

NHS Wales

COVID – 19 (Coronavirus)

Frequently Asked Questions for NHS Managers and Employers

FAQs up to date as at 15.00, 19 March 2020

Background

The situation with the COVID – 19 (coronavirus) is a fast moving and developing issue. You will have seen the specific responses from Welsh Government and Public Health Wales raising awareness regarding how individuals can protect themselves and others from the virus and these will continue to be revised and updated in the light of our developing understanding of the situation.

There is delicate balance to strike in relation to ensuring that we maximise the availability of staff whilst at the same time supporting the control of the spread of this virus and safeguard the health and wellbeing of staff. There is an expectation that organisations take appropriate and proportionate action to support staff in their organisational responses and communications which do not inadvertently work against this approach and which provide a perverse incentive for individuals to attend work when they shouldn't.

We are working with colleagues across Welsh Government and with trade union partners and UK colleagues to provide ongoing clarity in this area to ensure that our advice, guidance and support is joined up to ensure that there is ongoing consistent advice in relation to wider aspects on employment and management responses. Likewise, the development of plans and approaches at local level should be made in partnership, wherever possible.

The following FAQs are based on a few overarching principles which need to be borne in mind, as follows: -

This is an ongoing and developing situation where many decisions will have to be made on an immediate basis. Whilst this set of FAQs sets out some of the areas where we can provide guidance and advice, we will not be able to cover everything. The key message is that managers will be supported to manage during this period in the decisions which they make which should be in line with this guidance, but we would encourage managers to make proportionate judgements as the specific circumstances present themselves and in making these decisions to follow appropriate assessment of risk;

- Individuals with symptoms, or who have been advised to self-isolate will be expected to remain at home and away from the workplace;
- The health and wellbeing of individual staff and patients is of paramount importance.

FAQs

Infection Control

Q1. What should we do where individuals have been advised to self-isolate to prevent onward transmission?

A1. Given the significance of this as a control of infection issue we need organisational responses, across NHS Wales, to support the intent of this approach and to enable and facilitate individuals doing the right thing when considering self-isolation. Accordingly, it has been agreed that any self-isolation absence in the interests of control of infection (household isolation) will be disregarded in respect of the cumulative absence and triggers which operate within the Managing Attendance at Work Policy. These absences will be treated as medical exclusion and will be paid at full pay. In these circumstances, the individual will not be required to provide a Fit Note as the absence will be authorised absence.

Where individuals self-isolate for 7 days with symptoms this will be classed as normal sickness absence but will also be disregarded in respect of cumulative absence and triggers which operate within the Managing Attendance at Work Policy.

Any planned annual leave which coincides with this period of self-isolation will be reinstated.

Q2. What should individuals with symptoms be advised to do?

A2. Please refer to Public Health Wales advice <https://phw.nhs.wales/topics/latest-information-on-novel-coronavirus-covid-19/>

Individuals showing symptoms (Fever (37.8 degrees centigrade or above, Recent cough/ chest tightness, Shortness of breath) must not attend work and should self-isolate for 7 days. Symptomatic employees would be considered sick in line with the Managing Attendance at Work policy. Symptomatic individuals should not return to work until fully recovered.

After 7 days of self-isolation, people who feel better and no longer have a high temperature can return to their normal routine. If they have not had any signs of improvement after 7 days and have not already sought medical advice, they should use NHS111 online (people should only call NHS111 if they cannot get online) before they leave their home or let visitors in.

Cough may persist for several weeks in some people, despite the coronavirus infection having cleared. A persistent cough alone does not mean someone must continue to stay at home for more than 7 days.

Q3. A member of my household is displaying symptoms, what should I do?

A3. You and all members of the household should self-isolate for 14 days.

Please refer to the Public Health Wales advice, link below: -

<https://phw.nhs.wales/topics/latest-information-on-novel-coronavirus-covid-19/>

Q4. What support is there for individuals now that schools have closed or if an individual has to look after a child or dependant who has been advised to self-isolate because they are in an at risk category?

A4. You are entitled to time off work to help someone who depends on you (a “dependant”) in an unexpected event or emergency. This would apply to situations to do with Covid-19. The [All Wales Special Leave Policy](#) would apply in these circumstances and may be a combination of Time off in lieu (TOIL) / unpaid / annual leave.

Consideration will be given to individual caring responsibilities and the impact that any changes will have on the organisation’s required capacity during the pandemic.

Managers should be as supportive and as flexible as possible in relation to carers leave requests, given the exceptional circumstances. In respect of the longer term support for the changed circumstances e.g. school closures, a change to working arrangements such as working a different combination of shifts which can be organised around childcare, working from home, change of hours etc, should all be considered in consultation with your line manager.

Q5. What if an individual becomes unwell at work and develops the symptoms?

A5. Please refer to Public Health Wales advice <https://phw.nhs.wales/topics/latest-information-on-novel-coronavirus-covid-19/>

If someone becomes unwell, they should:

- *get at least 2 metres (7 feet) away from other people*
- *go to a room or area behind a closed door, such as a sick bay or staff office*
- *avoid touching anything*
- *cough or sneeze into a tissue and put it in a bin, or if they do not have tissues, cough and sneeze into the crook of their elbow*
- *use a separate bathroom from others, if possible*

The unwell person should be advised to go home and self-isolate.

Q6. Do I need to wear a face mask?

A6. It is not necessary to wear a face mask if you are well.

Face masks are only of any use if they have been properly fitted to the wearer and “fit-tested”. Should you be required to care for patients with suspected or confirmed cases of COVID-19, you will be trained in appropriate infection prevention measures – including the correct use of PPE. Please see advice <https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control>

Q7. If individuals are well enough to work from home (but in self-isolation) what will their working circumstances be?

A7. Individuals in self-isolation will be categorised as being “medically excluded” from work. In these circumstances they should be encouraged to work if they are in a position to work remotely. If an individual’s role prevents them from working from home, then the circumstances of the medical exclusion is that it will be on authorised absence, they will be paid full pay and they would not be expected to work back any of the time off. In addition, we would expect individuals to fully comply with any public health advice. Further advice may be provided around how individuals who are not self-isolating in such situations can contribute more widely in supporting their communities.

Q8. Will healthcare workers be considered as a priority for testing for COVID-19?

A8. Public Health Wales have considered this matter with WG and have determined that keeping healthcare workers off work for 7 days based on symptoms whilst pending a negative result through isolation only, will be detrimental to the safe running of the service compared to providing negative result at day 2 or 3 to allow them to return to work. Therefore, based on careful risk assessment, healthcare workers who work in the following areas will be considered for testing.

- a. Acute Medical Assessment Units*
- b. Emergency Departments*
- c. Critical Care Units/Intensive Care Units*
- d. Primary Care*
- e. Emergency Medical Services (EMS) frontline NHS Ambulance staff.*

Although a negative test does not rule out infection with COVID-19, it provides a basis for early return of healthcare workers from self-isolation to support the running of the service. Also, it will allow for healthcare workers who test positive and who recover from the infection to be redeployed to care for COVID-19 patients during the peak of outbreaks.

Allaying Staff Fears

Q9. What arrangements will be put in place for the provision of Personal protective equipment (PPE) for staff?

A9. PPE is used to protect the user against health or safety risks at work. PPE is used as a last resort when there are risks that cannot be adequately controlled in other ways. Employers have duties concerning the provision and use of personal protective equipment (PPE) at work and must comply with the requirements of the relevant regulations. Individuals should liaise with your internal local lead for PPE regarding the regulations and local procedures and refer to the [guidance on infection prevention and control](#).

The regulations require that PPE is:

- properly assessed before use to make sure it is fit for purpose;
- maintained and stored properly;
- provided with instructions on how to use it safely;
- used correctly by employees.

Organisations should review PPE equipment to ensure adequate supplies are available, fit testing and training for use has been undertaken, and staff who are caring for patients are fully up to date with infection prevention measures, including the [donning](#) and [doffing](#) of PPE.

Organisations will have a clear process in place to enable staff to raise any concerns about PPE and staff should be encouraged to continue to use established incident reporting procedures alongside occupational exposures being reported to the HSE via RIDDOR to enable the required action to be taken to ensure the safety and wellbeing of the workforce and patients.

Q10. Can staff refuse to treat or transport patients that are suspected or known to have the coronavirus due to the fear of catching it or due to an underlying health condition?

A10. Managers will need to take a sensitive approach and discuss the issue with the individual. Managers should then use their discretion and make the appropriate decision. PPE will be provided where it is clinically required.

Q11. What if an individual does not want to go into work for fear of catching the virus?

A11. Some individuals might feel they do not want to go to work if they're afraid of catching coronavirus.

Employers should listen to any concerns staff may have.

If there are genuine concerns, employers must try to resolve them to protect the health and safety of their staff. For example, if possible, the employer could offer flexible working.

If an individual still does not want to go in, they may be able to arrange with their employer to take the time off as holiday or unpaid leave. The employer will be expected to take all reasonable concerns into consideration

If an individual refuses to attend work, a proportionate and reasonable response will be required taking into account all the circumstances

Q12. Are there any special steps we need to take in respect of at risk workers?

A12. Pregnant women may be particularly vulnerable, and employers have additional responsibilities to protect them. As the situation progresses, employers should regularly risk assess and should discuss with pregnant employees whether it is appropriate to move them to a different location, arrange for them to work from home or even to temporarily remove them from the workplace. In which case they will receive full pay. It is imperative that any action is done with their consent and preferably with support from Occupational Health. Further advice is available from the Royal Colleges, link below:

<https://www.rcog.org.uk/en/guidelines-research-services/guidelines/coronavirus-pregnancy/>

Similar action should be taken for other vulnerable individuals, particularly those who are immuno-suppressed or have long term conditions. Public Health Wales advice should be followed in these circumstances. Please refer to Public Health Wales advice <https://phw.nhs.wales/topics/latest-information-on-novel-coronavirus-covid-19/>

Q13. What should organisations consider putting in place from a facilities perspective to support healthcare workers and other individuals during this challenging time?

A13. It is important for employers to ensure employees have access to basic wellbeing provisions to enable staff to maintain their own wellbeing. Individuals should be able to:

- Access rest facilities/accommodation that is cleaned regularly;*
- Frequently access hand washing facilities and have adequate supplies of hand sanitisers and hand cream (to prevent dermatitis);*
- Feel assured that there are arrangements in place to ensure staff get home safely where they do not feel safe to drive e.g. transport provided;*
- Keep hydrated, this is especially important for staff wearing PPE for long periods of time;*
- Have 24 hour access to hot food;*
- Have regular breaks to reduce the onset of fatigue and associated risks - additional arrangements may need to be considered where staff are working longer shifts and/or additional hours. This could involve*

the repurposing of offices into rest spaces where employees can work from home. Please refer to the health, safety and wellbeing partnership groups (HSWPG) [guidance on safe shift working](#) for further information including information on provisions of 'power naps' and the safety of staff driving home after long shifts;

- *Consider the provision of accommodation for those staff working with symptomatic patients who may not want to return home to their families for a period of time.*

Supporting Business Continuity

Q14. Will formal processes and timescales in workforce policies and procedures be suspended during the crisis?

A14. There is no single position on this, and all organisations are looking at the circumstances and context of individual matters. The overriding message is that the matter should be resolved/concluded in a speedy and pragmatic way or "parked" with the consent of all the parties. In respect of disciplinary matters there are further considerations which need to be considered where individuals are suspended, and these will be looked at on a case by case basis.

Q15. Will certain staff groups be facilitated to work in other NHS Wales organisations, if practical?

A15. Further consideration of this issue is ongoing, however, in the meantime there is an Interim Procedure for Volunteer Staff Deployment During Adverse Weather currently in place. We are looking to extend this for use in the current circumstances as appropriate and required, however there is also the potential to second staff as appropriate and required subject to their agreement.

Q16. Will staff be supported to work from home?

A16. Where staff can work from home and it is appropriate to do so this should be encouraged. Although, there may be technical issues in terms of overall capacity which are currently being addressed.

Q17. What will happen to individuals who need to take time off to look after dependents, e.g. children following school closures, caring for elderly relatives who become ill?

A17. Individuals are entitled to time off work to help someone who depends on them in an unexpected event. This could apply in this instance. In such circumstances, the principles within the Special Leave policy could be applied and extended, and the amount of time granted must be reasonable for the situation. As an alternative to special leave, the individual could be asked to work from home if possible. Individuals

are expected to be flexible in these circumstances, and work with the organisation to achieve the best outcome, e.g. work different shifts, swap shifts, limit the time taken, take hours off work rather than days at a time. Similarly, organisations are being encouraged to be as flexible as possible in supporting staff to accommodate any disruption to their normal care arrangements.

Q18. Can we contact recently retired staff and other leavers with a view to asking them to return on a short term basis?

A18. Yes, Organisations can contact recently retired staff and other leavers with a view to asking them if they are available and able to return on a short term basis to support the NHS in the current Covid-19 crisis. The only exception would be if the leaver has previously specifically requested that any personal data is erased. It is believed that organisations would be able to justify accessing contact information and making contact with former employees in the current "crisis" for the stated purposes. The regulators are arranging to re-register staff who have left the register in the last 3 years and the 3 year timescale may be a useful guide when considering the employment of other individuals who have retired.

Any leaver will require new pre- employment checks (PECs) on returning.

Local Health Board Workforce and OD departments currently process retire and return applications and it is anticipated these arrangements will continue to be managed locally. As Covid-19 is a significant organisational risk, it will be for organisations carry out local risk assessments to decide if they are happy to accept the PECs held on the file for the leaver/retiree concerned. Where there are no PEC's held on file it will be for organisations carry out a local risk assessment to decide if the individuals can commence employment prior to the individuals PECS being fully completed. Every effort will be made to fast track PECs.

If staff have already taken their pension, the Government is removing any restrictions on the amount of work they can do without losing any part of their pension during the emergency.

Q19. Will there be a change to my current working arrangements such as study leave and Supporting Professional Activities?

A19. We expect that the impact of Covid-19 on services will become more intense and we will therefore be looking for increased flexibility in the way people work and in particular to changing fixed commitments such as study leave and SPA activity. There will be circumstances where requests will be made to suspend SPA sessions so as to provide additional Direct Clinical Care sessions. Whilst SPA activity is a contractual provision, we expect that given the requirements of managing the Covid-19 outbreak that any such requests will be fully supported by clinicians working across NHS Wales.

Terms and Conditions

Q20. Will individuals be paid whilst self-isolating, whether symptomatic or not?

A20. *Yes, they will continue to be paid in full)*

Q21. What happens if a bank staff member cancels a shift due to the need to self-isolate?

A21. *They will be paid for the booked shifts.*

Q22. Will I receive full pay if self-isolating??

A22. *Yes, individuals will be paid at full pay if self-isolating in households with someone with symptoms or if they have symptoms themselves. This is to support control of infection and to slow the spread of Covid-19 as we are requiring them not to attend work.*

Q23. Will annual leave be cancelled/not granted during the peak period?

A23. *Managers need to use their discretion and respond to issues in their own areas of work and discuss with the individual concerned. Colleagues are not currently expected to postpone or cancel approved annual leave, however, if they have annual leave scheduled but are willing to postpone to help support the response, all leave/TOIL cancelled can be carried forward into the next leave year.*

However, consideration needs to be given to an individual's health and wellbeing and the role that annual leave has in supporting this. A build up of annual leave over an extended period may also have an impact on service delivery in future. In addition, individuals should be encouraged and supported in continuing to take leave at regular intervals through the leave year. The taking of leave should continue, even if travel and normal holiday arrangements continue to be disrupted, to ensure individuals have a meaningful break from the work environment.

Q24. Will individuals be allowed to carry over annual leave to the next leave year?

A24. *Yes, individuals will be able to carry forward any and all unused annual leave from the 2019/20 leave year.*

Q25. Can overtime be paid to Band 8As and above?

A25. *Yes, organisations have discretion to pay overtime at time and a half to these bands where the additional activity relates specifically to the management of Covid-19.*

Q26. What are the proposed reporting reasons for Covid-19 or self-isolating on ESR?

A26. Where a period of medical exclusion is applied, this should be recorded on the Return to Work Form, and also on ESR using the “Special Leave Increasing Balance” -> “Infection Prevention” category.

If the employee informs their manager that they have Coronavirus symptoms or are feeling unwell, their absence will be recorded on ESR as a normal period of absence. The reason should be recorded as infectious disease, but also on the “Additional Absence Details” form within Manager Self Service relating to any Absence Type in a new field labelled “Related Reason” where a value of “Coronavirus (COVID-19) is in place.

Managers should always seek advice from Occupational Health on cases of absence or employee contact relating to the Coronavirus. Occupational Health will collate information regarding employees that are self-isolating or have contracted the virus.