



29 May 2020

To: Members of the National Adult Social Care Covid-19 Group

### **Test and Trace: guidance for social care employers about staff isolation**

I know many of you have questions about how the new COVID19 test and trace system will operate in practice for those working in health and social care. Under this system anybody who has had a specific “close contact” with somebody who tests positive for COVID19 will be expected to isolate themselves for 14 days, or for seven days from developing symptoms of COVID19. Broadly a “close contact” is spending 15 minutes or more within 2 metres of an infected person, very close specified personal interaction for a shorter period of time or someone who has lived within the same household during a period of potential risk transmission. Formal guidance will be issued shortly, but I wanted to ensure you had the key points of what that guidance will say sooner rather than later, so you can start to think about the potential implications for your teams.

In doing so it is helpful to distinguish between three potential scenarios where “close contact” occurs:

- A staff member who has been caring for a person who has tested positive for COVID19 or who has symptoms of COVID19 while the staff member was wearing appropriate PPE;
- A staff member who has been caring for a person who has tested positive for COVID19 or who has symptoms of COVID19 while the staff member was wearing appropriate PPE but the PPE has been breached; and
- A staff member who has been in contact with anybody else who has tested positive for COVID19 positive whether at work (most likely a colleague in communal areas) or in the community.

In the first scenario, in the overwhelming majority of cases the member of staff will not need to self-isolate. These cases will be escalated to the local public health team to advise on, but unless there are very specific circumstances around the contact, they will usually advise the staff member that they can continue to work as normal.

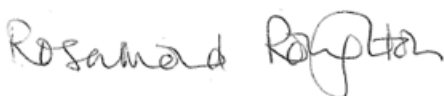
In either of the other two scenarios, the member of staff will need to isolate for 14 days in line with the advice to the general population. There is no need for other colleagues to isolate as well, although it is possible that if a staff member tests positive, they may have had contacts with multiple colleagues or been exposed to the same source of infection. Clearly this puts a premium on staff wearing appropriate PPE when caring for or working with residents and clients in all settings and using it carefully with all appropriate hygiene measures for donning (putting it on) and doffing (taking it off) and disposing of it safely. It is also important to adhere rigorously to social distancing with colleagues and others when staff are not providing personal care, for example, when having coffee breaks. We know there will be some instances where this presents its own challenges, especially for those providing supported living services.

We know that there will be instances, especially in some care homes, where providers may have a shortage of staff, and will find it difficult to replace them. We also know that securing additional staff through local arrangements will be more challenging because of the steps you have all been taking to restrict movement of staff between providers in order to reduce the spread of the virus. Thank you for taking those steps, they have been important in reducing the number of outbreaks in care homes over recent weeks. Advice from Public Health England is that while these measures are still important in stopping the spread of the virus it is more important that staff who have had a "close contact" isolate. Therefore, if the only way you can replace staff who are isolating is through sharing staff between homes or through local mutual aid arrangements you should consider that as an option, whilst still minimising as many changed settings or groups as possible. Local Directors of Public Health also have the discretion to make exemptions from the need to isolate if the contact in question is low risk, and all other options for securing enough staff to provide safe care have been exhausted, but this will generally be as a last resort.

I know that many of you will have more questions and we hope the further guidance will follow very shortly. I know that for many of you this will be hard, but we have made difficult decisions in order that we do all we can to minimise the ongoing spread of COVID19.

Finally, I want to say thank you again for all you and your teams have been doing to ensure people are cared for and supported during these challenging times. It really is remarkable.

Yours sincerely,

A handwritten signature in black ink that reads "Rosamond Roughton". The signature is written in a cursive, flowing style.

Rosamond Roughton  
Director General, Adult Social Care