

COVID-19:

Employee Health and Wellbeing: Advice to employees.

Keeping Safe – Protecting You. **Protecting Others.**

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Version 1.6

The COVID-19 (Coronavirus) outbreak is a very dynamic and fast evolving situation so please ensure you take the time to read the updates and official notifications .

Up to date information can also be found on:

The MFT Staff COVID-19 Resource Area:

<https://intranet.mft.nhs.uk/content/important-information-about-covid-19-coronavirus>

The **Employee Health & Wellbeing** section of the intranet contains a wide array of links and information relating to COVID-19 and is being updated on a daily basis:

https://intranet.mft.nhs.uk/content/corporate-services/employee-health-and-wellbeing/untitled-page_8

The **HR COVID19 Workforce** for any HR related information:

<https://intranet.mft.nhs.uk/content/corporate-services/human-resources/covid19>

The **Infection Prevention & Control** section of the intranet contains up to date information regarding IPC developments: <https://intranet.mft.nhs.uk/content/hospitals-mcs/clinical-scientific-services/infection-control>

The **National NHS Website** has a variety of useful information for members of the public regarding the outbreak: <https://www.nhs.uk/conditions/coronavirus-covid-19/>

Public Health England provide guidance about coronavirus (COVID-19) for health and social care settings, other non-clinical settings, and for the general public:

<https://www.gov.uk/government/collections/coronavirus-covid-19-list-of-guidance>

For suspected symptoms of coronavirus please visit the **NHS**

111 website: <https://111.nhs.uk/covid-19>

The **Learning Hub** also has a Human Resources section that can be accessed from home

<https://learninghub.mft.nhs.uk>. The Human Resources Information Portal contains information about EHW services as well as risk assessment.

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Section1: COVID-19 symptoms and when and how long to self-isolate.

1.1 Symptoms of Coronavirus

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

- **high temperature** – this means you feel hot to touch on your chest or back (you do not need to measure your temperature)
- **new, continuous cough** – this means coughing a lot for more than an hour, or 3 or more coughing episodes in 24 hours (if you usually have a cough, it may be worse than usual)
- **loss or change to your sense of smell or taste** – this means you've noticed you cannot smell or taste anything, or things smell or taste different to normal

There are also secondary symptoms associated with COVID-19 and these include:

- Fatigue
- Headache
- Blocked or runny nose
- Sore throat
- Diarrhoea

If you have one or more of these symptoms, however mild, stay at home. Please report your absence from work as soon as you develop symptoms (even if you are not expected back in work for a few days).

Reporting your absence

Where the **Absence Manager** system is in place, call 0330 808 0260 (have your assignment number to hand) to report your absence.

Manchester Local Care Organisation Staff should undertake local absence reporting arrangements.

Your anticipated return to work date will be day 11 following onset of symptoms.

Testing:

Reporting your absence from work will trigger a call from the Attendance Team who will be in touch to discuss arranging a test.

You do not need to call NHS 111 to go into self-isolation. If you feel you cannot cope with your symptoms at home, or your condition gets worse, then use the [NHS 111 online](#) coronavirus service. If you do not have internet access, call NHS 111. For a medical emergency dial 999.

You should continue to practice good hygiene practices to stop the spread of germs. More information about this can be found on the NHS.UK website: <https://www.nhs.uk/conditions/coronavirus-covid-19/self-isolation-and-treatment/>

1.2 Someone in my household may have Coronavirus

For anyone in the household who starts displaying symptoms, they need to stay at home for 10 days from when the symptoms appeared.

All other household members who remain well must stay at home and not leave the house for **14 days**. The 14-day period starts from the day when the first person in the house became ill. For anyone else in the household who starts displaying symptoms, they need to stay at home for 10 days from when their symptoms appeared, regardless of what day they are on in the original 14 day isolation period.

The reason for this is that it is likely that people living within a household will infect each other or be infected already. Staying at home for 14 days will greatly reduce the overall amount of infection the household could pass on to others in the community.

If your household member feels they cannot cope with their symptoms at home, or their condition gets worse, then use the [NHS 111 online](#) coronavirus service. If you do not have internet access, call NHS 111. For a medical emergency dial 999

Reporting your absence from work:

If a household member starts to display symptoms, you must stay at home.

Where the **Absence Manager** system is in place, call 0330 808 0260 (have your assignment number to hand) to report your absence.

Manchester Local Care Organisation Staff should undertake local absence reporting arrangements.

Your anticipated return to work date will be day fifteen following onset of your household member's symptoms.

Testing:

Reporting your absence from work will trigger a call from the Attendance Team who will be in touch to discuss arranging a test for the symptomatic household member.

1.3 Contact with a patient or colleague who has now been tested positive for coronavirus.

You remain fit for work unless you develop symptoms (see section 1) in which case you will need to self-isolate for 10 days as per government guidance. If you have been contacted by the national Contact Tracing Team or through the Trust's test and trace then please follow the guidance on Test and Trace.

1.4 Previous Positive Test

I have previously tested positive for coronavirus (COVID-19) and am having another episode of symptoms, do I need to self-isolate again?

Government advice (updated 28/05/2020) states that if you have tested positive for coronavirus (COVID-19), you will probably have developed some immunity to the disease but it cannot be guaranteed that will happen in all cases, nor exactly for how long that will last.

If you have previously tested positive but develop symptoms again, you must self-isolate for at least 10 days from onset of symptoms and be tested. If you live in a household, all other household members must stay at home for 14 days.

If you are concerned about your new possible coronavirus (COVID-19) [symptoms](#), use the [NHS 111 online coronavirus \(COVID-19\) service](#). If you do not have internet access, call NHS 111. For a medical emergency dial 999.

1.5 Multiple Episodes

What do I do if I have another episode of coronavirus (COVID-19) symptoms after the end of my first period of self-isolation or household isolation

If you develop new coronavirus (COVID-19) symptoms at any point after ending your first period of staying at home (self-isolation or household isolation) then you must follow the same guidance on [self-isolation](#) again.

This means you must stay at home for at least 10 days from when your symptoms started if you live alone and arrange to have a test. If you live in a household, you must stay at home for at least 10 days from when your symptoms started, arrange a test for yourself, and all other household members must stay at home for 14 days.

This will help to ensure that you are continuing to protect others within your household and in your community by minimising the amount of infection that is passed on.

1.6 Do I Need an Isolation Notes (Fit Note)

If you are off work for over seven days because you are self-isolating, either with COVID-19 symptoms or because you live with someone who has symptoms, you can now get an 'Isolation Note' via the NHS website. This means that you do not need to contact your GP to get a fit note (sometimes known as a medical certificate). For COVID-19 absences an isolation note will be accepted as an alternative.

The link to get an isolation note can be found [here](#). The isolation note will be provided via e-mail. If you do not have a personal e-mail address, please use [webmail](#) to access your MFT e-mail account or use your line manager's e-mail address. You should email your isolation note to AskAbsenceManager@mft.nhs.uk.

1.7 Returning to work following self-isolation

If you have had symptoms of coronavirus (COVID-19), then you may end your self-isolation after 10 days (from when you first became ill) and return to work on day 11 if you do not have symptoms other than cough or loss of sense of smell/taste. Your temperature should have returned to normal for a minimum of three days prior to your return.

After 10 days, if you just have a cough or anosmia (a loss of, or change in, your sense of taste or smell), you do not need to continue to self-isolate. This is because a cough or anosmia can last for several weeks once the infection has gone.

Keep self-isolating if you have any of these symptoms after 10 days:

- a high temperature or feeling hot and shivery
- a runny nose or sneezing
- feeling or being sick
- diarrhoea
- loss of appetite

Only stop self-isolating when these symptoms have gone.

If you have diarrhoea or you're being sick, stay at home until 48 hours after they've stopped.

If you continue to feel unwell and have not already sought medical advice, you should use the [NHS 111 online coronavirus \(COVID-19\) service](#). If you do not have internet access, call NHS 111. For a medical emergency dial 999.

1.8 Ending Household isolation

If you are isolating due to a household member(s) having symptoms / a positive test and you remain asymptomatic, you must self-isolate for fourteen days from when the first member of the household developed symptoms. You can return to work on day fifteen.

If during the fourteen days, you develop symptoms, please follow the advice in section 1

Section 2: Vulnerable Workers

2.1 Risk Assessment

The purpose of the COVID-19 risk assessment is to identify who might be harmed and how, review what you are already doing to control the risks and what further action may be needed to control the risks.

All employees must complete a COVID-19 Self Risk Assessment Form which can be found on the [Employee Health and Wellbeing Intranet](#) pages. This helps identify who may be at increased risk compared with the general population from complications should they contract the COVID-19 virus.

If the assessment indicates you fall into the vulnerable risk group then a full COVID-19 risk assessment with your manager needs to be completed irrespective of your work area.

Please note risk assessments (new or reviewed) must be updated in Absence Manager before the pause of shielding on 1 August 2020.

2.2 Underlying Health Conditions

I have an underlying health condition – can I still be in work?

We are advising those who are at increased risk of severe illness from coronavirus (COVID-19) to be particularly stringent in following social distancing measures.

Trust guidance requires managers to carry out a risk assessment. An Individual self-assessment pre-risk assessment form is available from the [Employee Health & Wellbeing](#)

[Intranet](#) site for the employee to complete prior to meeting with their manager to undertake a risk assessment. Managers have been issued with risk assessment guidance and this can also be found on the [Employee Health & Wellbeing Intranet](#) site.

The guidance states:

“Risk assessments will be arranged for staff who meet the government definition for social distancing to understand their circumstances. The risk assessment will identify whether you need temporary redeployment to work in another area or if applicable what work could be undertaken remotely and what support you would require during this period.

If the risk assessment outcome is that you are unable to undertake any form of work, your absence must be recorded through the Absence Manager system by the individual. You will be paid full pay with enhancements (based on AfC average over last three months worked).

This group includes those who are:

- aged 70 or older (regardless of medical conditions)
- under 70 with an underlying health condition listed below (ie anyone instructed to get a flu jab as an adult each year on medical grounds):
 - chronic (long-term) respiratory diseases, such as [asthma](#), [chronic obstructive pulmonary disease \(COPD\)](#), emphysema or [bronchitis](#)
 - chronic heart disease, such as [heart failure](#)
 - [chronic kidney disease](#)
 - chronic liver disease, such as [hepatitis](#)
 - chronic neurological conditions, such as [Parkinson’s disease](#), [motor neurone disease](#), [multiple sclerosis \(MS\)](#), a learning disability or cerebral palsy
 - [diabetes](#)
 - problems with your spleen – for example, [sickle cell](#) disease or if you have had your spleen removed
 - a weakened immune system as the result of conditions such as [HIV and AIDS](#), or medicines such as [steroid tablets](#) or [chemotherapy](#)
 - being seriously overweight (a body mass index (BMI) of 40 or above)
- those who are pregnant

Note: there are some clinical conditions which put people at even higher risk of severe illness from COVID-19. If you are in this category, NHS England or your GP will have contacted you with advice about the more stringent measures you should take in order to keep yourself and others safe (see section 2.5 for more information). For now, you should rigorously follow the social distancing advice in full.

For more information on social distancing, also see the following advice from the Government.

<https://www.gov.uk/government/publications/staying-alert-and-safe-social-distancing>

2.3 Pregnancy

Following the updated guidance (31st July 2020) from the Royal College of Obstetricians and Gynaecologists for pregnant healthcare workers, the current advice is as follows.

In light of the limited evidence, pregnant women of any gestation should be offered the choice of whether to work in direct patient-facing roles during the COVID-19 pandemic. This choice should be respected and supported by the Trust. Risk assessment should explore suitable alternative duties. This is in line with the national guidance that workers, including healthcare professionals, who are also identified by the Government as vulnerable to COVID-19 should be able to participate in their own risk assessment.

Choices for pregnant healthcare workers prior to 28 weeks' gestation

Pregnant healthcare workers should only be supported to continue working if the risk assessment advises that it is safe for them to do so. This means that managers should remove any risks (that are greater in the workplace than to what they would be exposed to outside of the workplace), or else they should be offered suitable alternative work. This should be with the agreement of the individual and should the employee not wish to continue in a patient facing role it is their right to advise this and they should be relocated to a non-patient facing role.

Some working environments (e.g. operating theatres, respiratory wards and intensive care/high dependency units) carry a higher risk of exposure to the virus for all healthcare staff, including pregnant healthcare workers, through the greater number of aerosol-generating procedures (AGPs) performed. When caring for suspected or confirmed COVID-19 patients, all healthcare workers in these settings are recommended to use appropriate PPE. Where possible, pregnant healthcare workers are advised to avoid working in these areas with patients with suspected or confirmed COVID-19 infection.

Advice for pregnant healthcare workers after 28 weeks gestation, or with an underlying health condition

For pregnant healthcare workers from 28 weeks' gestation, or with underlying health conditions such as heart or lung disease at any gestation, a more precautionary approach is advised. Healthcare workers in this category should be recommended to stay at home. Consideration should be given to both how to redeploy these staff and how to maximise the potential for homeworking wherever possible.

Staff in this risk group who have chosen not to follow government advice and attend the workplace must not be deployed in roles where they are working with patients. Services may want to consider deploying these staff to support other activities such as education or training needs (e.g. in IPC or simulation). These measures will allow many pregnant healthcare workers to choose to continue to make an active and valuable contribution whether at home or in the workplace, until the commencement of their maternity leave.

An Individual self-assessment pre-risk assessment form is available from the [Employee Health & Wellbeing Intranet](#) site for the employee to complete prior to meeting with their manager to undertake a risk assessment. Managers have been issued with risk assessment guidance and this can also be found on the [Employee Health & Wellbeing Intranet](#) site.

The guidance states:

“Risk assessments will be arranged for staff who meet the government definition for social distancing to understand their circumstances. The risk assessment will identify whether you need temporary redeployment to work in another area or if applicable what work could be undertaken remotely and what support you would require during this period.

If the risk assessment outcome is that you are unable to undertake any form of work, your absence must be recorded through the Absence Manager system by the individual. You will be paid full pay with enhancements (based on AfC average over last three months worked). For pregnant workers this will cease when maternity leave commences, at which point the normal maternity leave process will commence which will ensure that staff on maternity leave are paid correctly.”

On this basis, it is advised you liaise with your manager regarding your requirements.

Further information on this subject can be found by visiting: <https://www.rcog.org.uk/>

2.4 Black, Asian and Minority Ethnic (BAME)

A risk assessment needs to be completed. An Individual self-assessment pre-risk assessment form is available from the [Employee Health & Wellbeing Intranet](#) site for the employee to complete prior to meeting with their manager to undertake a risk assessment. Managers have been issued with risk assessment guidance and this can also be found on the [Employee Health & Wellbeing Intranet](#) site.

2.5 I live with a vulnerable person

Front-line staff may worry about coming home and putting people they live with or care for at risk. This is the advice from Public Health England and should apply to anyone living with a vulnerable person: <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-you-have-a-vulnerable-person-living-with-you>

We understand that it will be difficult for some people to separate themselves from others at home. You should do your very best to follow this guidance and everyone in your household should regularly wash their hands, avoid touching their face, and clean frequently touched surfaces.

2.6 Shielding

Shielding was a measure to protect people who are clinically extremely vulnerable by minimising all interactions between these individuals and other members of the community.

People falling into this extremely vulnerable group include:

1. Solid organ transplant recipients.
2. People with specific cancers:
 - people with cancer who are undergoing active chemotherapy
 - people with lung cancer who are undergoing radical radiotherapy
 - people with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment
 - people having immunotherapy or other continuing antibody treatments for cancer
 - people having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors
 - people who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs
3. People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe COPD.
4. People with rare diseases and inborn errors of metabolism that significantly increase the risk of infections (such as SCID, homozygous sickle cell).
5. People on immunosuppression therapies sufficient to significantly increase risk of infection.
6. Women who are pregnant with significant heart disease, congenital or acquired.
7. Other people who have also been classed as clinically extremely vulnerable, based on clinical judgement and an assessment of their needs. GPs and hospital clinicians have been provided with guidance to support these decisions

The guidance for the clinically extremely vulnerable is that shielding has been paused. This means:

- you do not need to follow previous shielding advice
- you can go to work as long as the workplace is [Covid-secure](#), but should carry on working from home wherever possible
- you can go outside as much as you like but you should still try to keep your overall social interactions low
- you can visit businesses, such as supermarkets, pubs and shops, while keeping 2 metres away from others wherever possible or [1 metre, plus other precautions](#)
- you should continue to wash your hands carefully and more frequently than usual and that you maintain thorough cleaning of frequently touched areas in your home and/or workspace

For practical tips on staying safe, see the guidance on [how to stay safe outside your home](#).

If an employee is returning to the work place then managers will be required to undertake [risk assessment](#) and consider what changes may be needed to their work area to make it COVID secure. The Trust has developed guidance for employees and managers and this can be found on the [COVID-19 Workforce intranet site](#) under the section **Guidance for Employees and Line Managers** and is entitled *Shielding and Clinically Vulnerable Employees*. There is also information on the Working Safely Information Portal on the Learning Hub.

Government guidance states that you could be advised to shield again if the situation changes and there is an increase in the transmission of COVID-19 in the community. Your name will be kept securely on the shielded patient list by NHS Digital and they will write to you if the advice changes.

Section 3 Testing

Antigen testing is used to determine whether you currently have COVID-19 by using a nose and throat swab to detect RNA (Ribonucleic acid).

Antibody testing detects whether you have been exposed to COVID-19 at some point in the past.

3.1 Antigen Testing for NHS Staff

The Trust operates a drive through testing centre to provide COVID19 antigen testing for employees or members of their household to support the COVID 19 response. Testing is for employees who:

- Are currently absent from work due to symptoms or isolating due to a member of their household having symptoms.
- Have been contacted by the National Contact Tracing Team because you have been identified as being in contact with a confirmed case of COVID-19.
- Have been asked to self-isolate through their hospital/division's internal Test & Trace process

Symptomatic testing:

As the Attendance Team has now been stepped down managers now need to complete a short testing assessment with the employee before making a referral for a test.

An interactive online tool is available for managers to complete the assessment, it will work on any PC or Smart Device: [access the Online Tool here](#)

If you have no access to a computer during the call you can download a PDF version of the Assessment Tool here: [access the Offline Tool here](#)

The interactive assessment tool advises managers on next steps, including the test booking process. Where managers identify that an employee needs a test, they must then refer the employee to the Testing team via email workforce.helpdesk@mft.nhs.uk (**after completing the assessment**). A small test booking service will continue to operate to process these referrals.

If the individual does not work for directly for MFT and does not have an employee number please clearly state the nature of their affiliation to the Trust.

A FAQ document has been developed by the Workforce Attendance team which gives answers to some more common queries relating to testing and the assessment process: [access the FAQ here](#)

Asymptomatic Testing:

Testing of asymptomatic employees in work is currently only taking place in specific areas as identified by the senior management team. If this is happening in your area, employees will be contacted by their management team if there is a need for them to attend for testing.

3.2 Antibody Testing

Antibody testing is a test to see whether you have been exposed to COVID19 and developed antibodies. No further action is required by an employee that has had an antibody test. Irrespective of the test results, staff should continue to practice social distancing, safe systems of work and continue to wear PPE if this has been identified as appropriate in their work environment.

If the staff member becomes symptomatic irrespective of the result of their antibody test, they should follow the guidance in section 1.1

3.3 Test and Trace

Internal Test & Trace

The Trust is undertaking its own internal Test & Trace process in order to identify any employees who may have been exposed to COVID-19 whilst in work. The MFT Local COVID Test and Trace Protocol can be found on the [MFT Staff COVID-19 Resource Area](#).

If an employee is identified as having been at risk of exposure (following risk assessment) they will be asked to self-isolate by the relevant operational manager for their work area. The

employee should then begin their period of self-isolation and report their absence via absence manager or any local reporting procedure if this is not available.

Managers will then contact their employees in self-isolation to arrange an antigen test (see section 3).

National Test & Trace

A national Test & Trace programme is operated by Public Health England which investigates positive test results for all members of the community and attempts to trace individuals who may have been exposed due to close contact with the person.

If the national Contact Tracing Team contact you or you have had notification of being a contact with a COVID-19 case by the Trust, you should go home (if you are in work) and stay away from work until you have had the results from a COVID19 test.

You will need to:

- Report through Absence Manager
or
- If your normal absence management reporting is different, please report to your line manager.

Managers will then contact their employees in self-isolation to arrange an antigen test (see section 3).

Test & Trace – Results and Outcomes

The outcome of the test will determine next steps:

If the test result is **negative** you will be advised to continue to self-isolate for 14 days as per the NHS Test and trace guidance.

If you develop symptoms at any time during the self-isolation, please phone absence manager on 0330 808 0260 (or your line manager if your normal absence management reporting is not through absence manager) to update the reason for your absence. You will then be contacted and offered another COVID-19 test.

If your test is **positive** and you remain asymptomatic after 10 days isolation, you can return to work on day 11.

Section 4 Psychological Support

The coronavirus (COVID19) outbreak is going to have an impact on everyone's daily lives. Everyone reacts differently to events and changes in the way that we think, feel and behave vary between different people and over time. It's important that you take care of your mind as well as your body and to get further support if you need it. The Trust has a number of resources to offer staff including:

4.1 Psychological Wellbeing Support Services - #TeamMFT

Practical and psychological guidance and resources on looking after the physical and mental wellbeing of individuals and their colleagues can be found on the [Employee Health and Wellbeing Intranet](#) site.

4.2 Employee Assistance Programme

The Trust has an independent Employee Assistance Programme (EAP) which employees can access in confidence 24 hours a day, every day. The EAP is provided by an external provider called Health Assured and can be contacted by phoning 0800 0 282 047 or via the website www.healthassuredeap.co.uk. (Username: MFT Password: MFT) The EAP can provide emotional support (including counselling) as well as practical advice on a range of topics. More information with regards to the counselling service can be found on the [Employee Health and Wellbeing](#) intranet site.