



## **Standard Infection Control policy**

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## 1.0 Introduction

The health, safety, and well-being of everyone is of utmost importance to West Norfolk Academies Trust (WNAT) and, whilst no longer the forefront of the media, we continue to operate in a pandemic. Therefore, there remains Public Health expectations that organisations reduce the spread of respiratory infections in the workplace.

This policy replaces the WNAT COVID-19 policy and applies to the behaviours required of us all to manage not only the ongoing risk of COVID19 but all other respiratory infections.

The Government response: Living with COVID and Next steps for living with COVID takes account of the fact that the population now has much stronger protection against COVID19 than at any other point during the pandemic through vaccination, natural immunity, increased scientific and public understanding and antiviral treatments. However, the pandemic is not over and how the virus will develop over time remains uncertain.

The public health protection and safe behaviours that are outlined in this document should be adopted by everyone to reduce the risk of infection; these include:

- Getting vaccinated
- Staying at home if you are unwell with symptoms of a respiratory illness, including COVID or you have tested positive for COVID-19
- Meeting outside or letting fresh air in if meeting indoors
- Cleaning the space and things around you regularly
- Washing or sanitising your hands regularly and following advice to “Catch it, Bin it, Kill it”
- Wearing a face covering when appropriate to do so
- Following testing requirements if required to do so e.g., as a result of outbreak management advice from Public Health.

These measures are particularly important to protect those who are at a higher risk if they catch COVID-19. You won't always know you are interacting with someone at high risk, so it is important that we all follow these behaviours consistently. They will also help to:

- Protect yourself and others around you
- Maintain education and learning and the running of your setting

Headteachers, managers and employees can be confident that they are proportionately managing the risk if the requirements that are outlined in this guidance are followed.

## 2.0 Responsibilities

### Headteacher and manager responsibilities

- Ensure employees, students, pupils, and parents are aware of the safe working arrangements in place and their responsibilities to protect theirs and others respiratory wellbeing
- Ensure employees, students and pupils follow the requirements regarding staying away from the setting when appropriate to do so as outlined in this guidance
- Encourage employees, students, and pupils to participate in all vaccination programmes they are eligible for to help reduce the risk of illness and spread of respiratory infections
- Identify employees, students and pupils who are at higher risk if they are infected and undertake an individual risk assessment as appropriate

- Ensure employees, students and pupils are provided with hand sanitiser where appropriate
- Ensure employees are provided with PPE and cleaning materials where this is required for their role
- Investigate reported incidents of occupational exposure to COVID-19.

### Employee responsibilities

- Follow the safe working arrangements that have been put in place to protect the respiratory wellbeing of you, your colleagues, students, and pupils.
- Do not come to work if you are unwell with symptoms of a respiratory infection including COVID-19 and you have a high temperature or have a positive test for COVID-19
- Go home if you become unwell with symptoms of a respiratory infection including a high temperature while you are at work and notify your manager
- Follow arrangement for high-risk close contacts as outlined in this guidance if this applies to you
- Request an individual assessment from your manager if you are at higher risk of serious illness as outlined in this guidance
- Support keeping equipment and premises clean as outlined below
- Complete an incident report form if you contract COVID-19 because of exposure to a known positive case as part of your role

### **3.0 Personal Health Protection Behaviours**

WNAT is committed to supporting the health and wellbeing of everyone at work; ensuring that good public health protection behaviours are facilitated and supported contributes to that aim. It is important for our health and wellbeing that we learn from world events such as the Coronavirus pandemic and continue to adopt and practice good infection control behaviour.

Respiratory viral infections are a significant cause of ill health. In most cases they result in relatively mild symptoms and are indistinguishable from each other. However, in more vulnerable individuals the outcomes can be more serious requiring medical intervention and they may have more lasting effects.

Respiratory viruses have common transmission routes (airborne, droplet and contact, both person to person and surface) although the relative importance of each will vary from virus to virus. These common routes mean the action we need to take to minimise transmission is the same: fresh air, personal hygiene, and cleaning.

We all have a responsibility to prevent the transmission of respiratory viruses to protect people at higher risk. In addition to these steps, we should also:

- Get vaccinated
- Stay at home when you have active symptoms of a respiratory illness, have tested positive for COVID-19 or are a high-risk close contact of a positive case
- Wear a face covering when appropriate

### **3.1 Sickness Absence and Behaviour Policies**

WNAT has in place a sickness absence policy that outlines how we will manage sickness absence. This sets the expected response of employees, students, and parents to illness including respiratory illness.

If a parent or carer insists on a child with symptoms attending your setting, where they have a confirmed or suspected case of an infectious illness, you can take the decision to refuse the child if, in your reasonable judgement, it is necessary to protect other children and staff from possible infection.

Settings should communicate their expectations to pupils, students, and parents in the usual way.

### **3.2 Stay at home when you have active symptoms**

The simplest way to prevent transmission of a respiratory illness is to limit contact with other people. When you have symptoms of a respiratory illness you are highly likely to be infectious. When you are coughing and sneezing you produce droplets and aerosols that land on surfaces, are breathed in by others or you pass on through touching surfaces and people.

We all need to take time to rest and recover when we are ill. If you are unwell with symptoms of a respiratory infection (see below), including a high temperature you should stay at home and avoid contact with other people until you feel well enough to resume normal activities and no longer have a high temperature.

You should report your absence in the usual way. If you are well enough to work, you should work from home until your active symptoms subside if you are able to do so. If you are not able to work from home because of the role that you carry out but are well enough to work managers need to decide if it is safe for you to return. They may ask you to remain off work until your symptoms pass and you no longer have a temperature for example, if you work with people who are more vulnerable to respiratory illnesses (employees or students and pupils).

Managers should refer to the section *Risk Assessment - Altering work activities* for advice on risk controls where employees are unable to work from home.

Symptoms of COVID-19, flu and common respiratory infections include:

- continuous cough
- high temperature, fever, or chills
- loss of, or change in, your normal sense of taste or smell
- shortness of breath
- unexplained tiredness, lack of energy
- muscle aches or pains that are not due to exercise
- not wanting to eat or not feeling hungry
- headache that is unusual or longer lasting than usual
- sore throat, stuffy or runny nose
- diarrhoea, feeling sick or being sick

#### *The stay-at-home approach for students and pupils*

Respiratory infections are common in children and young people, particularly during the winter months. Attending education is hugely important for children and young people's health and their future. As with employees, children and young people should remain away from their educational setting while they are unwell with symptoms of a respiratory infection, and they have a high temperature. They can go back to setting and resume normal activities when they no longer have a high temperature and feel well enough to attend. If

their symptoms are mild such as a runny nose, sore throat, or slight cough, but they are otherwise well and do not have a temperature they can continue to attend.

### **3.3 Coronavirus testing**

Testing has been important through the response to COVID-19 and particularly during the period of high prevalence driven by the Omicron variant. The population now has much stronger protection than at any other point in the pandemic, due to the vaccination programme, natural immunity, treatments, and public understanding about how to manage the risk.

Testing will now play a less important role in preventing serious illness and most people will no longer have regular access to free testing. However, settings may be asked to reinstate testing in response to a significant outbreak.

If you do take a test and have a positive result, it is very likely that you have COVID-19 even if you do not have any symptoms. You can pass on the infection to others, even if you have no symptoms. You must therefore notify your manager, stay at home, and follow the steps below:

- stay at home for a minimum of 5 days (with the date of your test as day zero).
- if you are well enough to work and can work from home during this period you can do so
- if you are not well enough to work you should follow your settings sickness absence policy
- after 5 days if you remain unwell you should follow the guidance above for symptomatic people. If you are well enough to return your setting needs to decide if it is safe for you to return. They may ask you to remain off work for up to 10 days in total for example if you work with people who are more vulnerable to respiratory illnesses (employees, students or pupils).
- Headteachers and managers should refer to the section Risk Assessment - Altering work activities for advice on risk controls in these circumstances.

If your test is negative, you can return to work providing that you are fit to do so as outlined above.

#### *The approach for children and young people*

Children and young people that attend setting are not required to test regularly.

Nevertheless, if you are informed, they have undertaken a test and received a positive result they should remain away from setting for at least 3 days. After this time, if they are well enough to do so and don't have a temperature they can return.

### **3.4 Close contacts of a positive case**

Close contacts are defined in two categories:

People who live in the same household as someone with COVID-19 or stayed overnight with them are at a higher risk of becoming infected because they are most likely to have had prolonged contact with someone who has tested positive, or their contact was in an **e** environment that increases the risk of transmission

Those at a lower risk are all other contacts

### Employees who are high risk contacts

Where possible, employees who are high risk close contacts of a positive case should work from home for 10 days since their contact with the positive person. If you are unable to work from home, consider whether it is appropriate for you to work because there remains a risk that you may be infected with COVID-19 and pass it onto others. The section Risk Assessment -Altering work activities should be followed to assist in this.

### Employees who are low risk contacts

Employees who are low risk contacts are at lower risk of becoming infected and may therefore continue to work in person but should comply with all the infection control behaviours outlined in this guidance and watch out for symptoms.

Children and young people who are close contacts should continue to attend education unless advised otherwise by the Health Protection Team in response to an outbreak.

## **3.5 Hand and respiratory hygiene**

Keeping hands clean through regular and thorough washing or sanitising should be part of everyone's normal practice. Employees, students, and visitors should:

- Thoroughly wash hands with soap and water regularly following the NHS guidance. You should clean your hands, after using the toilet, before eating and drinking, after playtime or breaktime and after coughing or sneezing.
- It is expected that readily accessible hand washing facilities will be available in setting whenever it is needed but if this is not the case alcohol-based hand sanitiser can be used. Headteachers should consider when it would be appropriate to provide hand sanitiser to encourage hand hygiene e.g., on trips to areas where washing facilities are not available #Catch it, Bin it, Kill it - Covering the mouth and nose with a tissue or sleeve when sneezing and put used tissues in the bin straight away (or put them in your pocket until you can dispose of them). Always perform hand hygiene afterwards

## **3.6 Cleaning**

Settings will have a cleaning schedule in place. We all need to take responsibility for supporting regular premises cleaning by disinfecting shared workspaces and equipment (such as those in staff rooms or shared vehicles and specific work-related equipment) even if cleaning isn't a formal part of your role.

It is good practice for shared equipment to be cleaned after each use, particularly items shared by many different users. Your setting will inform you of the areas this has been identified as being required and should provide you with the appropriate equipment and instruction to do so.

## **3.7 Ventilation**

Adequate ventilation reduces the number of small particles of viruses (aerosols) in the air therefore helping to reduce the risk of aerosol transmission. Aerosols can remain in the air after a person with a respiratory virus has been in the same area for some time. Airborne

transmission is a significant transmission route for COVID-19 and other respiratory infections such as influenza.

Some research shows that being in a room with fresh air can in some cases reduce the risk of airborne transmission of COVID-19 by over 70%. Therefore, everyone should make sure indoor spaces have a direct supply of fresh air.

Premises managers will have assessed the ventilation in our work premises.

Employees may be required to support adequate ventilation controls by opening windows, ensuring ventilation remains working such as keeping windows and trickle vents open or switching on air conditioning manually. This includes maintaining ventilation in shared vehicles either using air conditioning or opening windows.

Consideration should be given to the following regarding ventilation requirements

- Safeguarding
- Security
- Fire regulations – *Internal doors should never be wedged open and auto release devices should be installed where the need is identified*
- Increase energy consumption and associate cost – *Through the winter heating systems will need to work much harder to maintain a suitable temperature. Therefore, windows and doors in rooms no longer in use should be closed and electrical heating such as wall mounted units and air conditioning should be switched off.*

## **4.0 Other measures**

### **4.1 Get vaccinated**

Getting vaccinated for COVID-19 and influenza are highly effective ways of protecting yourself and others from these respiratory viruses. The vaccines are safe and effective. We encourage everyone who is eligible to Get vaccinated.

Evidence indicates that 2 doses of a COVID-19 vaccine continue to provide protection against severe disease. This protection declines over time and further doses such as boosters ensure your protection is maintained. Staff and students should therefore take advantage of all vaccines they are eligible for.

Whilst the vaccines, particularly booster doses, provide a high level of protection against severe disease, hospitalisation, and death, it is still possible to get COVID-19 and flu and pass it on to others. We all need to do what we can to reduce the spread to protect others and to reduce the risk of new variants developing and spreading.

### **4.2 Face coverings**

When used correctly, wearing a face covering may reduce the spread of respiratory viruses through containing droplets and aerosols. Face coverings are not PPE as they are not

designed to protect the wearer. Staff and students will not normally be expected to wear a face covering due to the impact on education and learning.

Face coverings continue to be recommended at times of high prevalence in crowded or enclosed spaces and therefore your Headteacher may identify specific circumstances where the use of face coverings is appropriate, for example on Trust/ School managed transport, for attendance at large events, on educational visits when using public transport or visiting large popular attractions. The use of face coverings may also be identified as part of an individual risk assessment.

Residential settings may also ask children and young people to wear a face covering if they have active symptoms of a respiratory infection or have tested positive for COVID-19 and are remaining on site for the period of their convalescence.

Transparent face coverings can be worn to assist communication with someone who relies on lip reading, clear sound and/or facial expression. The benefits of transparent face coverings should be considered alongside the comfort and breathability of a face covering that contains plastic, which may mean that the face covering is less breathable than layers of cloth. If you choose to wear a transparent face covering, you are advised to check if it conforms with the specification for these items.

A transparent face covering is not PPE and does not provide protection to the wearer. They should not therefore be worn as a substitute in circumstances where PPE is required as outlined in the PPE guidance. It is also important to note that face visors or shields are not the equivalent of a face covering in terms of control of virus transmission.

#### **4.2 Personal protective equipment (PPE)**

Most employees do not need additional PPE to protect against respiratory viruses. Some work activities require the use of face masks and other PPE because of the increased risks of COVID-19 transmission to either the employee or a pupil, for example, work in a residential setting with people known to be symptomatic.

Using PPE where it is not necessary, and you are not trained to do so may mean that we are increasing transmission risk to ourselves and others.

### **5. Risk assessment - altering work activities**

This section should be followed by managers when an employee:

- Has tested positive and needs to return to work between day 6 and 10
- Has symptoms of a respiratory illness and cannot work from home
- Is a high-risk close contact

Managers should undertake a risk assessment to determine how and where employees can work in these circumstances because there is a remaining risk to others, particularly those at higher risk of serious illness during this period. In undertaking the assessment, the risk of transmission should be balanced with the need to provide education and learning. Therefore, the measures that are appropriate will depend on:

- The role of the individual and its criticality for the delivery of education and learning
- The relative risk that they may be infectious e.g., are they a high-risk close contact, a positive case of COVID-19 or do they have active symptoms of a respiratory infection
- The risk of severe illness in the people they work with if they caught a respiratory infection

Risk assessments should identify measures to reduce the risk for example:

- reduce the number of people they encounter e.g., avoiding large events and gatherings such as whole school assembly, using separate areas for breaks
- ensure they do not work with people at higher risk of becoming severely unwell
- enable enhanced infection control measures to be applied such as increased hand hygiene and cleaning, limiting sharing of equipment with others, increasing ventilation etc

If it is not possible to follow the requirements outlined above, Headteachers should consider if it would be more appropriate to temporarily redeploy the person to another role or to require the person to remain absent from setting depending on the relative level of the risk identified.

## **6. Individual risk assessments**

The roll out of the vaccination programme and the development of treatments has helped to reduce the risk of transmission and the outcomes for anyone catching COVID-19, including people who were previously identified as clinically vulnerable or clinically extremely vulnerable. Most people previously considered vulnerable are now considered to be at no substantial greater risk than the general population and they are advised to follow the same infection control behaviours as everyone else. There remains a smaller number of people that do remain at higher risk of serious illness and therefore some employees will continue to need individual risk assessments to be in place because of personal factors that may increase their risk of serious illness if they contract COVID-19 or other respiratory viruses. The standard risk assessment template can be used to record this.

Individual risk assessments should be completed for anyone who:

- Is immunocompromised due to a health condition or treatment
- Is pregnant
- Has been advised by their medical practitioner to take precautions to protect against respiratory infections

Although risks will also be reduced by any personal immunity acquired through previous infection and/or vaccination an individual risk assessment is still required in these circumstances. Headteachers may not know if an employee falls into an at-risk group. Therefore, managers should proactively ask staff to inform them if they consider themselves to be at higher risk or if they have any concerns they might be. Managers must ensure that individual risk assessments are reviewed at appropriate intervals, for example, where there is an increase (or decrease) in viral prevalence, because of a change in work activity or a change in health condition. The conversations should not be a single, point in time discussion but ongoing. All conversations must be undertaken in a sensitive and considerate way. For some employees the conversation may be very difficult, and they may not have widely discussed the issues raised previously if at all.

Managers must ensure there is enough time to have the conversation at a pace and in a way that works for the employee. Managers also need to make sure that colleagues mental stress is not increasing over time and changes may be needed because of changes to their physical health.

Whilst the risk assessment will focus on the factors affecting physical safety, managers should also consider psychological safety. In this case a stress risk assessment may be the most appropriate tool to use. Where pupils and students are identified as being at higher risk these principles for individual risk assessment can also be applied.

### **6.1 Pregnancy**

Managers must also ensure they consider contracting respiratory illness as a risk factor as part of their maternity assessment.

### **6.2 Appropriate adjustments (excluding pregnancy)**

Anyone requiring an individual assessment will have received specific guidance from their medical practitioner as to the appropriate control measures. These should be included in the risk assessment. In addition, because of the conversation with the employee several measures may be considered appropriate to manage the risks. Examples include:

- For employees who are highly immunosuppressed it may not be appropriate for them to work in a frontline role. This may be a permanent or temporary requirement for example depending on treatment cycles or viral prevalence
- Ensuring employees do not work with households or individuals known to have active symptoms of viral infections or who have tested positive for COVID-19 within the last 10 days for example in residential or home settings
- Alteration of duties to enable all or most of the role to be undertaken at home
- Alteration of duties or work location to enable less close contact with others such as working in an area that is separate from other people or working with a limited number of people
- Identify where pupils cannot follow infection control measures, for example, those who are less able to follow hand and respiratory hygiene measures fully and altering duties, so the employee does not work with them
- Wearing a face covering and asking others to do the same where close contact is necessary if appropriate in their role

Where employees are not in the at-risk groups identified but are concerned about being at work the manager should have a comprehensive discussion with them about:

- The general arrangements that have been put in place to manage the risk
- How arrangements will be monitored to ensure that they are being implemented
- The concerns that the employee has

Managers should be sensitive to the fact that some employees, students, and pupils will have previously required an individual risk assessment and may be anxious that this is no longer the case

### **6.3 Reasonable adjustments**

There may be some colleagues who haven't previously needed any specific adjustments, but the current situation means they now do. For example, some conditions may result in a weakened immune system, leaving the person more vulnerable to getting an infection, some people may have difficulties with using personal protective equipment or interacting with people who do where it is required, and those with a mental health condition may feel increased levels of anxiety and stress. This should be assessed and explored as part of the individual risk assessment process where this applies or separately where it does not.

#### **6.4 Other**

If employees live in a household with someone who is at higher risk and are concerned that work will increase the risk to themselves and thereby to their household, managers should discuss these concerns. Strict adherence to the guidance will help to minimise the risk but colleagues may need support to feel less anxious. If a colleague has any other concerns that are not included in the above managers should discuss these and consider if any adjustments or supportive measures would be appropriate.