Standard Operating Procedure (SOP)
Covid-19 Prevention and incident/Outbreak Management
Council Offices & Workplaces

Version Number	Change made	Date
Draft 0.1	Drafted by Asset Management	July 20
Draft 0.2	MB revisions following initial Public Health review	10/8/20
Draft 0.3	H&S comments included	11/8/20
Draft 0.4	Public Protection comments added	12/8/20
Draft 0.5	Public Health comments included	13/8/20
Draft 0.6	Public Health further comments included H&S comments included	18/8 20 18/8/20
Draft 0.7	Revisions made following presentation to Silver/HPB	21/8/20
v1.0	Adopted by HPB	26/8/20
v1.1	Scope extended to include Council buildings open to the public	18/9/20
v1.2	Children Centres included	18/9/20
V1.3	Links, Contacts definition and template letters added from LCRC Resource Document for Workplaces Client's homes added to list of Settings for social care teams	10/11/20
V1.4	Updated extracts from the Workplace Resources Pack V2.1	11/01/21

This SOP summarises roles and responsibilities of individuals and agencies in the prevention of and response to outbreaks.   This SOP will be updated to reflect any changes/strengthening of arrangements, including lessons learned from responding to incidents/outbreaks (locally / regionally / nationally).

Settings include:
- Council offices
- Workplaces and other operational buildings (non-public) e.g depots
- Council buildings open to the public (children centres, libraries, MyPlace, Music School, registrars, crematorium and chapels), where not included in other SOPs
- Client's homes are included are to be treated as a workplace situation for social care and other teams accessing residents homes.

Oversight/implementation of SOP	
Bronze Group Ownership	
CLT lead	
Service Leads (LBH officers leading role in communicating with settings)	
Public Health lead officer	
Public Protection lead officer	
Health & Safety lead officer	
Who holds contact details (including OOH contact details for settings)?	

Data and reporting	
Data in CTAS and HPZone systems	LCRC / PHE
Reports (from CTAS and HPZone) provided to local authorities [DN timescales]	LCRC / PHE
Service Managers to advise oneSource Business Support re symptomatic / confirmed cases.	Service Managers
oneSource Business Support to record information centrally in a location accessible to Public Health Lead Officer(s).	oneSource Business Support

1. Prevention and early intervention

This section sets out actions required to reduce the risks of outbreaks in these settings.

	Actions	Responsible Organisation
1.1	Require Council staff to work from home unless attendance at the workplace is strictly necessary.	SLT, senior managers
1.2	Support extended remote working by providing relevant equipment from office settings.	Smart Working
1.3	Provide public/service users with access to online services where appropriate and practical to minimise physical attendance	HoS/Managers
1.4	Provide guidance to Council staff on undertaking risk assessment (role and individual):	LBH Health and Safety
1.5	Make infection prevention control training available to Council staff using the links below: Request password from	LBH Health and Safety
1.6	Require any member of staff proposing to return to the workplace to undergo an Individual Risk Assessment in advance – this is also a pre-requisite for new starters: Agency Workers should have an individual risk assessment undertaken by their employing agency and results shared with the Council if the agency worker is assessed to be in a high risk category Children Centres - Risk assessment of individual children with additional health needs / SEND to be considered upon recommencement of face-to-face services.	Line Manager LBH Early Help

1.7	• Ensure the building setting is Covid-secure, undertaking a building risk assessment and implementing recommendations to ensure infection control and maintenance of appropriate social distancing. • Where Children's Centres let out premises to other organisations (e.g. early years providers, maternity services, CYPS, WDP), be assured that those organisations have undertaken risk assessments, and that the centre's Covid-secure status is not compromised.	Asset Management (principal offices) Service-led for operational buildings via Service Lead
1.8	Targeted comms to staff based on: - Latest Government Guidance - GLA toolkit - Intranet content and video guide: Targeted comms to users (staff and families) of Children's Centres: - Localised messaging according to need (providing the information in key community languages)	LBH Comms
1.9	Adopt appropriate infection prevention control policies and procedures, covering for example: • Promoting awareness of infection prevention control among staff, contractors and the public, (where relevant) • Identifying groups of staff who work together and forming them into a cohort. • Maintaining a daily log of staff working in each cohort. • Discouraging staff from using public transport through facilitating other alternative and inexpensive means of travel. • Staff in public-facing positions should wear face coverings/visors in situations where protective screens are not practical and where government guidance requires that face coverings are worn: https://www.gov.uk/government/publications/face-coverings-when-to-wear-one-and-how-to-make-your-own/face-coverings-when-to-wear-one-and-how-to-make-your-own • Provide arrangements for all visitors, members of the public and contractors to use the contact-tracing app or sign in and to provide contact details to preserve integrity of Test and Trace. (link to be inserted to relevant Covid 19 intranet page) • Service users attending public buildings to be required to wear face coverings – Note: staff will not be expected to enforce compliance in order to avoid confrontation • Where contractors are engaged in buildings for essential works, be assured that those organisations have undertaken risk assessments, and that the covid-secure status is not compromised. • Where buildings are let/licenced out (in whole or part) to other organisations, be assured that those organisations have undertaken risk assessments, and that the covid-secure status is not compromised.	Service Lead Service Lead Line Manager FM or building manager (FM where works are managed by Corp. Landlord)
1.10	Monitoring and supervision of implementation of above measures and compliance with corporate procedures.	Service lead/LBH Health & Safety

1.11	Provide ongoing advice and guidance on new legislative and developing best practice concerning COVID secure measures.	LBH Health & Safety
1.12	Suitable isolation room/space to be identified within each setting covered by this SOP for temporary 'containment' of a symptomatic employee/child pending arrangement of transport home. Similarly, area to be identified within each setting as a suitable decant space pending any deep clean and sterile period afterwards Details set out in appendix to SOP	FM or Service Manager if building has no FM presence
1.13	Regular internal comms to remind staff of: - Working from home - Actions to take in the event of development of symptoms – including not attending the workplace if symptomatic - To isolate when a household member becomes symptomatic - To isolate when advised to do so by test and trace - How to arrange a test	Health & Safety/HR Communications

2. Incident Response

Situations:
This section sets out actions required in the event of the following concerns:

In this section:
- "Staff" may include:
    o LBH employees
    o Agency workers

    o External staff from other services delivered from the premises – Currently this includes maternity, CYPS, WDP and Early Years Providers.

- "Visitors" includes customers/service users, children, parents, contractors or any other non-staff visitors.

2.1. Staff member or visitor become symptomatic in a Council building

2.2. Single Case - staff member tests positive for Covid or the service is advised by Test & Trace of a service user testing positive (or several unconnected cases)

2.3. Potential Outbreak: two or more staff members and/or service users test positive and there is a potential link between

2.1	Staff member or visitor become symptomatic in a Council building	
	Actions	
2.1.1	Staff member should advise Line Manager if presenting symptoms	Staff member
2.1.2	Line manager relocates symptomatic staff member to isolation room within building (see 1.12 above and Appendix 1)	Line Manager
2.1.3	Staff member confirms arrangements for getting home: • Via own transport • Via arrangement to be collected by relative/associate from same household • Needs transport arranged Symptomatic staff member must avoid public transport or being taken home by a colleague In the event of a visitor becoming symptomatic on site, give appropriate advice to the visitor/service user/parent, including the need to return home, isolate and access a test (there is no requirement to use the isolation space identified within 1.12 above for visitors).	Staff Member with support from Line Manager
2.1.4	Symptomatic staff member needs to isolate at home, arrange a test and maintain isolation until test result is confirmed.	Staff member
2.1.5	Line manager notifies oneSource Business Support at of staff member/visitor reporting symptoms and confirms the location where the individual has been present:	Line Manager
2.1.6	oneSource Business Support cascade the notification to the following: • Service Lead • HR • Health and Safety • FM confirming employee's work location	oneSource Business Support
2.1.7	Line Manager to inform staff working in the vicinity of symptomatic colleague/visitor to be alert to symptoms, to continue to maintain hand and respiratory hygiene, and social distancing. Unless advised by Test and Trace service, individuals are not considered close contacts and so do not need to isolate. In the event that anyone develops symptoms, then to isolate and obtain a test.	Line Manager
2.1.8	oneSource Business Support to maintain records of notification (detail anonymised) in order to identify any coincidence of staff reporting symptoms and potential causal links (whether related to location, team etc)	oneSource Business Support

	oneSource Business Support to escalate to DPH in the event of any apparent complexity / escalation of issue.	
2.1.9	FM to isolate floor/office immediate environment preventing entry by others (appropriate signs, hazard tape etc) and direct the staff group to alternative work environment as identified in 1.12 above in consultation with Line Manager. This may involve use of a vacant floor/office(s) held for these scenarios.	FM (or Line Manager if the building has no FM present e.g. depot)
2.1.10	FM to arrange immediate deep clean of isolated area and any communal facilities likely to have been used by the employee (kitchen areas, toilet facilities, MFD etc). Where possible, areas to remain isolated for a minimum of 72 hours following deep clean. For public buildings, this may not be practical due to operational impact – buildings can re-open once the deep clean has been undertaken.	FM
2.1.11	FM arranges clean of the decant area once the displaced staff are relocated to their original work location	FM
2.1.12	Staff member confirms test result to Line Manager	Staff Member
2.1.13	Line Manager confirms outcome of test to oneSource Business Support at	Line Manager
2.1.14	oneSource Business Support cascade test result to: • HR Health and Safety • Head of Service	oneSource Business Support

2.2 Single case: Staff member tests positive for Covid, or the service is advised by Test & Trace of a visitor testing positive (or several unconnected cases)		
	Actions	
2.2.1	Staff member notifies line manager of positive test OR Childrens Centre is notified of positive test in a child OR Local authority is notified by Test & Trace of a positive case linked to a LBH setting involving an employee or a visitor then steps 2.1.2 onwards applies. DPH to advise employee's Line Manager	Staff member DPH
2.2.2	Manager/Line manager notifies oneSource Business Support at	Manager/Line Manager

	of positive test result and confirms the relevant work location.		
2.2.3	oneSource BS cascade the notification to the following: • Service Lead • HR • Health and Safety • FM, confirming employee's work location	oneSource Business Support	
2.2.4	Line manager to inform staff working in the vicinity to be alert to symptoms, to continue to maintain hand and respiratory hygiene, and social distancing. Unless advised by test and trace service, individuals are not considered close contacts and so do not need to isolate. In the event that anyone develops symptoms, then to isolate and obtain a test.	Line Manager	
2.2.5	Where the confirmed case is an employee, Line Manager to liaise with the individual confirmed case to ensure that close contact details are provided to Test and Trace, and where appropriate engage with Test and Trace to provide information direct (i.e. if staff member has visited clients / worked in close contact with LBH colleagues and other agencies).	Line Manager	
2.2.6	oneSource Business Support to maintain records of notification (detail anonymised) in order to identify any coincidence of staff reporting symptoms and potential causal links (whether related to location, team etc) oneSource Business Support to identify workplace contacts (see contacts section) and send them home to self-isolate for 14 days. oneSource Business Support to escalate to DPH in the event of any apparent complexity / escalation of issue.	oneSource Business Support	
2.2.7	FM to isolate floor/office immediate environment preventing entry by others (appropriate signs, hazard tape etc) and direct the staff group to alternative work environment as identified in 1.11 above in consultation with Line Manager. This may involve use of a vacant floor/office(s) held for these scenarios. (Note – steps 2.2.6 – 2.28 do not need to be followed if a deep clean was undertaken when the same individual reported symptoms, prior to isolating in 2.1 above)	FM (or Line Manager if the building has no FM present e.g. depot)	
2.2.8	FM to arrange immediate deep clean of isolated area and any communal facilities likely to have been used by the employee/service user (kitchen areas, toilet facilities, MFD etc). Where possible, areas to remain isolated for a minimum of 72 hours following deep clean. For public buildings, this may not be practical due to operational impact – buildings can re-open once the deep clean has been undertaken.	FM	

2.2.9	FM arranges clean of the decant area once the displaced staff are relocated to their original work location	FM
2.2.10	oneSource Business Support to escalate to DPH in the event of any apparent complexity / escalation of issue	oneSource Business Support
2.2.11	Health & Safety to identify any potential RIDDOR implications and follow up as necessary.	Health & Safety

2.3 Potential Outbreak: two or more staff members and/or service users test positive and there is a potential link between		
	Actions	
2.3.1	oneSource Business Support, with the support of Public Protection to continually monitor all single cases and identify any potential connections between cases. OR Receive notification of positive laboratory result from Test and Trace level 2	oneSource Business Support DPH LCRC (level 1)
2.3.2	LCRC will advise the DPH of setting-related outbreaks, including LBH workplaces	LCRC
2.3.3	DPH <u>may</u> choose to request a mobile testing unit to attend, which LBH Emergency Planning team would organise	Emergency Planning
2.3.4	LCRC or DPH <u>may</u> convene an Incident Management Team, if considered necessary	LCRC/DPH
2.3.5	Whether or not an Incident Management Team is convened, the local authority will undertake the following • communications for elected members • any further communications necessary including monitoring social media / advising settings on messaging / responding to press enquiries	LBH Comms / DPH
2.3.6	Support service settings with communications for staff	Service Lead/DPH / Comms
2.3.7	Liaise with CCG and health providers, where appropriate. In the event of a service/building closure in response to a community outbreak, relevant stakeholders to be advised, e.g. Vaccination UK, NELFT	DPH
2.3.8	LCRC to recommend ongoing control measures	LCRC
2.3.9	Reinforce prevention messages	DPH/ Communications
2.2.10	Health & Safety to identify any potential RIDDOR implications and follow up as necessary.	Health & Safety

Links

Symptoms	https://www.nhs.uk/conditions/coronavirus-covid-19/symptoms/
Testing	https://www.nhs.uk/conditions/coronavirus-covid-19/testing-and-tracing/nhs-test-and-trace-if-youve-been-in-contact-with-a-person-who-has-coronavirus/
Cleaning	https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings

Contacts and contact tracing

Due to COVID-19 being a new disease, definitions and actions are subject to change. Below is the current guidance however please regularly check the links below for updates on definitions and actions.
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

What is meant by a 'contact'
A 'contact' is a person who has been close to someone who has tested positive for COVID-19 anytime from 2 days before the person was symptomatic up to 10 days from onset of symptoms (this is when they are infectious to others). For example, a contact can be:

Direct contact:
- Anyone who lives in the same household as a case or has stayed overnight with them during their infectious period
- Sexual Partners
- Anyone who has had face to face contact with a case, for any length of time, including being coughed on or talked to
- Anyone who has been within 1 meter of a case for one minute or longer

Proximity contact:
- Anyone who has been within two meters of a case for more than 15 minutes
- Anyone who has travelled in a small vehicle with a case
- A person who has travelled in a small vehicle with someone who has tested positive for COVID-19 or in a large vehicle or plane near someone who has tested positive for COVID-19
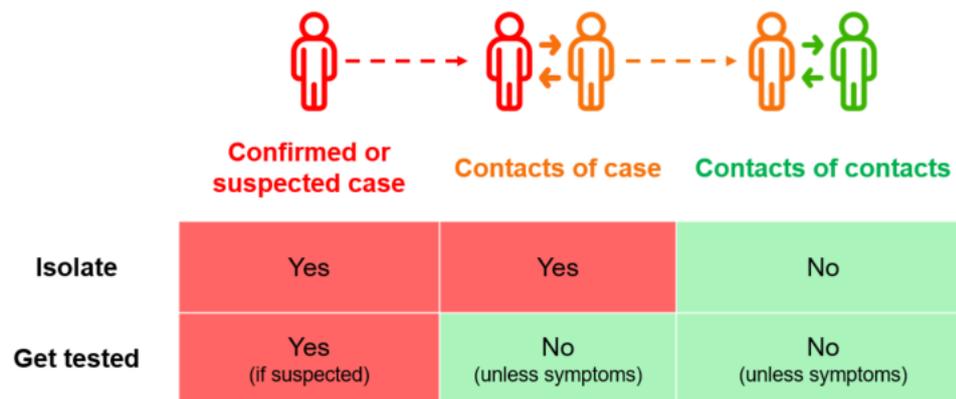
Note on Perspex screens
If someone with COVID-19 has been close to another person but was entirely separated from them by a Perspex screen, this person would NOT be considered a contact (provided that there has been no other contact with the infected person in line with the definitions in the bullet points above).
Contacts of a person who has tested positive for COVID-19 must self-isolate at home because they are at risk of developing the infection themselves in the next 10 days and could spread the virus to others before the symptoms start.

Contacts of contacts do not need to self-isolate. This means that household members of employees who are self-isolating because they are contacts of a case do not need to self-isolate themselves. However, if the contact develops any COVID-19 symptoms during their 10-day isolation period, their household contacts must start their own 10-day self-isolation period.

Who should isolate?
The following chart gives a broad overview of who should isolate and get tested following a confirmed case of COVID-19 in your workplace

	Confirmed or suspected case	Contacts of case	Contacts of contacts
Isolate	Yes	Yes	No
Get tested	Yes (if suspected)	No (unless symptoms)	No (unless symptoms)

Contacts of confirmed cases should NOT take a test unless they become symptomatic

If a contact does take a test:

If positive – Isolate for 10 days from date of test

If negative – CONTINUE to isolate for 10 days from last contact with case

Follow the guidance in this document closely.