

COVID-19: advice for staff (last updated 18th March 2020)

Occupational Health advice based on current published advice from PHE:

This is an evolving situation and the advice changes based on the latest published [PHE guidance](#).

Section 1

Staff who are feeling unwell – self isolation requirements

The main symptoms of COVID-19 include:

- **A new continuous cough (with or without sputum)**
- and/or
- **fever (>37.8°C)**

Other symptoms that may exist alongside these main symptoms could be:

- nasal discharge and congestion
- difficulty breathing – wheezing, shortness of breath
- hoarseness
- sore throat
- sneezing

If a staff member develops any of the main symptoms whilst at work they must:

- Self-isolate away from patients
- Inform their line manager
- Self-isolate at home for a minimum of 7 days
- If symptoms require medical advice the HCW should use the [NHS111 online service](#) or call NHS111 and seek appropriate medical review. In an emergency call 999

If a staff member develops any of the main symptoms whilst at home they must:

- Self-isolate at home for a minimum of 7 days
- Inform their line manager
- If symptoms require medical advice the HCW should use the [NHS111 online service](#) or call NHS111 and seek appropriate medical review. In an emergency call 999.

Self-isolation at home: This means staying at home and not going to work, school or public areas. The staff member should:

- Avoid using public transport or taxis during the 7 day isolation period
- Avoid having visitors to your home
- Ask friends, family or delivery drivers to drop off food but not enter the house unnecessarily
- Ask friends, family or delivery services to carry out errands on your behalf including taking children to school
- **For further information see PHE [COVID-19 stay at home guidance](#).**

Ending self isolation and return to work

After 7 days if the staff member is feeling better and no longer has a fever they can return to normal routines including work.

Section 2

Stay at home guidance for household members of an individual with possible coronavirus (COVID-19) infection (who is self-isolating)

- Staff who live in a household where an individual with possible corona virus infection is self-isolating must stay at home and not leave the house for **14 days**. This also applies to all other household members. The 14-day period starts from the day when the first person in the house became ill
- If the staff member starts displaying symptoms, they need to stay at home for 7 days from when the symptoms appeared, regardless of what day they are on in the original 14 day isolation period.
- After 7 days if the staff member is feeling better and no longer has a fever they can return to normal routines including work.

Testing for COVID-19 is not currently routinely undertaken for individuals staying at home.

For further advice on measures to take regarding vulnerable household contacts please see latest [PHE guidance](#):

Section 3

Guidance for staff at increased risk of severe illness from coronavirus (COVID-19)

Staff with underlying health conditions as listed below are at increased risk of complications and are advised to be particularly rigorous in adhering to recommended infection control practice and, where possible, social distancing measures. This may include avoiding non-essential use of public transport, **varying travel** times to avoid rush hour, and/or **working from** home, where possible. Staff should inform their managers if they have underlying health condition or are pregnant. Managers should consider making the necessary work adjustments, in order to accommodate travel restrictions. Where working from home is not practicable managers need to look at alternative options such as travel arrangements, modifying duties to minimise exposure or redeployment.

For clinical staff a [risk assessment](#) must be undertaken to ensure that these HCWs are trained and competent in applying infection control practices, including necessary PPE, and that these can be implemented and adhered to at all times. This includes ensuring consistent availability of appropriate PPE. If this is not possible, consideration will have to be given to work adjustments or redeployment.

Vulnerable staff include those in the following groups:

- aged 70 or older (regardless of medical conditions)

- under 70 with an underlying health condition listed below (i.e. 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 BMI of 40 or above)

There are some clinical conditions which put people at even higher risk of severe illness from COVID-19. If you are in this category, the NHS will directly contact you with advice on more stringent measures you should take in order to keep yourself and others safe. For now, you should rigorously follow the [social distancing advice from PHE in full](#).

People falling into this group are those who may be at particular risk due to complex health problems such as:

- People who have received an organ transplant and remain on ongoing immunosuppression medication
- People with cancer who are undergoing active chemotherapy or radiotherapy
- People with cancers of the blood or bone marrow such as leukaemia who are at any stage of treatment
- People with severe chest conditions such as cystic fibrosis or severe asthma (requiring hospital admissions or courses of steroid tablets)
- People with severe diseases of body systems, such as severe kidney disease (dialysis)

Section 4

Staff who are currently pregnant

[A statement from the Royal College of Obstetricians and Gynecologists](#) indicates that there is currently no new evidence to suggest that pregnant women are at greater risk from coronavirus (COVID-19) than other healthy individuals, or that they can pass the infection to their baby while pregnant.

The recent PHE advice on social distancing for pregnant women is purely a precautionary measure, to reduce the theoretical risk to the baby's growth and a risk of preterm birth should the mother become unwell.

While this precautionary approach is advisable as COVID-19 is a new virus, they would like to reassure pregnant women that, as things stand, no new evidence has come to light suggesting they are at higher risk of becoming seriously unwell compared with other healthy individuals.

Pregnant staff should discuss work arrangements with their line manager as described at the beginning of Section 3.

Section 5

Staff return to work advice

Staff who have been symptomatic can return to work:

- After 7 days if the staff member is feeling better and no longer has a fever they can return to normal routines including work.

If a cough is the only persistent symptom the staff member can still return to work (post-viral cough is known to persist for several weeks in some cases).

Section 6

Health care workers (HCWs) who are exposed to confirmed cases of COVID-19 at work without wearing recommended Personal Protective Equipment (PPE)

HCWs who come into contact with a COVID-19 patient while not wearing personal protective equipment (PPE) can remain at work.

If the HCW develops any of the main symptoms see advice in Section 1.

These are guiding principles and an individual risk assessment may need to be carried out depending on staff circumstances (for example for those in vulnerable groups, as listed above). These staff are also encouraged to contact occupational health for advice.

Section 7

Returning travellers

Staff who have returned from travel overseas can:

- Carry on daily activities, including attending work as long they are not experiencing any of the main symptoms of COVID-19 (see section 1).

If a staff member develops any of the main symptoms see advice in Section 1.

Section 8

COVID-19 and staff wellbeing

Occupational Health can be contacted via email slohs@gstt.nhs.uk or by telephone 0207 188 4152 Mon – Fri 09:00-17:00, calls are triaged and answered according to priority.

Staff who are symptomatic must not attend the OH Department.

Please notify the Trust Infection Prevention and Control Lead Tom Culligan by email tom.culligan@slam.nhs.uk or telephone 0203 228 2182

Out of hours the on-call lead can be contacted via switchboard 0203 228 6000

For further information see PHE [COVID-19 stay at home guidance](#).