 'contacts' of that person and told to self-isolate for 14 days. **To prevent the spread of infection, it will be really important to understand who in the setting would count as a contact.**

## Thinking about what would happen if there was a case in your setting

- With NHS Test and Trace the current guidance is that:
  - If someone develops symptoms they should isolate for 7 days and order a test. If they test positive they must continue to isolate, and will be contacted by the NHS Test and Trace service to ask them to identify their contacts who will also need to isolate in case they have become infected

- Contacts must isolate for 14 days from the onset of the case's symptoms, or 14 days from the day the positive test was taken if the case did not have symptoms
- A 'contact' is someone who was close to the case in the 48 hours before the case started having symptoms (or 48 hours before their test) and the 7 days afterwards
- 'Close to the case' means:
  - People the case lives with (household contact), have spent a lot of hours with in a house or sexual partner
  - Anyone they coughed on (for any length of time)
  - Anyone they spoke to face to face at less than 1m (for any length of time)
  - Anyone they stood less than 1m away from for more than 1 minute
  - Anyone they stood less than 2m away from for more than 15 minutes
  - Anyone they were in a car or other small vehicle with (even for a short journey)

- How will you know who someone had contact with in your setting?
  - Are there assigned desks or offices that would help you understand who was near who?
  - Is there any other way to know who someone had contact with?
  - Are staff going to know who they had contact with? Will they need to refer contact tracers to you for people's names or do they know who they work with? Do they need name badges?
  - Do you need to remind people using your setting to bear in mind who they've had contact with?
- Anyone the person who tested positive was in contact with will have to isolate for 14 days. How could this affect your workplace or service?
- Are there ways you can manage who people have contact with (e.g. cohorting, rigorous distancing) that will mean that not too many people have to be isolating at once?
- What is the plan if lots of people have to isolate?
- How can you avoid ever being in a situation where lots of key team members have to isolate at the same time?

Item	Your thoughts	Key actions you need to take
<b>Hygiene &amp; distancing</b>		
Do you have somewhere for people to wash or sanitize their hands as soon as they arrive? Is there a door or door handle they have to touch on the way to this, and can this be avoided, or regularly cleaned?		
Will people regularly be able to wash their hands during the day, e.g. after coughing?		
How will you remind people to wash their hands?		
How will 2 metre social distancing be maintained in your space?		
If people who come to the setting are worried that social distancing and hygiene isn't possible, how are they going to tell you about their worries so this can be addressed? How will they feel safe to raise concerns?		
How is the setting going to be cleaned? Who will do this? Do they need extra training? Do you need to purchase additional cleaning products?		
What are the points that are touched most often in your setting? How can this be avoided or how can they be kept clean?		
Can you ventilate the space by opening windows?		

<b>People with symptoms stay away</b>		
How will you remind people not to come in if they have symptoms?		
How will you support people to be able to stay away if they have symptoms, if they may worry about needing to work or accessing your services?		
How do you want people to inform you that they have symptoms and are staying at home?		
What will you do if someone becomes symptomatic when they are at work? How will you let other people using the space know what to do?		
<b>PPE</b>		
How will you make sure that everyone who needs PPE for their job will get access to it?		
Do you need a policy on the use of masks or face coverings and is this something you need to discuss with those who come to the setting?		
How will you remind people to use PPE safely and dispose of it safely without contaminating the shared space?		

<b>Risk assessment</b>		
Who coming to your space needs a risk assessment? Will there be people who are more vulnerable?		
Have you taken into account concerns from particular communities (e.g. BAME, those with underlying conditions)?		
Who do you need to share your risk assessment with?		
<b>Cohorting and restricting contacts</b>		
Can you reduce the number of different people each person is in contact with? For example having different set groups on different days?		
<b>Preparing for contact tracing</b>		
Are people who test positive who have come to the setting going to know who they had contact with? Will they need to refer contact tracers to you for people's names or do they know who they work with?		
How could this affect your workplace or service? Are there ways you can manage who people have contact with (e.g. cohorting, rigorous distancing) that will mean that not too many people have to be isolating at once?		
What is the plan if lots of people have to isolate?		
How will you communicate to those using the setting if someone has been there who tested positive?		