



TCV COVID-19 Secure Guidance



TCV COVID Secure Workplace Guidance

About this document

Going forward we will have to learn to live with COVID-19 as an endemic disease. Across TCV, COVID safety actions have been relaxed with few, if any, being compulsory. In the workplace it is down to individual organisations to determine what needs to be in place. TCV will continue to adopt best practice but, legally, there are no longer specific workplace actions which must be in place besides the legal requirement for risk assessment.

Our approach to managing the risk of COVID is to have TCV-wide principles with a small number of actions that must be followed by everyone. However, most actions will be determined at a local level based upon the risk.

This document covers all compulsory actions, general principles and how to determine risk levels at a local level. A more detailed explanation of COVID-Secure actions which can be adopted is explained in the 'Guidance for COVID Secure Workplace Actions' document.

Local offices and projects will continue to carry out COVID risk assessments, but they will have the freedom to determine the risk and adopt proportionate actions. This will mean that some centres may continue to adopt social distancing, one-way systems and other safety actions where others do not.

Contents	Page no.
1.0 Introduction	3
1.1 Basic Principles	3
1.2 Self Isolation	3
1.3 Symptomatic Person in the Workplace	3
1.4 Someone develops symptoms or tests positive following attendance in a TCV workplace	4
1.5 Emergencies & First Aid	4
1.6 Government Tracing and QR codes	5
2.0 COVID Risk Assessments	5
2.1 Assessing risk level	6
2.2 Common COVID-secure mitigation measures	7
2.3 Stress, wellbeing and aggression factors during decision making	7
3.0 Local or National Government Guidelines and Restrictions	7
4.0 Offices and Other Premises	7
5.0 Project Work	8
5.1 Refreshments	8
6.0 Vehicles	8

1.0 Introduction

1.1 Basic Principles

The basic principles which should be in place throughout TCV:

- **Do not come into work if you have COVID-19 symptoms or have tested positive**
- **Risk assess COVID locally and implement COVID safety actions**
- **Wash your hands when arriving at work, at home and numerous times throughout the day**
- **Ventilate indoor spaces/vehicles regularly**
- **Clearly communicate any local COVID actions that people are expected to follow**

1.2 Self Isolation

Do not leave home if you have coronavirus symptoms or have tested positive.

Self-isolation is the most effective means of preventing spreading the virus. If you have COVID-19 symptoms or have tested positive, you **must not come to work**. Speak to your leader as soon as possible to decide what to do. If a member of your household/support bubble is symptomatic or has been tested positive, or you have come into close contact (see section 1.4) with a known case, please speak to your leader before attending work. If you have been fully vaccinated, then self-isolation will not be required but testing may be.

[Symptoms](#) are becoming more varied than the following three most widely known symptoms:

- high temperature
- a new and continuous cough
- a loss of taste/smell

Some younger adults are experiencing 'cold like' symptoms (headache, runny nose, joint aches). Some may just feel 'under the weather' and more tired than normal, particularly if vaccinated.

If you feel unwell in ways similar to the above, please do not attend work and speak to your leader. It is recommended that you [get tested](#) to confirm you do not have COVID before attending work.

1.3 Symptomatic Person in the Workplace

If anyone turns up to work, whether employee or volunteer, and shows signs of [symptoms](#) of coronavirus, they must be sent home immediately, preferably not using public transport. This should be reported to your leader and an assessment made regarding the risk of transmission to others based upon; the time they spent in the workplace and, who they have been near. If they just arrived on site, not touched anything, and remained 2m away from others then no further action is required. If, however they develop the symptoms later on then they may have touched surfaces and items and been near others. Therefore, further action must be taken which is covered in section 1.4.

1.4 Someone develops symptoms or tests positive following attendance in a TCV workplace

This covers anyone who has been in a TCV premises, vehicle or on a project and who has developed symptoms later in the day or notifies TCV that they have symptoms or have tested positive for COVID in the subsequent days of attendance.

A person is likely to be contagious during the 48 hours prior to developing symptoms. If someone contacts us because they have tested positive or have developed symptoms, and they haven't been in a TCV workplace in the 48 hours prior to the symptoms starting or the test, then the risk is low. A quick assessment of items and surfaces that they have used can be done followed by a clean down.

If the person notifies us and they have been in a TCV workplace within the 48-hour contagious period, then we will need to respond appropriately. This will involve determining where the person has been, what they have touched (surfaces and equipment) and who has been in close proximity to them. Any shared surfaces and items used by the individual must be cleaned using the established cleaning methods. The premises should be closed until it has been cleaned.

Anyone (this includes staff, volunteers, office visitors etc.) who has been in close proximity to the person during this period can be notified where we have contact information. However, it is important we do so appropriately by ensuring the following:

- We should not advise or insist they self-isolate.
- Never share the name of the person who has COVID or has symptoms.
- Tell them that someone they have been working near has either developed symptoms or tested positive and that they should take whatever precautions they feel is necessary (which may include self-isolation or PCR testing).

The government define close proximity as a person who has been close to someone who has tested positive for COVID-19 anytime from 2 days before the person was symptomatic up to 10 days from onset of symptoms (this is when they're infectious to others). In TCV workplaces this would be a person who:

- has had face-to-face contact (within 1m), including:
 - being coughed on
 - having skin-to-skin physical contact, or
 - contact within one metre for one minute
- has been within 2m of someone who has tested positive for COVID-19 for more than 15 minutes (either in one-off contact or added up during a day)
- has travelled in a small vehicle, or near someone in a large vehicle

1.5 Emergencies & First Aid

Emergencies take precedence over COVID-19 safety actions. For first aid guidance follow the [HSE advice](#).

If first aid is required, then try to assist at a safe distance from the casualty as much as you can and minimise the time you share a breathing zone. If they are capable, tell them to do things for you, but treating the casualty properly should be a first aiders priority.

Employees and VOs can continue to be first aiders if they are vulnerable to more severe reactions to COVID providing there has been a risk assessment carried out and they agree to continue in the role. Extra precautions will be required, for example, face masks, eye protection and an apron. These will

also be needed if the first aid risk assessment suggests dealing with severe bleeding or other bodily fluids is likely. Surgical gloves should be in all first aid kits already. Provision of the above kit and sharing duties with other first aiders to reduce likelihood of exposure are sensible mitigations for first aiders who are clinically vulnerable.

First aiders will need to be familiar with [guidance](#) on safe use and disposal of face masks and other PPE (this [guide](#) could be placed in first aid kits or given to all first aiders). Rescue breaths during [CPR](#) is to be avoided at present - see the [Resuscitation Council](#).

1.6 Government Tracing and QR codes

TCV should be able to support government tracing using our usual volunteer registration process and employee records. We will not need to collect contact information for anyone whose information we already have. There is more detail on [this](#) JIFI page regarding the collection of contact data. If unregistered volunteers attend an activity we should record their contact details to support any government trace systems.

QR codes will not be necessary in most settings. The government guidance for the use of QR codes is aimed at indoor venues with visitors where contact information is unknown. Where we manage a venue and open it up to people, we have no contact details for, then QR codes may be relevant depending on how those people use the venue. There is more advice on [this](#) government web page, but if you think you may need to use a QR code please speak to your Operations Director.

TCV employees can download the 'NHS Track and Trace', 'Protect Scotland', 'Stop COVID NI', app onto their work phone, if you are in the public domain, as part of your work.

2.0 COVID Risk Assessments

COVID should feature in our risk assessments. If we are adopting minimal actions due to the risk, then this can be included in the general risk assessments for the activity. However, if you assess the risk as higher and are adopting numerous COVID safety actions then you may choose to record the COVID risk assessment separately. The manner we record the assessment is not as important as implementing the actions and keeping everyone safe.

It will be up to local operations to determine what is required based upon the risk (see section 2.1). There are general mitigation principles outlined in section 2.2 which can be implemented locally depending on the risk level. 'A Guide for Implementing COVID-19 Safety Actions in TCV' is available on [JIFI](#) to help with the implementation of these actions.

The generic COVID risk assessments for office, practical work and shared vehicles remain available but must be adapted for local circumstances in the same way as all other generic risk assessments. Unless explicitly stated in this document, no action on the generic risk assessments is mandatory.

2.1 Assessing risk level

When assessing the local COVID risk level the following factors should be considered:

Vulnerability

Employees, volunteers/VOs, and participants classed as [clinically extremely vulnerable](#) (CEV) are at greater risk of severe symptoms from COVID. This may be one factor which increases the risk level. It is also necessary to consider anyone living with someone who is vulnerable. Vulnerability must also be combined with the context to determine the risk level. So, for example, a TCV employee who is CEV that works five days a week, with other people, in a poorly ventilated office would be a higher risk than a VO who lives with someone CEV and works outdoors for 80% of the time.

Environment

The enclosed nature of the work environment is another factor which will influence the risk level. Indoor work areas are higher risk than outdoor work areas. However, this should also be considered alongside local circumstances, ventilation levels and density of people (see below).

Number of people mixing

The more people mixing the higher the risk of COVID spreading. A small TCV office may be considered high risk due to its size but if it is only ever used by two people then the risk remains low. A large building with a handful of TCV employees using it may be considered low risk due to the low density. However, if there are lots of other users of the building, with evidence of bottle necking at entrances and exits or in refreshment or smoking areas, then we may consider the risk to be higher.

Ventilation

Ventilation of enclosed spaces reduces the risk of coronavirus spreading. This can be natural (opening window and doors) or mechanical (using fans and ducts to bring in fresh air from outside).

To determine risk level think about the amount of ventilation in enclosed spaces. Do we have any control over it? What is the method of ventilation and how do we maintain comfort levels? If in an office, we can't open windows or can only open one or two slightly, then the ability to ventilate is reduced and the risk will be higher.

Local COVID levels

The final factor to consider in local risk assessments is the [case rate](#) per 100,000 people. This is a good measure to base your estimates for prevalence of the virus. The government page has 8 categories ranging from no data to over 800 cases per 100,000 people. This scale can be used to risk assess the likelihood of encountering someone carrying the virus. It should be noted that even at the top of the range (800+) this equates to 1 in 100 people having the virus. At this level you still need to encounter 100 people, in a way that makes catching the virus probable, to have a good chance of getting infected.

However, this should also be balanced with hospital admission numbers and death rates. If these are low, then the overall risk rating can be reduced because although there may be high likelihood of transmission there is lower risk for severity of outcome. Unlike falling from height of 20ft, getting COVID does not carry a high likelihood of serious illness or [death](#) in most cases.

A high prevalence would not in itself mean that we should assess the COVID risk as high and put lots of extra safety actions in place. It would need to be combined with the other factors outlined above. For example, a healthy young adult working outdoors with no CEV volunteers could assess COVID risk locally as low even though locally the case rate was high. At the same time someone working in a building who is CEV, with low levels of ventilation and 30-40 other people using the building, would assess the COVID risk higher.

2.2 Common COVID-secure mitigation measures

The following is the list of the most common actions used to reduce the risk of COVID in the workplace. The risk level, determined by local risk assessments (see section 2), will dictate whether any of these should be in place, and to what extent.

- Social distancing – measures to keep people 2m apart or 1m+ (1m with further actions)
- Workplace cleaning – keeping the workplace clean and sanitised
- Personal hygiene – providing hand washing and sanitising stations
- Ventilation – natural or mechanical ventilation
- Use of face coverings
- Preventing, or reducing number of, shared items and sanitising shared items
- Communication to workers of Covid secure expectations (signage, written information, briefings)

2.3 Stress, wellbeing and aggression factors during decision making

It is important to remember that everyone views the risk of COVID differently depending on their personal circumstances and experiences. The principle of being open minded and respectful of other people's opinion is important. Some people will not want to adopt any COVID actions and others may want to do a lot more than is implemented locally.

Where TCV are adopting stricter COVID actions than what the government stipulate, there will be a risk of opposition by some people. This increases the risk of aggression, which should be included in the risk assessment and actions to protect those at risk of the aggression. This is also a foreseeable risk where people feel we should be doing more to protect them and others.

Where local operations decide to adopt COVID actions, which other people must adhere to, then there is a risk of stress for those responsible for ensuring compliance with them. This is foreseeable on programmes where actions such as social distancing is required but are no longer required in social situations according to Government guidelines. This should be considered as part of the decision-making process, especially when actions are considered which go beyond government guidelines.

3.0 Local or National Government Guidelines and Restrictions

These must be considered and, where they impact places of work, then they must be adhered to. Discuss any concerns or changes to local COVID guidance with your leader. National changes to COVID guidance that impact the majority of TCV will continue to be discussed at leadership level with any changes to TCVs approach being communicated as soon as possible.

4.0 Offices and Other Premises

All premises used by TCV should have a risk assessment and must include the risk of COVID. Cleaning will need to continue following the 'Guidance for COVID Secure Workplace Actions' document as a guide. The risk of COVID should determine the frequency and what requires cleaning.

5.0 Project Work

All TCV programmes must be risk assessed for COVID using the criteria in section 2. Actions to reduce the risk must be included and generic actions adapted to suit local circumstances.

5.1 Refreshments

Refreshments are permitted on projects but must be risk assessed. They increase the risk of sharing the virus on items handled by more than one person and increase the risk of people congregating. These two aspects, as a minimum, must be addressed in the risk assessment for any project that wishes to provide refreshments.

If groups have got used to TCV not providing refreshments, then we may wish to continue in this manner as it will reduce risk and costs. However, it is recognised that this can be an important aspect of the social benefit on programmes and so, provided it is risk assessed, it can take place.

6.0 Vehicles

All vehicles use must include the risk of COVID unless the vehicle is only ever used by one person. A detailed risk assessment must be undergone for all passenger carrying vehicles.

For all TCV vehicles try to carry as few people as possible.

All passengers should wash their hands, or sanitise them, before entering the vehicle.

Passengers should sit in the same seat for outward and return journeys. In the event of passengers remaining unchanged from day to day the same seats should be allocated to them as previous days.

All passengers, including the driver, must wear face coverings unless they cannot for any reasons as stated on the government [page](#). These include health reasons; they are under 11 or where it will cause severe distress. Drivers must ensure face coverings do not obscure their vision in any way e.g. steaming up glasses. These may need to be provided as it may not be assumed that people will be carrying them with them.

No vehicle will use the recirculating air function when carrying passengers. All drivers must be familiar with this function for their vehicles and ensure it is not used.

Unless the weather makes it uncomfortable or dangerous, ensure good ventilation whilst travelling with passengers by opening windows. Even windows slightly open will provide some natural ventilation.