

COVID-19 Response Summary

STEP 3 – FROM MAY 17TH 2021

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What is COVID-19?

Coronavirus disease (COVID-19) is an infectious disease caused by a newly discovered coronavirus.

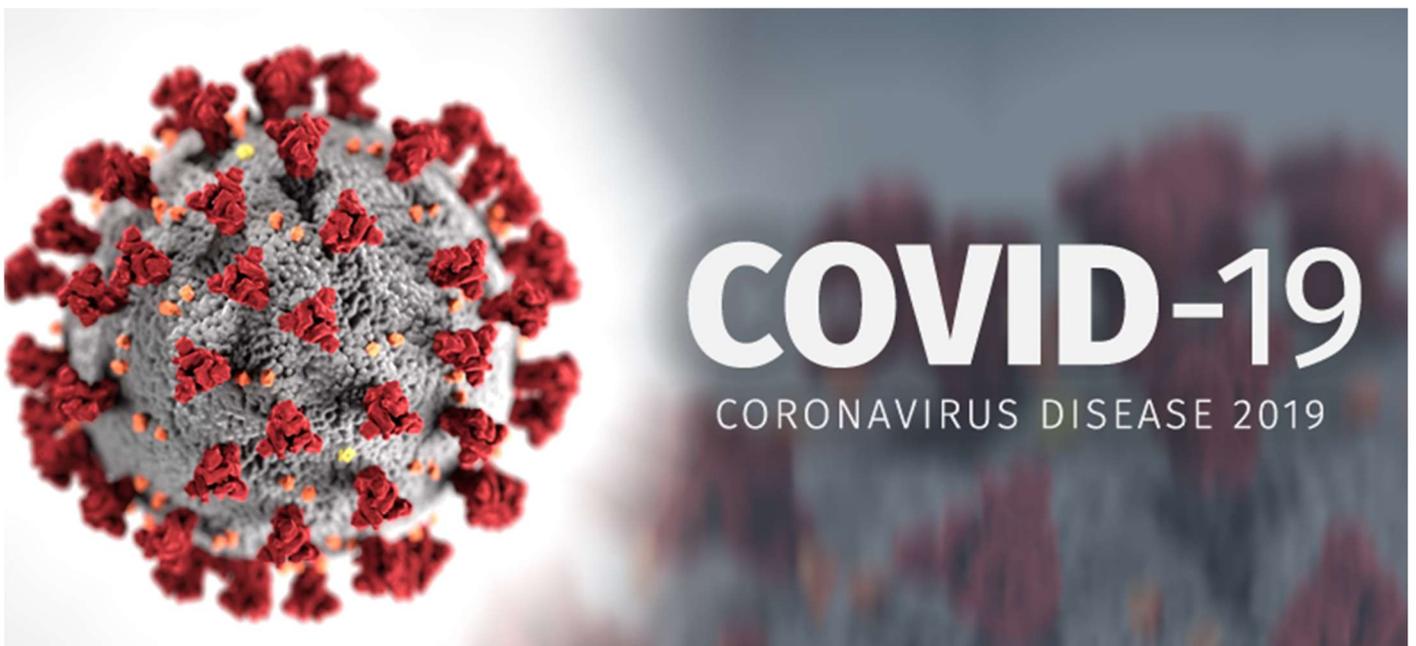
Most people infected with the COVID-19 virus will experience mild to moderate respiratory illness and recover without requiring special treatment. Older people, and those with underlying medical problems like cardiovascular disease, diabetes, chronic respiratory disease, and cancer are more likely to develop serious illness.

The best way to prevent and slow down transmission is to be well informed about the COVID-19 virus, the disease it causes and how it spreads. Protect yourself and others from infection by washing your hands or using an alcohol based rub frequently and not touching your face.

The COVID-19 virus spreads primarily through droplets of saliva or discharge from the nose when an infected person coughs or sneezes, so it's important that you also practice respiratory etiquette (for example, by coughing into a flexed elbow).

At this time, there are no specific vaccines or treatments for COVID-19. However, there are many ongoing clinical trials evaluating potential treatments.

World Health Organisation (WHO) June 2020
<https://www.who.int/health-topics/coronavirus>



The UK Government Roadmap

From 8 March 2021, people in England will see restrictions start to lift and the government's four-step roadmap offer a route back to a more normal life.

The success of the vaccination programme is one factor - so far over 17 million people have had their jabs - but by no means the whole story. The public have also risen to the challenge of suppressing COVID-19: by obeying the law; staying at home; getting tested when needed; isolating when required, and following the 'hands, face, space' and 'letting fresh air in' guidance.

Taken together, this means that even though absolute case numbers remain relatively high, we will be able to begin relaxing the current strict lockdown. While we must all remain vigilant - in particular against the threat from new COVID-19 variants - and continue to protect the NHS, a safe exit from lockdown can begin. It will take place in four steps; and at each step, we plan to lift restrictions across the whole of England at the same time.

In implementing this plan we will be guided by data, not dates, so that we do not risk a surge in infections that would put unsustainable pressure on the NHS. For that reason, all the dates in the roadmap are indicative and subject to change. There will be a minimum of five weeks between each step: four weeks for the scientific data to reflect the changes in restrictions and to be analysed; followed by one week's advance notice of the restrictions that will be eased.

Only when the government is sure that it is safe to move from one step to the next will the final decision be made. The decision will be based on four tests:

- the vaccine deployment programme continues successfully
- evidence shows vaccines are sufficiently effective in reducing hospitalisations and deaths in those vaccinated
- infection rates do not risk a surge in hospitalisations which would put unsustainable pressure on the NHS
- the government assessment of the risks is not fundamentally changed by new Variants of Concern

The government will continue to protect the public by ensuring local outbreaks are managed quickly and effectively and that we combat new dangerous variants, both within the UK and at the border. The government will also continue to support families and businesses throughout the steps set out in the roadmap - details of which will be set out by the Chancellor in the Budget on 3 March.

Find out more about the current coronavirus (COVID-19) restrictions, including what you can and cannot do here:

[COVID-19 Coronavirus restrictions: what you can and cannot do - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/coronavirus-covid-19/covid-19-restrictions-what-you-can-and-cannot-do)

National Guidance for STEP 3 (May 17th 2021)

As part of Step 3, no earlier than 17 May, the government will look to continue easing limits on seeing friends and family wherever possible, allowing people to decide on the appropriate level of risk for their circumstances.

This means that most legal restrictions on meeting others outdoors will be lifted - although gatherings of over 30 people will remain illegal. Indoors, the Rule of 6 or 2 households will apply - we will keep under review whether it is safe to increase this.

As soon as possible and by no later than Step 3, we will also update the advice on social distancing between friends and family, including hugging. But until this point, people should continue to keep their distance from anyone not in their household or support bubble.

Business and Activities

Most businesses in all but the highest risk sectors will be able to reopen. In all sectors, COVID-Secure guidance will remain in place and businesses may not cater for groups bigger than the legal limits. Indoor hospitality will reopen - and as in Step 2, venues will not have to serve a substantial meal with alcoholic drinks; nor will there be a curfew. Customers will, however, have to order, eat and drink while seated.

Other indoor locations to open up in Step 3 include indoor entertainment venues such as cinemas and children's play areas; the rest of the accommodation sector, including hotels, hostels and B&Bs; and indoor adult group sports and exercise classes. The government will also allow some larger performances and sporting events in indoor venues with a capacity of 1,000 people or half-full (whichever is a lower number), and in outdoor venues with a capacity of 4,000 people or half-full (whichever is a lower number). In the largest outdoor seated venues, where crowds can be spread out, up to 10,000 people will be able to attend (or a quarter-full, whichever is lower).

Events

Up to 30 people will be able to attend weddings, receptions and wakes, as well as funerals. This limit will also apply to other types of significant life events including bar mitzvahs and christenings.

Review of social distancing

Finally, before Step 4 begins, the government will complete a review of social distancing and other long-term measures that have been put in place to cut transmission. This will inform decisions on the timing and circumstances under which the rules on 1 metre plus, the wearing of face coverings and other measures may be lifted. This will also inform guidance on working from home – which should continue wherever possible until this review is complete.

STEP 3 at Nansa (from May 17th 2021)

Support for Adults and Young People

- Staff will NOT be required to wear masks or face coverings when outdoors
Rationale: COVID-19 is less transmissible in outdoor spaces and it is important in terms of communication and interaction for our members to see the faces of the Nansa team
- Members from different BUBBLES/ZONES will be able to socialise and interact outdoors (social distancing will still apply)
Rationale: COVID-19 is less transmissible in outdoor spaces and it is important that members have opportunities to interact and socialise with peers and friends
- There will NOT be a requirement to QUARANTINE resources and items used by members; instead, the focus will shift to a re-emphasis on the importance of hygiene (hand washing prior to and after activities)
Rationale: evidence now suggests that surface transmission of COVID-19 is highly unlikely/rare. The World Health Organisation now recognises COVID-19 as an airborne virus; this means it is usually passed on (from one person to another) via droplets in the air around us
- Staff meetings (indoors) must be facilitated in well ventilated spaces (windows must be open). Providing social distancing is observed, staff will NOT be required to wear a mask (masks can be removed from the start of the meeting, until the end)
Rationale: this rule applies to all staff working/meeting with others indoors providing: no service-users/members are present; the space is well ventilated; and they have had a COVID-19 vaccine at least 21 days prior
- All staff will take a PCR test every Thursday (and Nansa will introduce rapid lateral flow testing twice weekly – mandatory for staff – optional/available to members)
- S/D (social distancing) of at least 1^{m+} will remain applicable in all scenarios; where S/D is not possible (during support or care indoors) appropriate PPE applies
- Temperature checks will take place on entry to the premises (this applies to staff, service-users and visitors)
- All staff working indoors with service-users will have had a COVID-19 vaccine at least 21 days prior
- Staff living with a child/adult who is self-isolating (due to potential contact) may continue to attend work providing a rapid lateral flow test is taken every morning. Where/when a member of an employee's household has tested positive for COVID-19, the staff member should NOT attend work and should self-isolate for 10 days
- Staff who choose to travel abroad do so at their own risk; if for any reason they are required to self-isolate or extend their period of leave due to changes/restrictions the leave will need to be taken as Annual Leave or Unpaid

Support for Children and Families

- Staff will NOT be required to wear masks or face coverings when outdoors
Rationale: COVID-19 is less transmissible in outdoor spaces and it is important in terms of communication and interaction for our members to see the faces of the Nansa team
- Staff facilitating indoor sessions for children and families will take a rapid lateral flow test prior to delivery (on the day) and may use an alternative to a mask (i.e. visor or shield). All indoor sessions will be facilitated in well-ventilated spaces and where possible adults (parents/carers) should socially distance (S/D) and/or be encouraged to wear a mask where S/D is not possible
Rationale: this guidance is in-line with early-years/nursey response to COVID-19. Clear communication and visible facial expression are vital in early-intervention support and the risk of transmission (in childhood) is considered to be very low
- Networking/social meetings facilitated for parents/carers will take place in a well-ventilated space and chairs will be well-spaced to allow for S/D. Once parents are seated, masks can be removed to allow for comfortable discussion and refreshments to be consumed during the meeting
- Staff meetings (indoors) must be facilitated in well ventilated spaces (windows must be open). Providing social distancing is observed, staff will NOT be required to wear a mask (masks can be removed from the start of the meeting, until the end)
Rationale: this rule applies to all staff working/meeting with others indoors providing: no service-users/members are present; the space is well ventilated; and they have had a COVID-19 vaccine at least 21 days prior
- S/D (social distancing) of at least 1m⁺ will remain applicable in all scenarios; this excludes interactions with children during sessions
- Temperature checks will take place on entry to the premises (this applies to staff, service-users and visitors)
- All staff working indoors with children will have had a COVID-19 vaccine at least 21 days prior (or be required to wear a mask and take a rapid lateral flow test prior to attending the premises)
- Staff living with a child/adult who is self-isolating (due to potential contact) may continue to attend work providing a rapid lateral flow test is taken every morning. Where/when a member of an employee's household has tested positive for COVID-19, the staff member should NOT attend work and should self-isolate for 10 days
- Staff who choose to travel abroad do so at their own risk; if for any reason they are required to self-isolate or extend their period of leave due to changes/restrictions the leave will need to be taken as Annual Leave or Unpaid

Office Based Work (Business Support Team)

- Staff will NOT be required to wear masks or face coverings when outdoors
Rationale: COVID-19 is less transmissible in outdoor spaces and it is important in terms of communication and interaction for our members to see the faces of the Nansa team
- Staff meetings (indoors) must be facilitated in well ventilated spaces (windows must be open). Providing social distancing is observed, staff will NOT be required to wear a mask (masks can be removed from the start of the meeting, until the end)
Rationale: this rule applies to all staff working/meeting with others indoors providing: no service-users/members are present; the space is well ventilated; and they have had a COVID-19 vaccine at least 21 days prior
- If/when working in a well-ventilated office (windows open) staff are NOT required to wear a mask at their desk, providing: social distancing can be observed; they are seated; and they have had a vaccine at least 21 days prior. If an employee has not had the vaccine 21 days prior they should continue to wear a mask and take a rapid lateral flow test prior to attending the premises. When leaving the desk (not seated) masks should be worn when walking about the premises
- Temperature checks will take place on entry to the premises (this applies to staff, service-users and visitors)
- Staff living with a child/adult who is self-isolating (due to potential contact) may continue to attend work providing a rapid lateral flow test is taken every morning. Where/when a member of an employee's household has tested positive for COVID-19, the staff member should NOT attend work and should self-isolate for 10 days
- Staff who choose to travel abroad do so at their own risk; if for any reason they are required to self-isolate or extend their period of leave due to changes/restrictions the leave will need to be taken as Annual Leave or Unpaid



Retail and Trading (including Train and Trade)

- Staff will NOT be required to wear masks or face coverings when outdoors
Rationale: COVID-19 is less transmissible in outdoor spaces and it is important in terms of communication and interaction for our members to see the faces of the Nansa team
- Staff are NOT required to wear a mask when sorting donations (back of house), this is providing: they are in a well ventilated space (windows or door open) and they can socially distance (or alternatively when they are working alone)
- Staff should wear a mask (at all times) when on the shop floor, this also applies to volunteers and trainees. However, if the individual is exempt from wearing a mask they may use an alternative (such as a visor) or they can be provided with a daisy lanyard now nationally recognised as a sign of exemption
- There will NOT be a requirement to QUARANTINE resources and items (such as donations) instead, the focus will shift to a re-emphasis on the importance of hygiene (hand washing prior to and after sorting)
Rationale: evidence now suggests that surface transmission of COVID-19 is highly unlikely/rare. The World Health Organisation now recognises COVID-19 as an airborne virus; this means it is usually passed on (from one person to another) via droplets in the air around us
- Coaches and Retail Supervisors (working alongside trainees) will be required to have had a COVID-19 vaccination at least 21 days prior to engaging with the service-user. Where possible, we will offer the vaccine to volunteers and kick-start workers. Where/when an individual has not had the vaccine, they should take a rapid flow lateral test prior to attending
- We will continue to limit the number of customers/people in every outlet and social distancing will be observed
- Staff living with a child/adult who is self-isolating (due to potential contact) may continue to attend work providing a rapid lateral flow test is taken every morning. Where/when a member of an employee's household has tested positive for COVID-19, the staff member should NOT attend work and should self-isolate for 10 days
- Staff who choose to travel abroad do so at their own risk; if for any reason they are required to self-isolate or extend their period of leave due to changes/restrictions the leave will need to be taken as Annual Leave or Unpaid

Cleaning, Disinfecting, and Sanitising

Definitions:

- **Cleaning** removes germs, dirt, and impurities from surfaces or objects
- **Disinfecting** kills germs on surfaces or objects
- **Sanitizing** lowers the number of germs on surfaces or objects to a safe level, as judged by public health standards or requirements

Cleaning Procedures: At Nansa we ask employees to adhere to the following;

- **Hand Washing** removes germs, dirt, and impurities (and SOAP kills the Novel Coronavirus)



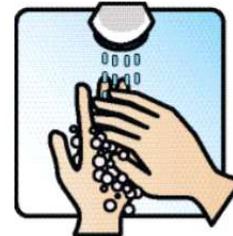
Step 1
Wet Hands

Use warm water to remove any visible dirt or soiling.



Step 2
Apply Soap

To prevent contamination, always use liquid soap.



Step 3
Lather & Scrub
20 seconds

Clean palms, back of hands, thumbs, each finger, between fingers and fingernails.



Step 4
Rinse Hands
20 seconds

Rinse under warm running water, pointing your fingers downwards.



Step 5
Turn Off Tap

If possible use a paper towel or your elbow to prevent contamination.



Step 6
Dry Hands

Dry thoroughly using a dry paper towel or a hand dryer.

- **Laundry** Government advice states:

Wash items in accordance with the manufacturer's instructions. Use the warmest water setting (in-line with manufacturer's instructions) and dry items completely. Dirty laundry that has been in contact with an unwell person can be washed with other people's items. Do not shake dirty laundry, this minimises the possibility of dispersing virus through the air.

At Nansa we recommend using a cotton laundry-bag or pillow-case to contain clothes worn while at work. The items should then be laundered inside of the bag; but may be washed along with your other laundry at home (there is no recommendation that you should need to wash separately).

- **Environments** should be clean and minimalist to create a safe space where effective Infection Control measures can be more easily achieved

Environments should utilise seating and furnishings that are non-absorbent wherever possible. Furniture that can be easily cleaned (or **Disinfected**) after use should be used if possible and the use of soft-furnishings (such as rugs and fabric-sofas) should be reduced wherever possible.

Touch-points should be reduced; resources and equipment in working areas should be minimised to what is absolutely necessary during the delivery of a session to a client.

Disinfecting Procedures:

Disinfectants differentiate themselves from other cleaning products by killing germs with chemicals rather than removing them. According to the Centre for Disease Control and Prevention (CDC), disinfectants should be used on surfaces that have already been cleaned of dirt and grime, especially high-touch surfaces in common household areas, to prevent the spread of diseases.

Disinfection products should meet the BS EN standards. Check product labels for either of these codes: BS EN 1276 or BS EN 13697.

Specific Dettol™ products have also demonstrated effectiveness (>99.9% inactivation) against coronavirus strains from the same family as the 2019 Novel Coronavirus in third party laboratory testing, when used in accordance with the directions for use. These products are: Dettol Antibacterial Surface Cleanser Spray, Dettol Antibacterial Surface Cleanser Wipes, Dettol All-In-One Disinfectant Spray, and Dettol Disinfectant Liquid.

At Nansa we must ensure products used for **disinfection** are either; from the list of Dettol approved products, or products with one of the BS EN codes as listed above.

Daily cleaning schedules should include the disinfection of light-switches, door handles, devices, kettle, cupboards and drawers etc.

Bleach is a strong and effective disinfectant; however, bleach should not be used while clients, customers, and/or visitors are present in a Nansa premises. Bleach will only be used for mopping hard floor areas in Nansa kitchens, toilets, and intimate care rooms only.

We must also ensure that all pull cords (for lights and alarms) across Nansa premises are hygiene cord rather than cotton based. Hygiene cord switches should also be disinfected frequently (these are considered to be a HIGH RISK touch-point).

Sanitising Procedures:

There are 3 main methods of sanitising:

- **Heat** (using hot water, steam, hot air, fire, or cooking)
- **Radiation** (irradiation is a means of sanitising, because it kills bacteria by breaking down bacterial DNA, inhibiting bacterial division. Radiation passes through the equipment, disrupting the pathogens that cause contamination e.g. microwaves)
- **Chemical** (iodine, chlorine, alcohol (above 60% vol), and sodium hypochlorite)

At Nansa, our response to COVID 19 will largely rely on Infection Control measures that promote effective **cleaning** schedules with frequent **disinfection** as described above. However, there are also instances where we will use sanitising as a means of preventing the spread of illness and infection.

Hand Sanitising

Hand Sanitising Stations will be available at every premises (including Nansa Shops). In both the Families' Centre and the Adults' Centre, there will be a sanitising station at the main entrance, kitchen areas, and toileting/intimate-care rooms.

The product we use is a foaming solution that should ALWAYS be applied to **clean** hands (it is not a substitute for hand-washing). All staff, clients, and visitors should use the sanitiser provided:

- When entering or leaving the premises
- When entering or leaving a kitchen area
- After toileting (following thorough hand-washing)

In Shops, we will encourage customers to use the sanitiser provided (we will do this through the use of clear and prominent signage). However, we may be unable to strictly enforce this as some customers may use their own personal bottles of sanitiser and/or may prefer to wear gloves while shopping.

Responding to Symptoms

The NHS has listed three main symptoms of the Novel Coronavirus (COVID 19) that people should be aware of and ready to act upon.

What are the symptoms?

A new, **continuous cough**, where you cough a lot for more than an hour, or have three or more coughing episodes in 24 hours

Fever - where your temperature is above **37.8°C**

Anosmia – which is a **loss of smell or taste**

If you, or someone you live with, has any of these symptoms the advice is stay at home to stop the risk of giving coronavirus to others.

Risk Assessments

As part of managing Health and Safety at Nansa we must control the risks in our workplace. To do this we need to think about what might cause harm to people and decide whether we are taking reasonable steps to prevent that harm. This is known as risk assessment and it is something we are required by law to carry out.

Sometimes risk is assessed and addressed within other documentation (such as a Care and Support Plan). A good care plan is in itself, a risk assessment in relation to the care and support of a specific individual. However, we must also ensure that our activities and environment are also risk assessed.

Nansa has a company risk assessment that covers the general Health and Safety across our premises, but it is the responsibility of each department to risk assess the specific activities within their work area, e.g;

- Accepting and sorting donations in the shops
- Taking service-users out for trips and outings in the community
- Preparing and serving food
- Providing Intimate Care

A risk assessment is not about creating huge amounts of paperwork , but rather about identifying sensible measures to control the risks in your workplace. You are probably already taking steps to protect yourselves and others in your department, but a risk assessment will help you decide whether you have covered all you need to.

Think about how accidents and ill health could happen and concentrate on real risks – those that are most likely and which will cause the most harm.

For some risks, other regulations require particular control measures. Your assessment can help you identify where you need to look at certain risks and these particular control measures in more detail. These control measures do not have to be assessed separately but can be considered as part of, or an extension of, our overall risk assessment.

Sometimes it can be helpful to create other supporting materials alongside risk-assessments (visual guides, posters and reminders that will assist your team in the implementation of agreed controls and preventative measures).

The following 2 pages of this handbook provide an example of a Risk Assessment and a Visual Activity Guide (that could be used during our COVID-19 Response) to emphasise what is expected of staff in a clear and accessible way. Please be aware that the Risk Assessment example is only a small extract, our Risk Assessments moving forward will