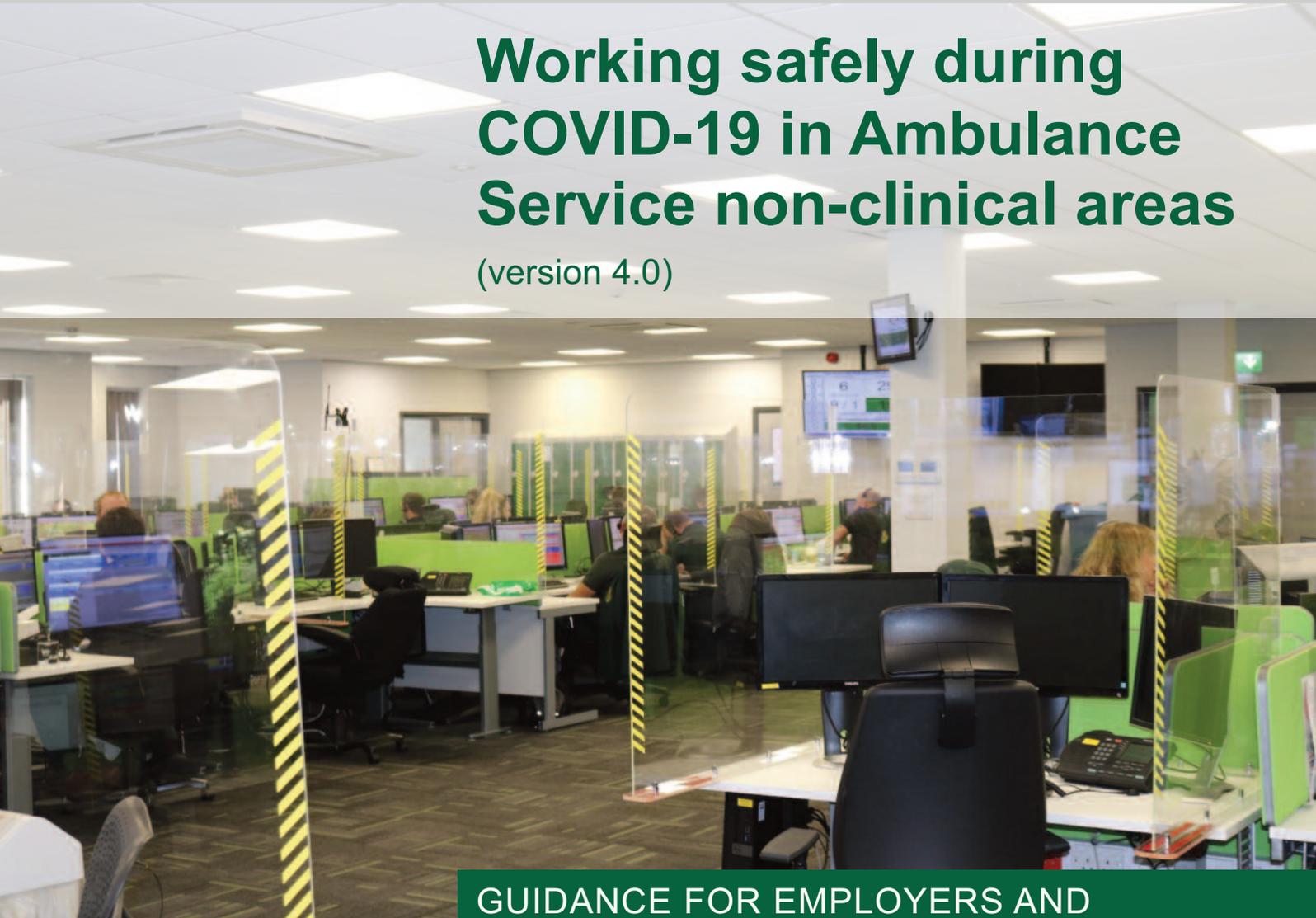




# Working safely during COVID-19 in Ambulance Service non-clinical areas

(version 4.0)



## GUIDANCE FOR EMPLOYERS AND EMPLOYEES IN NHS AMBULANCE TRUSTS

### INTRODUCTION

This document has been prepared by the Association of Ambulance Chief Executives (AACE), with input from Ambulance Trusts and Trade unions to place it in the context of the ambulance working environment and trade unions contextualising it within the ambulance service working environment.

The document has been approved by the Ambulance Policy Assurance & Advisory Group (APAAG).

This document is to help NHS Ambulance Services employers and employees in the UK understand how to work safely in non-clinical areas of their organisation during the COVID-19 pandemic, ensuring as many people as possible comply with social distancing guidelines (2m apart, or 1m with risk mitigation where 2m is not viable). We hope it gives you freedom within a practical framework to think about what you need to do to continue operations during the COVID-19 pandemic. We understand how important it is that you can work safely and support your staff' health and wellbeing during the COVID-19 pandemic. We know that most office-based staffs are not currently in the workplace, we hope this document will help those who are already working because they cannot work from home, as well as help other people think about how to prepare for when office working returns. The government is clear that staff should not be forced into an unsafe workplace and the health and safety of staff and patients, and public health, should not be put at risk.



Public health is devolved in Northern Ireland, Scotland and Wales; this guidance should be considered alongside local public health and safety requirements and legislation and advice provided in Northern Ireland, Scotland and Wales.

The principles within this guidance should be considered as a basis for maintaining business as usual during the COVID-19 pandemic. In areas where there is an increased community prevalence, clusters or outbreaks with the organisation or additional local or national restrictions in force there may be a requirement to increase the level of control measures in place within the service. Each service will need to translate this into the specific actions it needs to take based on local

risk assessments, depending on the nature of their organisation, including the size, how it is organised, operated, managed and regulated.

This guidance does not supersede any legal obligations relating to health and safety, employment or equalities and it is important that as an NHS Ambulance Service you continue to comply with your existing obligations, including those relating to individuals with protected characteristics. It contains non-statutory guidance to take into account when complying with these existing obligations. When considering how to apply this guidance, you will need to take into account agency staff, contractors and other people, as well as your employees.

To help you decide which actions to take, you need to carry out an appropriate COVID-19 risk assessment, just as you would for other health and safety related hazards. This risk assessment must be done in consultation with trade unions or employees.

This guidance sets out the minimum requirements each service is required to take to create a safe working environment and the control measures may be increased following local risk assessment in the event of increased prevalence. It does not supersede any additional measures which are introduced through local COVID alert levels or national restrictions.



## SUMMARY OF CHANGES

- Document hyperlinks reviewed and updated where required.
- Inclusion of a priority actions section to provide an overview of the priority actions required. It is still important to read the full guidance.
- Statement included within the 'Thinking about risk' section to clarify that the completion and compliance with the COVID-Secure risk assessment is required by Health & Safety law.
- Update to the 'Managing Risk' section with additional clarity on the mitigation actions required to ensure a safe workplace.
- Inclusion of the 1m with risk mitigation when 2m social distancing cannot be maintained.
- Clarification that organisations must undertake a risk assessment, and follow the measures identified within the risk assessment. Working to the basic principles that;
  - Individuals are required to maintain the 2m social distancing at all times.
  - If the activity does not allow for the 2m distancing to be maintained, and it is essential for business operation, then it should be redesigned if this is reasonably practicable.
  - If it is an essential activity and it is not reasonably practical to redesign the activity, then mitigating measures will be required e.g. protective screens or barriers.
  - If the activity is essential, and the mitigation measures have been exhausted and do not offer sufficient protection, then individuals are required to wear a surgical mask and maintain minimum of 1m distance
- Inclusion of requirement for staff to wear a surgical mask whilst moving around Trust premises to align with national guidance.
- Inclusion of higher risk groups as identified in the PHE report *Disparities in the risk and outcomes of COVID-19* and update to clinically extremely vulnerable group.
- Inclusion of ventilation section.
- Clarification that face coverings are not to be used within the workplace as an alternative to surgical face masks.
- Clarification that surgical face masks used solely within non-clinical areas can be disposed of as general waste 'black bag'.
- Inclusion of outbreak section.
- Inclusion of support bubbles with definition of support bubble included in 'Definitions' section.
- Inclusion of posters for
  - Coming to/ from work
  - Training centres
  - Moving around trust premises
  - Control rooms
  - General offices
  - Meeting rooms
  - Vehicle cabs



## PRIORITY ACTIONS TO TAKE TO PROTECT STAFF

Seven steps to protect yourself, your staff and your patients during coronavirus COVID-19.

|          |  |  |
|----------|--|--|
| <b>1</b> | <b>Complete a COVID-19 risk assessment.</b>        | Share it with all your staff. Find out how to do a risk assessment.  |
| <b>2</b> | <b>Clean more often.</b>                           | Increase how often you clean surfaces, especially those that are being touched a lot. Ask your staff and your visitors to use hand sanitiser and wash their hands frequently.  |
| <b>3</b> | <b>Ask your visitors to wear face coverings.</b>   | Where required to do so by law. That is especially important if your visitors are likely to be around people they do not normally meet. Some exemptions apply. Check when to wear one, exemptions, and how to make your own. |
| <b>4</b> | <b>Make sure everyone is social distancing.</b>    | Make it easy for everyone to do so by putting up signs or introducing a one-way system that your staff and visitors can follow.  |
| <b>5</b> | <b>Increase ventilation.</b>                       | By keeping doors and windows open where possible and running ventilation systems at all times.   |
| <b>6</b> | <b>Take part in NHS Test and Trace.</b>            | By keeping a record of all staff and contractors for 21 days. All NHS staff are advised to switch off contact tracing on the Test & Trace App before coming to work.   |
| <b>7</b> | <b>Turn people with coronavirus symptoms away.</b> | If a staff member (or someone in their household) or a visitor has a persistent cough, a high temperature or has lost their sense of taste or smell, they should be isolating.   |



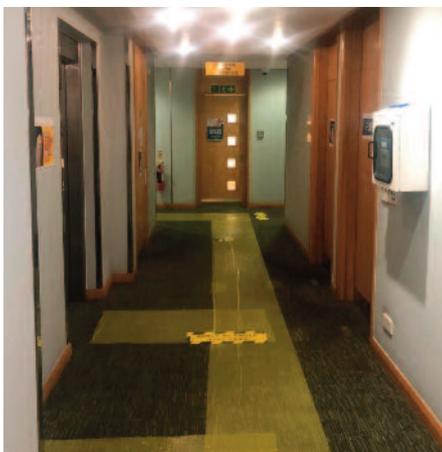


**Five more things to be aware for people who work in or run offices, contact centres and similar indoor working environments:**

|          |  |   |
|----------|--|---|
| <b>1</b> | <b>Work from home if possible.</b>             | Staff who can work effectively from home should do so.  |
| <b>2</b> | <b>Arrange workspaces to keep staff apart.</b> | Consider using barriers to separate people and introduce back-to-back or side-by-side working.  |
| <b>3</b> | <b>Reduce face-to-face meetings.</b>           | Encourage calls or video conferences to avoid in-person meetings with external contacts, or colleagues outside someone's immediate team, wherever possible.                   |
| <b>4</b> | <b>Reduce crowding.</b>                        | Consider how many people can be in each space while remaining socially distant and consider using booking systems for desks or rooms. Reduce the maximum occupancy for lifts. |
| <b>5</b> | <b>Communicate and train.</b>                  | Make sure all staff and visitors are kept up-to-date with the safety measures.  |

**These are the priority actions to make your business safe during coronavirus. You should also read the full version of the guidance.**

|   |   |
|---|---|
| <b>What do we mean by 'Ambulance Service non-clinical areas'?</b> | Ambulance control rooms, training centres, general offices, ambulance premises, ambulance cabs. |
|---|---|





## CONTENTS

|  |    |
|--|----|
| Introduction   | 01 |
| How to use this guidance                                   | 01 |
| Summary of changes   | 02 |
| Priority actions to take to protect staff                  | 03 |
| What do we mean by 'ambulance service non-clinical areas'? | 04 |
| 1. Thinking about risk                                     | 06 |
| 2. Who should go to work                                   | 09 |
| 3. Social distancing at work                               | 13 |
| 4. Managing your visitors and contractors                  | 23 |
| 5. Cleaning the workplace                                  | 25 |
| 6. Personal protective equipment (PPE) and face coverings  | 29 |
| 7. Workforce management                                    | 31 |
| 8. Inbound and outbound goods, including paper records     | 35 |
| Where to obtain further guidance                           | 36 |
| Definitions  | 36 |



# 1 THINKING ABOUT RISK

**Objective:** *That all employers carry out a COVID-19 risk assessment.*

COVID-19 is a public health emergency. Everyone needs to assess and manage the risks of COVID-19. As an employer, you also have a legal responsibility to protect staff and others from risk to their health and safety. This means you need to think about the risks they face and do everything reasonably practicable to minimise them, recognising you cannot completely eliminate the risk of COVID-19.

You must make sure that the risk assessment for your organisation addresses the risks of COVID-19, using this guidance to inform your decisions and control measures. A risk assessment is not about creating huge amounts of paperwork, but rather about identifying sensible measures to control the risks in your workplace. Your risk assessment will help you decide whether you have done everything you need to. The Health and Safety Executive (HSE) has guidance for business on how to manage risk and risk assessment at work along with specific advice to help control the risk of coronavirus in workplaces.

Employers have a duty to consult their people on health and safety. You can do this by listening and talking to them

about the work and how you will manage risks from COVID-19. The people who do the work are often the best people to understand the risks in the workplace and will have a view on how to work safely. Involving them in making decisions shows that you take their health and safety seriously.

**You must consult with the health and safety representative selected by a recognised trade union or, if there isn't one, a representative chosen by staff. As an employer, you cannot decide who the representative will be.**

At its most effective, full involvement of your staff creates a culture where relationships between employers and employees are based on collaboration, trust and joint problem solving. As is normal practice, staff should be involved in assessing workplace risks and the development and review of workplace health and safety policies in partnership with the employer.

Employers and employees should always come together to resolve issues. If concerns still cannot be resolved, see below for further steps you can take.

Where the enforcing authority, such as the HSE or your local authority, identifies employers who are not taking action to comply with the relevant public health legislation and guidance to control public health risks, they will consider taking a range of actions to improve control of workplace risks. For example, this would cover employers not taking appropriate action to socially distance, where possible. The actions the HSE can take include the provision of specific advice to employers through to issuing enforcement notices to help secure improvements.

Failure to complete a risk assessment which takes account of COVID-19, or completing a risk assessment but failing to put in place sufficient measures to manage the risk of COVID-19, could constitute a breach of health and safety law. The actions the enforcing authority can take include the provision of specific advice to employers to support them to achieve the required standard, through to issuing enforcement notices to help secure improvements. Serious breaches and failure to comply with enforcement notices can constitute a criminal offence, with serious fines and even imprisonment for up to two years.

## How to raise a concern:

- Contact your line manager
- Submit an incident report
- Contact your trade union if you have one
- Use the HSE form available at <https://www.hse.gov.uk/contact/concerns.htm>
- Contact HSE by phone on 0300 0031647



## 1.1 MANAGING RISK

**Objective:** *To reduce risk to the lowest reasonably practicable level by taking preventative measures, in order of priority.*

Employers have a duty to reduce workplace risk to the lowest reasonably practicable level by taking preventative measures. Employers must work with any other employers or contractors sharing the workplace so that everybody's health and safety is protected. In the context of COVID-19 this means working through these steps in order:

1. Ensuring both workers and visitors who feel unwell stay at home and do not attend the workplace. From 28 September, by law businesses did not require a self-isolating employee to come into work.
2. In every workplace, increasing the frequency of handwashing/ hand decontamination and surface cleaning.
3. To help contain the virus, organisations should make every reasonable effort to enable working from home as a first option. Where working from home is not possible, they must make every reasonable effort to comply with the social distancing guidelines set out by the government (keeping people 2m distant or 1m with risk mitigation where 2m is not viable).
4. Organisations should make every reasonable effort to ensure their employees can work safely. When in the workplace, everyone should make every reasonable effort to comply with the social distancing guidelines set out by the government (2m, or 1m with risk mitigation where 2m is not viable).

5. **Where the social distancing guidelines cannot be followed in full**, in relation to a particular activity, services should consider whether that activity can be redesigned to maintain a 2m distance or 1m with risk mitigations where 2m is not viable.

Further risk mitigations may include:

- Further increasing the frequency of hand washing and surface cleaning.
  - Keeping the activity time involved as short as possible whenever possible below 15 minutes.
  - Using screens or barriers to separate people from each other.
  - Where reasonably practicable consider reducing the number of people each person has contact with by using 'fixed teams or partnering' (so each person works with only a few others).
  - Where other mitigation actions cannot maintain 2m social distancing, then a surgical facemask must be worn.
6. Where the social distancing guidelines cannot be followed in full, even through redesigning a particular activity, services should consider whether that activity needs to continue for the organisation to operate, and if so, take all the mitigating actions possible to reduce the risk of transmission between their staff.
  7. You should ensure that steps are taken to avoid people needing to unduly raise their voices to each

other. This is because of the potential for increased risk of transmission, particularly from aerosol transmission.

8. If all the above mitigation measures have been explored and people must work face-to-face, then you will need to assess whether the activity can safely go ahead. If the activity is deemed essential and must be undertaken then staff will be required to wear a surgical face mask. No one is obliged to work in an unsafe work environment.

In your assessment you should have particular regard to whether the people doing the work are especially vulnerable to COVID-19.

Where it is deemed that a surgical face mask needs to be worn as it is not practicable for 2m social distancing to be maintained the Trust should provide a supply of surgical face masks for this purpose.

The recommendations in the rest of this document are ones you need to consider as you go through this process. You could also consider the general infection prevention and control advice for the ambulance services and your Trust. Bear in mind, additional processes or mitigations to protect one group of staff should not compromise the risk of viral transmission for others.

Where the Trust is unable to comply with any element of this guidance, a local risk assessment must be undertaken so that appropriate mitigation can be implemented where reasonably practicable. A checklist is provided separately to this guidance, to assist in identifying when a risk assessment may be needed.



## 1.2 SHARING THE RESULTS OF YOUR RISK ASSESSMENT

You should share the results of your risk assessment with your workforce.

If possible, you should consider publishing the results on your website.

You will find a notice you should display in your workplace to show you have followed this guidance here.

### Staying COVID-19 Secure in 2020

We confirm we have complied with the government's guidance on managing the risk of COVID-19

#### ■ FIVE STEPS TO SAFER WORKING TOGETHER ■

- ✓ We have carried out a **COVID-19 risk assessment** and shared the results with the people who work here
- ✓ We have **cleaning, handwashing and hygiene procedures** in line with guidance
- ✓ We have taken all reasonable steps to **help people work from home**
- ✓ We have taken all reasonable steps to **maintain a 2m distance** in the workplace
- ✓ Where people cannot be 2m apart, we have done everything reasonably practicable to **manage transmission risk**

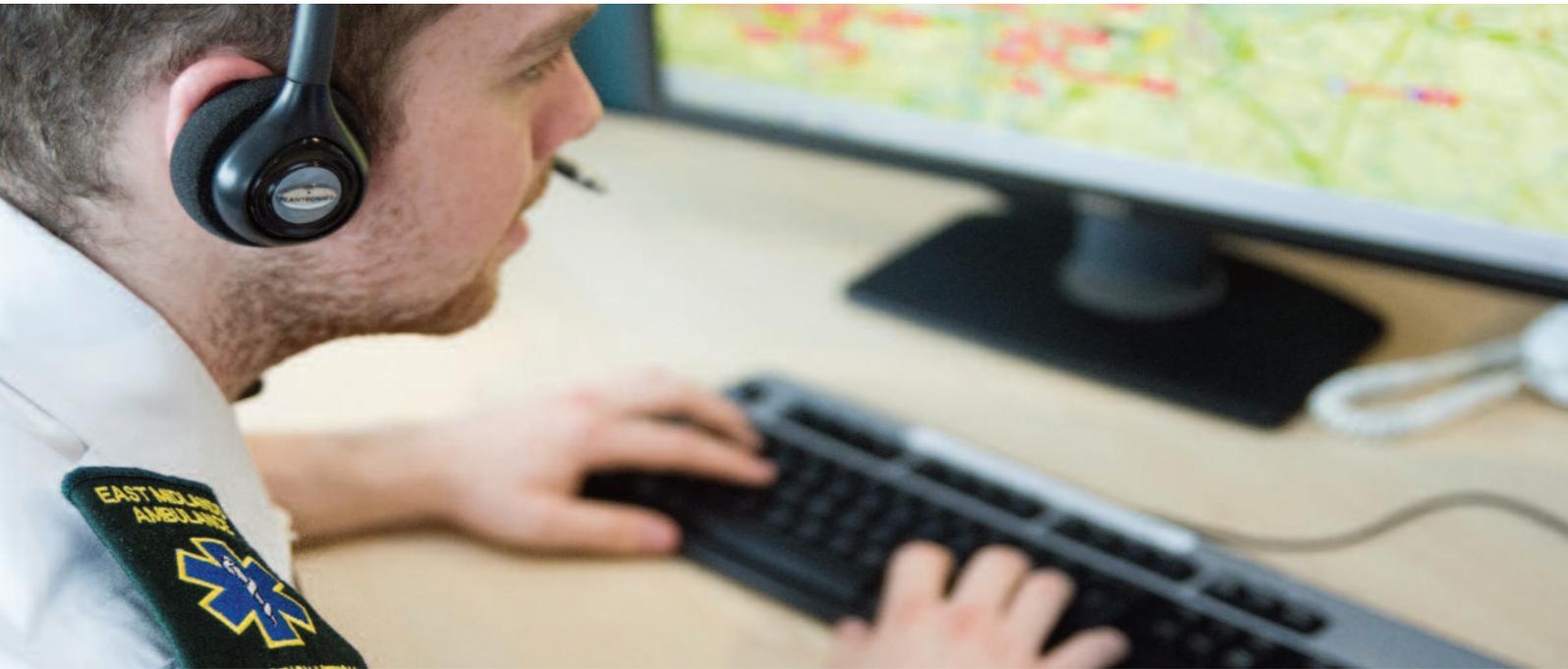
Employer \_\_\_\_\_ Date \_\_\_\_\_

Who to contact: \_\_\_\_\_ Your Health and Safety Representative  
(or the Health and Safety Executive at [www.hse.gov.uk](http://www.hse.gov.uk) or telephone 0300 003 1647)



## 2 WHO SHOULD GO TO WORK

**Objective:** *That everyone should work from home, unless they cannot work from home.*



### Steps that will usually be needed:

- Staff should work from home if at all possible. Consider who is needed to be on-site; for example:
  - *Workers in roles critical for organisation and operational continuity, safe facility management, or regulatory requirements and which cannot be performed remotely.*
  - *Workers in critical roles which might be performed remotely, but who are unable to work remotely due to home circumstances or the unavailability of safe enabling equipment.*
- Planning for the minimum number of people needed on site to operate safely and effectively.
- Monitoring the wellbeing of people who are working from home and helping them stay connected to the rest of the workforce, especially if the majority of their colleagues are on-site.
- Keeping in touch with off-site staff on their working arrangements including their welfare, mental and physical health and personal security.
- Providing equipment for people to work at home safely and effectively, for example, remote access to work systems.



## 2.1 PROTECTING PEOPLE WHO ARE AT HIGHER RISK

**Objective:** *To protect clinically vulnerable and clinically extremely vulnerable individuals.*

The Public Health England report *Disparities in the risk and outcomes of COVID-19* shows that some groups of people may be at more risk of being infected and/or an adverse outcome if infected.

The higher-risk groups include those who:

- are older males
- have a high body mass index (BMI)
- have health conditions such as diabetes
- are from some Black, Asian or minority ethnic (BAME) backgrounds

These groups should be considered within your risk assessment.

Clinically extremely vulnerable individuals (see definitions section) have been strongly advised to work from home. Where these individuals are not able to work from home, the current guidance for the clinically extremely

vulnerable must be reviewed as further restrictions may be in place for these individuals depending on any local or national restrictions which are in force. Clinically extremely vulnerable individuals who cannot attend work for this reason may be eligible for support. See the current guidance for the clinically extremely vulnerable.

### Steps that will usually be needed:

- Providing support for staff around mental health and wellbeing. This could include advice or telephone support.
- See current guidance for advice on who is in the clinically extremely vulnerable and clinically vulnerable groups.





## 2.2 PEOPLE WHO NEED TO SELF-ISOLATE

**Objective:** *To make sure individuals who are advised to stay at home under existing government guidance do not physically come to work. This includes individuals who have symptoms of COVID-19 as well as those who live in a household or are in a support bubble with someone who has symptoms and those who are advised to self-isolate as part of the government's test and trace service.*

### Steps that will usually be needed:

- Enabling staff to work from home while self-isolating if appropriate. By law, from 28 September employers were not knowingly able to require or encourage someone who was required to self-isolate to come to work.
- See current guidance relating to pay whilst in isolation: NHS staff during COVID-19 and for statutory sick pay due to COVID-19 when isolation reverts to 'sickness': employees and employers.
- Ensuring any workers who have symptoms of COVID-19 - a high temperature, new and persistent cough, or anosmia – however mild, should self-isolate for at least 10 days from when the symptoms started. Workers who have tested positive for COVID-19 should self-isolate for at least 10 days starting from the day the test was taken. Where a worker has tested positive while not experiencing symptoms but develops symptoms during the isolation period, they should restart the 10-day isolation period from the day the symptoms developed.
- See current guidance for people who have symptoms and those who live with others who have symptoms.
- Ensuring any workers who have been contacted by NHS Test and Trace follows the requirement to self-isolate. See current guidance for those who have been in contact with, but do not live with, a person who has tested positive for COVID-19.

## 2.3 EQUALITY IN THE WORKPLACE

**Objective:** *To treat everyone in your workplace equally.*

In applying this guidance, employers should be mindful of the particular needs of different groups of staff or individuals.

It is breaking the law to discriminate, directly or indirectly, against anyone because of a protected characteristic such as age, sex or disability.

Employers also have particular responsibilities towards disabled staff and those who are new or expectant mothers.

There has been a disproportionate impact of the virus on NHS workers from black and minority ethnic (BAME)

backgrounds. The risk assessment of those colleagues needs especially sensitive engagement given the systemic issues in every NHS organisation identified by the Workforce Race Equality Standard (WRES).



## Steps that will usually be needed:

- Understanding and taking into account the particular circumstances of those with different protected characteristics.
- Involving and communicating appropriately with staff whose protected characteristics might either expose them to a different degree of risk, or might make any steps you are thinking about inappropriate or challenging for them.
- Considering whether you need to put in place any particular measures or adjustments to take account of your duties under the equalities legislation.
- Making reasonable adjustments to avoid disabled staff being put at a disadvantage, and assessing the health and safety risks for new or expectant mothers.
- Making sure that the steps you take do not have an unjustifiable negative impact on some groups compared to others, for example, those with caring responsibilities or those with religious commitments.

## 2.4 VENTILATION

**Objective:** *To use ventilation to mitigate the transmission risk of COVID-19.*

Ventilation into the building/vehicle should be optimised to ensure the maximum fresh air supply is provided to all areas of the facility wherever possible.

Ventilation systems should provide a good supply of fresh air. Ventilation systems should be set to extract and not recirculate the air to assist in air circulation.

## Steps that will usually be needed:

- Increasing the existing ventilation rate by adjusting the fan speed.
- Operating the ventilation system when there are people in the building.
- Monitoring and managing filters in accordance to manufacturer instructions.
- Keeping doors and windows open if possible.
- Using ceiling fans to improve air circulation, provided there is good ventilation.



### 3 SOCIAL DISTANCING AT WORK

**Objective:** Ensuring workers maintain social distancing guidelines (2m, or 1m with risk mitigation where 2m is not viable), wherever possible, including while arriving at and departing from work, while in work and when travelling between sites.



You **must** maintain social distancing in the workplace wherever possible.

**Where the social distancing guidelines cannot be followed in full** in relation to a particular activity, organisations should consider whether that activity can be redesigned to maintain a 2m distance or 1m with risk mitigations where 2m is not viable.

Mitigating actions include:

- Further increasing the frequency of hand washing and surface cleaning.
- Keeping the activity time involved as short as possible - whenever possible below 15 minutes.
- Using screens or barriers to separate people from each other.
- Where reasonably practicable, and service delivery allows, reducing the

number of people each person has contact with by using 'fixed teams or partnering, or alignment to team working patterns' (so each person works with only a few others).

- Social distancing applies to all parts of an organisation, not just the place where people spend most of their time, but also entrances and exits, break rooms, canteens and similar settings. These are often the most challenging areas to maintain social distancing.
- Where other mitigating actions cannot maintain 2m social distancing, then a surgical facemask must be worn.
- Wearing a surgical mask when moving around trust premises as there is an increased risk of coming into contact with other individuals within corridors, doorways etc.

Where the social distancing guidelines cannot be followed in full, even through redesigning a particular activity, services should consider whether that activity needs to continue for the organisation to operate, and if so, take all the mitigating actions possible to reduce the risk of transmission between their staff.

Surgical face masks must be worn where other measures are not able to be taken to maintain social distancing (2m or 1m with risk mitigation where 2m is not viable). However, this should be seen as the final option when all other mitigations have been fully considered and are not able to be maintained.

## 3.1 COVID-SECURE SAFETY CHECKPOINTS

**Objective:** To introduce safety checkpoints for key areas to screen for symptoms, temperature and perform hand hygiene. This is to reduce the risk of transmission within these areas.

Within organisations such as the ambulance service, it is not always possible to fully comply with the social distancing guidelines due to the nature of delivering an emergency service.

Given the range of functions undertaken across the ambulance sector, strong consideration must be given to whether the activity should continue for the organisation to continue to operate, and, if so, take all the mitigating actions possible to reduce the risk of transmission between staff.

### Safety checkpoints include:

Notices at all building entry points to remind employees not to enter if they, or anyone in their household or support bubble, have COVID-19 symptoms, with instructions of what to do if they do have symptoms.

Staff have a responsibility to check for symptoms prior to attending for work. Covid-19 Safety check points will be introduced to reduce the risk of transmission of Covid-19.

### At the entry point to key areas (e.g. EOC / CAS):

- Hand hygiene/ hand wash station
- Symptom screening point
- Temperature testing point\*
- Consumables e.g. disinfectant wipes, surgical facemasks

If an employee or anyone within their household or support bubble has any of the following, they must not proceed into the building/ area:

- New continuous cough
- Fever/ temperature of 37.8° or above
- New loss of, or change in, ability to taste or smell

\*Fever remains a criteria for the case definition and if a person has a fever as the only symptom the advice is for them to self-isolate. Therefore, whilst not mandatory, temperature checking as part of the symptom screening may be of value.

Trusts may provide facilities for staff to take their temperature at the safety checkpoints, for use if they feel feverish, prior to the start of their shift or if they become feverish during their shift.

The poster is titled 'COVID-19 SAFETY CHECKPOINT STOP!' and features the Association of Ambulance Chief Executives logo. It is divided into three sections: 'Hand Hygiene' with an icon of hands being washed and text stating to apply hand sanitiser for at least 20 seconds; 'Symptom Check' with an icon of a person coughing and a list of symptoms to report; and 'Temperature Check' with an icon of a thermometer and text stating to check temperature if feeling feverish, with a result below 37.8°C. A footer note says: 'If you feel unwell, have a new continuous cough a temperature above 37.8, loss/change of taste/smell inform your manager immediately by phone.'

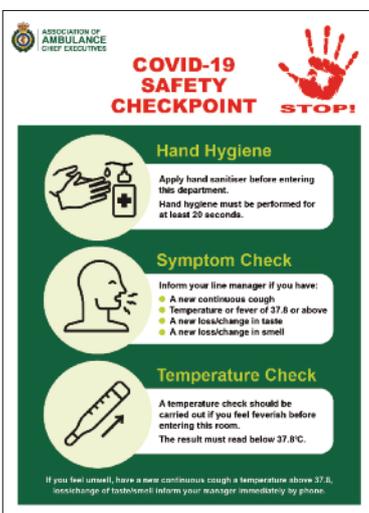


## 3.2 COMING TO WORK AND LEAVING WORK

**Objective:** To maintain social distancing wherever possible, on arrival and departure and to ensure handwashing/hand decontamination upon arrival.



It is recommended to have a safety checkpoint set up here.



### Steps to be considered where reasonably practicable:

- Staggering arrival and departure times at work to reduce crowding into and out of the workplace, taking account of the impact on those with protected characteristics.
- Providing additional parking or facilities such as bike-racks to help people walk, run, or cycle to work where possible.
- Limiting passengers in corporate vehicles, for example, work minibuses. This could include leaving seats empty.
- Reducing congestion, for example, by having more entry points to the workplace.
- Providing more storage for staff for clothes and bags.
- Using markings and introducing one-way flow at entry and exit points.
- Providing additional hand hygiene facilities e.g. handwashing facilities or hand sanitiser stations.

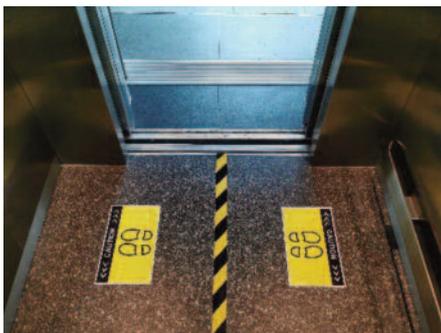


### 3.3 MOVING AROUND BUILDINGS AND WORK AREAS

**Objective:** To maintain social distancing wherever possible while people travel through the workplace.

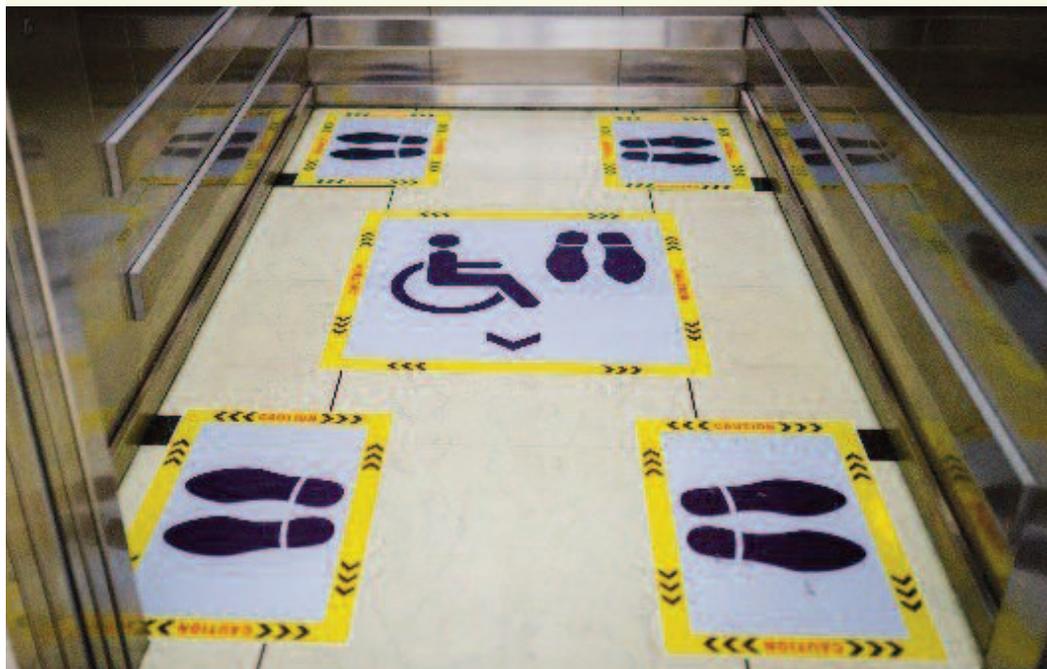
Although briefly passing individuals in corridors and communal areas within buildings is low risk, there is an increased risk of coming into close contact with other individuals.

Therefore, staff are required to wear a surgical mask when moving around trust premises.



#### Steps to be considered where reasonably practicable:

- Reducing movement by discouraging non-essential trips within buildings and sites, for example, restricting access to some areas, encouraging use of radios or telephones or other electronic devices, where permitted, and cleaning them between use.
- Restricting access between different areas of a building or site.
- Reducing job and location rotation, particularly where this involved moving between different staff groups.
- Introducing more one-way flow through buildings.
- Reducing maximum occupancy for lifts, providing hand sanitiser for the operation of lifts and encouraging use of stairs wherever possible.
- Making sure that people with disabilities are able to access lifts.
- Although passing briefly in the corridor or external areas is low risk, it is important to regulate use of high traffic areas including corridors, lifts, turnstiles and walkways to maintain social distancing. Staff are required to wear a surgical face mask when moving around trust premises.





## 3.4 GENERAL OFFICE AREAS / CONTROL ROOMS

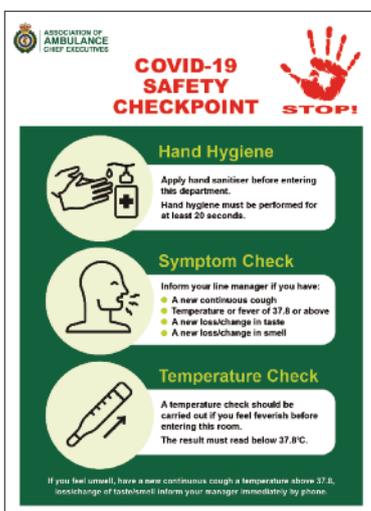
**Objective:** *To maintain social distancing between individuals when they are at their workstations.*

For people who work in one place, workstations should allow them to maintain social distancing wherever possible. Workstations should be assigned to an individual and not shared. If they need to be shared they should be shared by the smallest possible number of people and cleaned between users. People must not congregate, gather or have group discussions unless essential for operational functions, and in such circumstances social distancing must be maintained.

If it is not possible to keep workstations 2m apart then organisations should consider whether that activity needs to continue for the organisation to operate and if so, take all mitigating actions possible to reduce the risk of transmission (see section 3.0 Social distancing at work).

Consideration should be given to restricting access to essential staff only in key areas e.g. control rooms.

**It is recommended to have a safety checkpoint set up here.**



### Steps to be considered where reasonably practicable:

#### Managing occupancy levels to enable social distancing:

- Review layouts and processes to allow people to work further apart from each other (ideally 2m, but if not as far apart as practicable).
- Using floor tape or paint on uncarpeted flooring to mark areas to help staff keep to a 2m distance or 1m with risk mitigation where 2m is not viable.
- Only, where it is not possible to move workstations further apart:
  - *Arrange people/desks to work side by side or facing away from each other rather than face to face*
  - *Use screens or barriers to separate people from each other.*
- Avoid use of hot desks and spaces. Where not possible (such as in control centres or training facilities), clean workstations between different occupants including shared equipment.

#### In control centres:

- Align staff to teams where possible and/or consider reducing relief working across rotas.
- Clean workstation area as a minimum at the beginning and end of shift and after a break period.
- Use messaging facilities where possible (and if not, maintain social distancing of 2m or 1m with risk mitigation where 2m is not viable).
- Ensure entry points are designated as safety checkpoints as above and one-way flows are established where possible.
- Restrict access for staff to only those working in the control centre, and where possible, avoid working in “dual roles” (for example in an operational and control room rotational role).
- Increase cleaning frequencies particularly in relation to frequently touched contact points such as door handles, etc.
- Surgical face masks must be worn where other measures are not able to be taken to maintain the 2m social distancing. However, this should be seen as the final option when all other mitigations have been fully considered and are not able to be maintained.



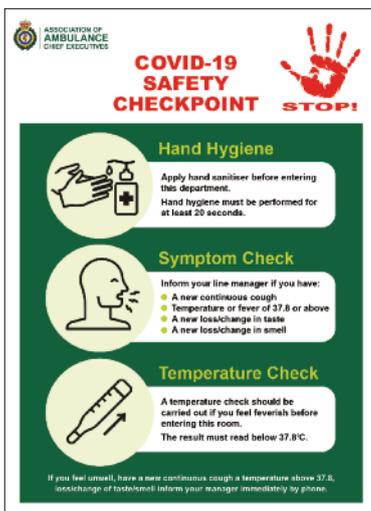
### 3.5 MEETING ROOMS AND AREAS

**Objective:** To reduce transmission due to face-to-face meetings and maintain social distancing in meetings.

Aiding social distancing and cleaning in meetings.



It is recommended to have a safety checkpoint set up here.



### Steps to be considered where reasonably practicable:

- Using remote working tools to avoid in-person meetings.
- Only absolutely necessary participants should attend meetings and must maintain social distancing (2m, or 1m with risk mitigation where 2m is not viable).
- Avoiding transmission during meetings, for example, avoiding sharing notepads/ paper, pens and other objects.
- Providing hand sanitiser in meeting rooms.
- Holding meetings outdoors or in well-ventilated rooms whenever possible.
- For areas where regular meetings take place, using floor signage to help people maintain social distancing.
- Ensure worksurfaces and equipment are cleaned following meetings.



**TWO METRES IS 6 FEET 7 INCHES**

**THREE STEPS**

**THE LENGTH OF A DOUBLE BED**

## 3.6 TRAINING CENTRES

**Objective:** To reduce transmission due to face-to-face meetings and maintain social distancing in training centres.

Minimising contacts and mixing between people reduces transmission of coronavirus (COVID-19). This is important in all contexts, and you must consider how to implement this. You must do everything possible to minimise contacts and mixing while delivering a full programme of study.

The overarching principle to apply is reducing the number of contacts between students and staff. This can be achieved through keeping groups separate and through maintaining the distance between individuals. These are not alternative options and both measures will help to reduce the risk of transmission.

It is recommended to have a safety checkpoint set up here.

**COVID-19 SAFETY CHECKPOINT STOP!**

**Hand Hygiene**  
Apply hand sanitiser before entering this department.  
Hand hygiene must be performed for at least 20 seconds.

**Symptom Check**  
Inform your line manager if you have:  
• A new continuous cough  
• Temperature or fever of 37.8 or above  
• A new loss/change in taste  
• A new loss/change in smell

**Temperature Check**  
A temperature check should be carried out if you feel feverish before entering this room.  
The result must read below 37.8°C.

If you feel unwell, have a new continuous cough a temperature above 37.8, loss/change of taste/smell inform your manager immediately by phone.

### Steps to be considered where reasonably practicable:

- Consider virtual learning platforms and remote working tools.
- Consider staggering practical assessment/ skill station access to limit the numbers of students in the area
- Group work should be undertaken in line with social distancing principles, with considerations for working side by side instead of face-to-face. Where practical forming student groups or bubbles to limit the numbers of students in contact with each other.
- Avoiding transmission during training sessions, for example, avoiding sharing pens and other objects.
- Providing hand sanitiser, wipes and tissues in training rooms.
- Ensure worksurfaces and equipment are wiped down following training sessions.
- Face masks must be worn when social distancing is not possible e.g. for practical scenarios when participants cannot maintain 2m, or 1m with risk mitigation where 2m is not viable.





## 3.7 COMMON AREAS - INCLUDING CREW ROOMS AND BREAK AREAS

**Objective:** *To maintain social distancing while using common areas.*

Although briefly passing individuals in corridors and communal areas within buildings is low risk, there is an increased risk of coming into close contact with other individuals.

Therefore, staff are required to wear a surgical mask when moving around trust premises.



Common areas and appropriate signage to restrict access when social distancing is not possible /practical.



### Steps to be considered where reasonably practicable:

- Working collaboratively with landlords and other tenants in multi-tenant sites/buildings to ensure consistency across common areas, for example, receptions and staircases.
- Staggering break times to reduce pressure on break rooms or canteens.
- Using safe outside areas for breaks.
- Creating additional space by using other parts of the workplace or building that have been freed up by remote working.
- Consider installing screens to protect staff in public facing receptions or similar areas.
- Encouraging staff to bring their own food, to prevent the need to go out to get food/ drink.
- Encouraging staff to remain on-site and, when not possible, maintaining social distancing while off-site
- Reconfiguring seating and tables to maintain spacing and reduce face-to-face interactions.
- Ensure people tidy away and clean any equipment, crockery and cutlery after use.
- Regulating use of locker rooms, changing areas and other facility areas to reduce concurrent usage.
- Encouraging storage of personal items and clothing in personal storage spaces, for example, lockers and during shifts.
- Wearing a face mask, where it is not possible to maintain social distancing (2m, or 1m with risk mitigation where 2m is not viable).



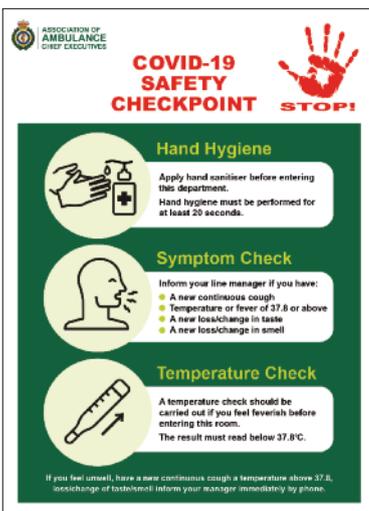
### 3.8 SOCIAL DISTANCING IN VEHICLES

**Objective:** To maintain social distancing wherever possible between individuals when in vehicles including during training.

#### Steps to be considered where reasonably practicable:

- All staff should have been through a safety checkpoint prior to 'booking on' the vehicle for their shift.
- All staff must wear a surgical facemask when in a Trust vehicle with other people unless they are separated by a bulkhead or similar partition.
- Where staff have no alternative but to work within 2m devise mitigating measures to minimise the risk of transmission, including:
  - Further increasing the frequency of hand washing and surface cleaning
  - Limit unnecessary time in confined cab areas
  - Ensure vehicles are well-ventilated to increase the flow of air, for example, by opening a window, ventilation systems should not be set to recirculate the air within the vehicle.
  - Sitting side-by-side not being face-to-face, where practical staff should sit separately in vehicles e.g. in cars the passenger should sit in the back instead of the front.
  - Clear signage to outline social distancing and mitigation measures in place
  - Limit non-essential people in Trust vehicles
- Where reasonably practicable consider reducing the number of people each person has contact with by using 'fixed teams or partnering' (so each person works with only a few others).
- Ensure regular cleaning of vehicles, in particular, between different users.

It is recommended that all staff go through a safety checkpoint prior to 'booking on' their vehicle.





### 3.9 ACCIDENTS, SECURITY AND OTHER INCIDENTS

**Objective:** *To prioritise safety during incidents.*

#### Steps that will usually be needed:

- In an emergency, for example, an accident, fire or break-in, in the workplace or outside / enroute to work, people do not have to stay 2m apart if it would be unsafe.
- People involved in the provision of assistance to others must don PPE if they have it available and pay particular attention to sanitation measures immediately afterwards including washing hands.





## 4 MANAGING YOUR VISITORS AND CONTRACTORS





## 4.1 MANAGE CONTACTS

**Objective:** *To minimise the number of unnecessary visits to offices*

### Steps that will usually be needed:

- Encouraging visits via remote connection/working where this is an option.
- Where site visits are required, site guidance on social distancing and hygiene should be explained to visitors on or before arrival.
- Limiting the number of visitors at any one time.
- Limiting visitor times to a specific time window and restricting access to required visitors only.
- Determining if schedules for essential services and contractor visits can be revised to reduce interaction and overlap between people, for example, carrying out services at night.
- Maintaining a record of all visitors, if this is practical. Displaying the NHS COVID-19 QR code poster at the entrance to sites with regular visitors e.g. Headquarters, locality offices.
- Revising visitor arrangements to ensure social distancing and hygiene, for example, where someone physically signs in with the same pen in receptions.

## 4.2 PROVIDING AND EXPLAINING AVAILABLE GUIDANCE

**Objective:** *To minimise the number of unnecessary visits to offices.*

### Steps that will usually be needed:

- Providing clear guidance on social distancing and hygiene to people on arrival, for example, signage or visual aids and before arrival, for example, by phone, on the website or by email.
- Establishing host responsibilities relating to COVID-19 and providing any necessary training for people who act as hosts for visitors.
- Reviewing entry and exit routes for visitors and contractors to minimise contact with other people.
- Coordinating and working collaboratively with landlords and other tenants in multi-tenant sites, for example, shared working spaces.



## 5 CLEANING THE WORKPLACE





## 5.1 BEFORE REOPENING

**Objective:** *To make sure that any site or location that has been closed or partially operated is clean and ready to restart.*

### Including:

- An assessment for all sites, or parts of sites, that have been closed, before restarting work.
- Carrying out cleaning procedures and providing hand sanitiser before restarting work.

### Steps that will usually be needed:

- Checking whether you need to service or adjust ventilation systems, for example, so that they do not automatically reduce ventilation levels due to lower than normal occupancy levels.
- Most air conditioning systems do not need adjustment, however where systems serve multiple buildings or you are unsure, advice can be sought from your heating ventilation and air conditioning (HVAC) engineers or advisers.
- Opening windows and doors frequently to encourage ventilation, where possible.

## 5.2 KEEPING THE WORKPLACE CLEAN

**Objective:** *To keep the workplace clean and prevent transmission by touching contaminated surfaces.*

### Steps that will usually be needed:

- Reducing clutter and removing difficult to clean items that are not being used.
- Frequent cleaning of work areas and equipment between uses, using your usual cleaning products.
- Frequent cleaning of objects and surfaces that are touched regularly, such as door handles and keyboards, and making sure there are adequate disposal arrangements.
- Clearing workspaces and removing waste and belongings from the work area at the end of a shift.
- Limiting or restricting use of high-touch items and equipment, for example, printers or whiteboards.
- If you are cleaning after a known or suspected case of COVID-19 then you should refer to the specific guidance.



## 5.3 HYGIENE - HANDWASHING, SANITATION FACILITIES AND TOILETS

**Objective:** *To help everyone keep good hygiene through the working day.*

### Steps to be considered where reasonably practicable:

- Using signs and posters to build awareness of good handwashing technique, the need to increase handwashing frequency, avoid touching your face and to cough or sneeze into a tissue which is binned safely, or into your arm if a tissue is not available.
- Providing regular reminders, posters in prominent places and signage to maintain personal hygiene standards.
- Providing hand sanitiser in multiple locations in addition to washrooms.
- Setting clear use and cleaning guidance for toilets to ensure they are kept clean and social distancing is achieved as much as possible.
- Enhancing cleaning for busy areas.
- Providing more waste facilities and more frequent rubbish collection.
- Provide hand drying facilities – paper towels or hand dryers.

## 5.4 CHANGING ROOMS AND SHOWERS

**Objective:** *To minimise the risk of transmission in changing rooms and showers.*

### Steps that will usually be needed:

- Where shower and changing facilities are required, setting clear use and cleaning guidance for showers, lockers and changing rooms to ensure they are kept clean and clear of personal items and that social distancing is achieved as much as possible.
- Introducing enhanced cleaning of all facilities regularly during the day and at the end of the day.



## 5.5 HANDLING GOODS, MERCHANDISE AND OTHER MATERIALS, AND ONSITE VEHICLES

**Objective:** *To reduce transmission through contact with objects that come into the workplace and vehicles at the worksite.*

### Steps that will usually be needed:

- Cleaning procedures for goods and merchandise entering the site.
- Cleaning procedures for vehicles.
- Introducing greater handwashing and handwashing facilities for staff handling goods and merchandise and providing hand sanitiser access where this is not practical.
- Regular cleaning of vehicles that staff may take home.
- Restricting non-Trust deliveries, for example, personal deliveries to staff.





## 6 PERSONAL PROTECTIVE EQUIPMENT (PPE) AND FACE COVERINGS





**PPE protects the user against health or safety risks at work. It can include items such as safety helmets, gloves, eye protection, high-visibility clothing, safety footwear and safety harnesses. It also includes respiratory protective equipment, such as face masks. For the purpose of this document, the term ‘personal protective equipment’ is used to describe products that are either PPE or medical devices that are approved by the Health and Safety Executive (HSE) and the Medicines and Healthcare products Regulatory Agency (MHRA) as protective solutions in managing the COVID-19 pandemic.**

Where you are already using PPE in your work activity to protect against non-COVID-19 risks, you should continue to do so.

At the start of this document we described the steps you need to take to manage COVID-19 risk in the workplace.

This includes working from home and maintaining social distancing guidelines (2m, or 1m with risk mitigation where 2m is not viable).

When managing the risk of COVID-19, it is important to follow the hierarchy of controls and use the mitigation measures described throughout the guidance. The most effective way to reduce the risk of transmission is through social distancing, hand hygiene, increased cleaning frequencies and limiting contacts. The additional use of PPE should only be considered if other measures to maintain social distancing have been fully considered and implemented and are able to be maintained.

The use of surgical facemasks for staff, and face coverings for visitors (if tolerated) is recommended in addition to maintaining social distancing (2m, or 1m with risk mitigation where 2m is not viable) and hand hygiene for all staff in clinical and non-clinical areas to further reduce the transmission risk.

Any PPE provided must fit properly and staff should be competent in its use. The wearing of PPE should not be used unnecessarily in areas where it is possible to maintain social distancing guidance (2m, or 1m with risk mitigation where 2m is not viable).

Waste does not need to be segregated unless an individual in the setting shows symptoms of, or tests positive for COVID-19. Dispose of routine waste as normal, placing any used cloths or wipes in ‘black bag’ waste bins. You do not need to put them in an extra bag or store them for a period of time before throwing them away. Surgical facemasks that are used solely within a non-clinical area can be safely disposed of within general waste ‘black bag’, if they have been worn for any period of patient contact or near a symptomatic individual they should be disposed of as category B (orange) infectious waste.

## 6.1 FACE COVERINGS.

There is growing evidence that wearing a face covering in an enclosed space helps protect individuals and those around them from COVID-19. The evidence suggests that wearing a face covering does not protect you, but it may protect others if you are infected but have not developed symptoms (pre-symptomatic stage).

A face covering can be very simple and are mandatory on public transport and in a number of indoor premises. It is not the same as a surgical facemask, and they are not to be considered as an alternative to a surgical facemask within the workplace.





## 7 WORKFORCE MANAGEMENT



Working safely during COVID-19 in  
Ambulance Service non-clinical areas  
(version 4.0)



## 7.1 SHIFT PATTERNS AND OUTBREAKS

**Objective:** *To change the way work is organised to create distinct groups and reduce the number of contacts each employee has.*



### Steps to be considered where reasonably practicable:

- Where possible, where staff are split into teams or shift groups, fixing these teams or shift groups so that where contact is unavoidable, this happens between the same people.
- Identifying areas where people directly pass things to each other, for example office supplies, and finding ways to remove direct contact, such as using drop-off points or transfer zones.
- You should assist the Test and Trace service by keeping a temporary record of your staff shift patterns for 21 days and assist NHS Test and Trace with requests for that data if needed. This could help contain clusters or outbreaks. Check what data you need to collect and how it should be managed.

### 7.1.1 Outbreaks in the workplace

**Objective:** *To provide guidance in an event of a COVID-19 outbreak in the workplace.*

### Steps to be considered where reasonably practicable:

- As part of your risk assessment, you should ensure you have an up-to-date plan in case there is a COVID-19 outbreak. This plan should nominate a single point of contact (SPOC) where possible who should lead on contacting local Public Health teams.
- If there is more than one case of COVID-19 associated with your workplace (linked by direct contact, time or area), you should contact your infection control team or local PHE health protection team to report the suspected outbreak. Find your local PHE health protection team.
- If the infection control team or local PHE health protection team declares an outbreak, you will be asked to record details of symptomatic staff and assist with identifying contacts. You should therefore ensure all employment records are up-to-date. You will be provided with information about the outbreak management process, which will help you to implement control measures, assist with communications to staff, and reinforce prevention messages.



## 7.2 WORK-RELATED TRAVEL

### 7.2.1 Cars, accommodation and visits

**Objective:** *To avoid unnecessary work travel and keep people safe when they do need to travel between locations.*

#### Steps to be considered where reasonably practicable:

- Minimising non-essential travel – consider remote options first.
- Minimising the number of people travelling together in any one vehicle, using fixed travel partners, increasing ventilation by opening a window when possible and avoiding sitting face-to-face. Ventilation systems should not be set to recirculate the air within the vehicle.
- Cleaning shared vehicles between shifts or on handover.
- Staff should minimise unnecessary journeys and make appropriate and safe transport arrangements.
- Where staff are required to stay away from their home, centrally logging the stay and making sure any overnight accommodation meets social distancing guidelines.

### 7.2.2 Deliveries to Other Sites

**Objective:** *To help staff delivering to other sites such as branches, or suppliers' or customers' premises to maintain social distancing and hygiene practices.*

#### Steps to be considered where reasonably practicable:

- Putting in place procedures to minimise person-to-person contact during deliveries to other sites.
- Maintaining consistent pairing where two-person deliveries are required.
- Minimising contact during exchange of deliveries and documentation, for example, by using electronic payment methods and electronically signed and exchanged documents.



## 7.3 COMMUNICATIONS AND TRAINING

### 7.3.1 Returning to Work

**Objective:** *To make sure all staff understand COVID-19 related safety procedures.*

#### Steps to be considered where reasonably practicable:

- Providing clear, consistent and regular communication to improve understanding and consistency of ways of working.
- Engaging with staff and their representatives through existing communication routes to explain and agree any changes in working arrangements.
- Developing communication and training materials for staff prior to returning to site, especially around new procedures for arrival at work.

### 7.3.2 Ongoing communications and signage

**Objective:** *To make sure all staff are kept up-to-date with how safety measures are being implemented or updated.*



Example signage to promote hygiene and social distancing measures.

#### Steps to be considered where reasonably practicable:

- Ongoing engagement with staff (including through trade unions or employee representative groups) to monitor and understand any unforeseen impacts of changes to working environments.
- Awareness and focus on the importance of mental health at times of uncertainty. The government has published guidance on the mental health and wellbeing aspects of coronavirus (COVID-19).
- Using simple, clear messaging to explain guidelines using images and clear language, with consideration of groups for which English may not be their first language.
- Using visual communications, for example, notice boards or signage, to explain changes to schedules, breakdowns or materials shortages to reduce the need for face-to-face communications.
- Communicating approaches and operational procedures to suppliers, customers or trade bodies to help their adoption and to share experience.



## 8 INBOUND AND OUTBOUND GOODS/SUPPLIES, INCLUDING PAPER RECORDS

**Objective:** To maintain social distancing and avoid surface transmission when handling paper records, post and parcels.



### Steps to be considered where reasonably practicable:

- Revising pick-up and drop-off collection points, procedures, signage and markings. Incorporating non-contact deliveries wherever possible.
- Where reasonably practicable consider reducing the number of people each person has contact with by using 'fixed teams or partnering' (so each person works with only a few others).
- Where possible and safe, having single workers load or unload vehicles.
- There is no requirement to quarantine paper records or wear gloves when handling.
- Staff who are processing paper patient care records should avoid touching their face and regularly wash hands or use hand sanitiser.
- Considering methods to reduce frequency of deliveries, for example by ordering larger quantities less often.
- In supplies warehouses consider using markings and introducing one-way flow systems to prevent congestion.
- Providing handwashing facilities or hand sanitiser where not possible, at entry and exit points.





## WHERE TO OBTAIN FURTHER GUIDANCE

### **COVID-19: what you need to do**

<https://www.gov.uk/coronavirus>

### **Support for businesses and employers during coronavirus (COVID-19)**

<https://www.gov.uk/coronavirus/business-support>

### **General guidance for employees during coronavirus (COVID-19)**

<https://www.gov.uk/guidance/guidance-and-support-for-employees-during-coronavirus-covid-19>

## DEFINITIONS

|  |  |
|--|--|
| <b>Surgical Face Mask:</b>                   | Refers to medical grade surgical facemasks either type II surgical mask or type IIR fluid resistant surgical masks.  |
| <b>Ambulance Service non-clinical areas:</b> | Ambulance control rooms, training centres, general offices, ambulance premises, ambulance cabs.  |
| <b>Common areas:</b>                         | Refers to areas and amenities which are provided for the common use of more than one person including canteens, reception areas, meeting rooms, areas of worship, toilets, gardens, fire escapes, kitchens, fitness facilities, store rooms, laundry facilities.   |
| <b>Clinically extremely vulnerable:</b>      | Clinically extremely vulnerable people will have received a letter telling them they are in this group, or will have been told by their GP. Guidance on who is in this group can be found here:<br><br><a href="https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19">https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19</a> |
| <b>Local COVID alert level:</b>              | Local COVID alert levels set out information for local authorities, residents and workers about what to do and how to manage the epidemic in their area. Find out what you can and cannot do according to the local COVID alert level, in the areas where you live, work or travel.<br><br><a href="https://www.gov.uk/guidance/local-covid-alert-levels-what-you-need-to-know">https://www.gov.uk/guidance/local-covid-alert-levels-what-you-need-to-know</a>             |
| <b>Support Bubble:</b>                       | The term 'support bubble' refers to single adult households, where adults live alone or with dependent children only, expanding their support network so that it includes one other household of any size. Read further information about support bubbles.   |