



 **Review Sheet**



Last Reviewed  
16 Dec '22



Last Amended  
16 Dec '22



Next Planned Review in 12 months, or sooner as required.

Business impact



Changes are important, but urgent implementation is not required, incorporate into your existing workflow.

Reason for this review

Scheduled review

Were changes made?

Yes

Summary:

This policy is an overarching policy on coronavirus and must be read alongside the suite of COVID-19 policies and procedures on the QCS system. It has been updated following updates to the COVID-19 supplement to the infection prevention and control resource for adult social care guidance, with amendments made to sections 4.4, 5.7 and 5.18 in particular. References have also been checked to ensure they remain current.

Relevant legislation:

- Civil Contingencies Act 2004
- Control of Substances Hazardous to Health Regulations 2002
- Equality Act 2010
- The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
- Health and Social Care Act 2008 (Registration and Regulated Activities) (Amendment) Regulations 2015
- Health and Safety at Work etc. Act 1974
- Human Rights Act 1998
- Management of Health and Safety at Work Regulations 1999
- The Health and Safety (Miscellaneous Amendments) Regulations 2002
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)
- Coronavirus Act 2020



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<p>Underpinning knowledge - What have we used to ensure that the policy is current:</p>	<ul style="list-style-type: none"> <li>• Author: UK Health and Security Agency, (2022), <i>COVID-19 vaccination: booster dose resources</i>. [Online] Available from: <a href="https://www.gov.uk/government/publications/covid-19-vaccination-booster-dose-resources/covid-19-vaccination-a-guide-to-booster-vaccination">https://www.gov.uk/government/publications/covid-19-vaccination-booster-dose-resources/covid-19-vaccination-a-guide-to-booster-vaccination</a> [Accessed: 16/12/2022]</li> <li>• Author: UKHSA, (2022), <i>COVID-19 testing in adult social care</i>. [Online] Available from: <a href="https://www.gov.uk/government/publications/coronavirus-covid-19-testing-for-adult-social-care-settings/covid-19-testing-in-adult-social-care#section1-2">https://www.gov.uk/government/publications/coronavirus-covid-19-testing-for-adult-social-care-settings/covid-19-testing-in-adult-social-care#section1-2</a> [Accessed: 16/12/2022]</li> <li>• Author: Department for Transport and Department of Health and Social Care, (2022), <i>Travel to England from another country during coronavirus (COVID-19)</i>. [Online] Available from: <a href="https://www.gov.uk/guidance/travel-to-england-from-another-country-during-coronavirus-covid-19">https://www.gov.uk/guidance/travel-to-england-from-another-country-during-coronavirus-covid-19</a> [Accessed: 16/12/2022]</li> <li>• Author: UK Health Security Agency, (2022), <i>Managing healthcare staff with symptoms of a respiratory infection or a positive COVID-19 test result</i>. [Online] Available from: <a href="https://www.gov.uk/government/publications/covid-19-managing-healthcare-staff-with-symptoms-of-a-respiratory-infection-or-a-positive-covid-19-test-result">https://www.gov.uk/government/publications/covid-19-managing-healthcare-staff-with-symptoms-of-a-respiratory-infection-or-a-positive-covid-19-test-result</a> [Accessed: 16/12/2022]</li> <li>• Author: UK Health Security Agency, (2022), <i>COVID-19: information and advice for health and care professionals</i>. [Online] Available from: <a href="https://www.gov.uk/guidance/covid-19-information-and-advice-for-health-and-care-professionals">https://www.gov.uk/guidance/covid-19-information-and-advice-for-health-and-care-professionals</a> [Accessed: 16/12/2022]</li> <li>• Author: UKHSA, (2022), <i>Living safely with respiratory infections, including COVID-19</i>. [Online] Available from: <a href="https://www.gov.uk/guidance/living-safely-with-respiratory-infections-including-covid-19">https://www.gov.uk/guidance/living-safely-with-respiratory-infections-including-covid-19</a> [Accessed: 16/12/2022]</li> <li>• Author: Department of Health and Social Care, (2022), <i>Infection prevention and control in adult social care: COVID-19 supplement</i>. [Online] Available from: <a href="https://www.gov.uk/government/publications/infection-prevention-and-control-in-adult-social-care-covid-19-supplement">https://www.gov.uk/government/publications/infection-prevention-and-control-in-adult-social-care-covid-19-supplement</a> [Accessed: 16/12/2022]</li> <li>• Author: GOV.UK, (2022), <i>Reducing the spread of respiratory infections, including COVID-19, in the workplace</i>. [Online] Available from: <a href="https://www.gov.uk/guidance/reducing-the-spread-of-respiratory-infections-including-covid-19-in-the-workplace">https://www.gov.uk/guidance/reducing-the-spread-of-respiratory-infections-including-covid-19-in-the-workplace</a> [Accessed: 16/12/2022]</li> </ul>
<p>Suggested action:</p>	<ul style="list-style-type: none"> <li>• Encourage sharing the policy through the use of the QCS App</li> </ul>
<p>Equality Impact Assessment:</p>	<p>QCS have undertaken an equality analysis during the review of this policy. This statement is a written record that demonstrates that we have shown due regard to the need to eliminate unlawful discrimination, advance equality of opportunity and foster good relations with respect to the characteristics protected by equality law.</p>



## 1. Purpose

**1.1** To describe the arrangements in place at to ensure it remains up to date with latest guidance on the safe management of Coronavirus and COVID-19.

To provide information on the actions required to be carried out by in the event of a N/A or contact, or member of staff contracting Coronavirus and the resulting disease, COVID-19.

**1.2** To support in meeting the following Key Lines of Enquiry/Quality Statements (New):

Key Question	Key Lines of Enquiry	Quality Statements (New)
SAFE	S2: How are risks to people assessed and their safety monitored and managed so they are supported to stay safe and their freedom is respected?	QSS4: Involving people to manage risks QSS5: Safe environments
SAFE	S3: How does the service make sure that there are sufficient numbers of suitable staff to support people to stay safe and meet their needs?	QSS6: Safe and effective staffing
SAFE	S5: How well are people protected by the prevention and control of infection?	QSS7: Infection prevention and control
WELL-LED	W5: How does the service work in partnership with other agencies?	QSW6: Partnerships and communities

**1.3** To meet the legal requirements of the regulated activities that {} is registered to provide:

- | Civil Contingencies Act 2004
- | Control of Substances Hazardous to Health Regulations 2002
- | Equality Act 2010
- | The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
- | Health and Social Care Act 2008 (Registration and Regulated Activities) (Amendment) Regulations 2015
- | Health and Safety at Work etc. Act 1974
- | Human Rights Act 1998
- | Management of Health and Safety at Work Regulations 1999
- | The Health and Safety (Miscellaneous Amendments) Regulations 2002
- | Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)
- | Coronavirus Act 2020



## 2. Scope

**2.1** The following roles may be affected by this policy:

- | All staff
- | Senior Management

**2.2** The following N/As may be affected by this policy:

- | N/As
- | Visitors

**2.3** The following stakeholders may be affected by this policy:

- | Family
- | Commissioners
- | External health professionals
- | Local Authority
- | NHS



## 3. Objectives

**3.1** To ensure that makes a thorough assessment of the risks from COVID-19 in its premises and services, maintaining safe and effective procedures for all of its activities; and ensuring that all staff are equipped with the latest information, training and guidance required to properly manage the risk.

**3.2** will closely monitor all relevant operational guidance as it changes rapidly in response to the spread of the virus and developing understanding of its effective control.

will ensure that it stays up to date with reliable sources of information and that it has the flexibility to respond when required.



## 4. Policy

**4.1** recognises the importance of continuing to monitor the risk presented by SARS coronavirus-2 (SARS-CoV-2) which results in the disease COVID-19 and COVID-19 variants, and has implemented proportionate processes to manage and mitigate this risk.

As a care provider, ensures that robust infection control policies and procedures are in place and that business continuity plans are prepared for any potential interruption to normal service or operations in the organisation.

acknowledges the [latest guidance](#) on infection prevention and control and carries out its activities in accordance with this guidance and local risk assessment.

acknowledges the [latest guidance](#) on staff and service user testing, along with guidance on the management of positive and suspected COVID-19 cases.

**4.2** will ensure that all staff are aware of, and understand the importance of, pandemic preparedness and will prepare for managing the impact of the virus by following the checklist in **HS14 - Pandemic Policy and Procedure**.

understands that business continuity planning involves all aspects of the business, and to be effective, must work with its partners, suppliers and commissioners to ensure that a safe and effective service can be maintained.

**4.3** understands that it has a responsibility for ensuring that staff follow good infection control and prevention techniques and it supports N/As with this too.

will ensure that staff have access to reliable information to reduce anxiety and dispel any myths and inaccurate information that may cause worry or distress to staff, N/As or the wider public.

**4.4** will ensure that this policy is read alongside the suite of QCS COVID policies and procedures, additional guidance material in the Resource Centre and alongside its existing health and safety management policies and procedures.

**4.5** will ensure that a suitable and sufficient risk assessment of the COVID-19 transmission risks is in place. Staff can refer to **HR03 - Risk Assessment Policy and Procedure** and the suite of risk assessments on the QCS Management System for more information.



## 5. Procedure

### 5.1 Pandemic Policy

recognises that the WHO declared COVID-19 a pandemic on 11 March 2020 and that, as UK wide restrictions are relaxed and COVID-19 legislation revoked, it continues to have a duty to protect the health, safety and welfare of all staff, N/As and others affected by their work.

will ensure that it reviews HS14 - Pandemic Policy and Procedure.

It will review the Pandemic Planning Checklist to ensure that the business is prepared for any further waves of the pandemic, ensure that robust business continuity plans are in place and that any lessons learned from earlier in the year are reflected.

### 5.2 Reducing the Risk of Contracting or Spreading the Virus

will ensure that staff, when not at work, follow the WHO and [government guidance](#) to reduce the risk of contracting the virus and the risk of spreading it. They must also support N/As to follow the government requirements and remind them that failure to follow this can result in a fine. Government guidance changes rapidly and will ensure that it keeps up to date with any changes.

Staff can also refer to the suite of COVID-19 policies and procedures at including CC18 - Infection Control Policy and Procedure and HS18 - Personal Protective Equipment (PPE) Policy and Procedure.

### 5.3 Handwashing

Hand Washing remains a key part of Infection Prevention and Control at

All staff wash their hands:

- | Before leaving home
- | On arrival at work
- | After using the toilet
- | Before putting on or removing personal protective equipment (PPE)
- | After touching pets
- | After breaks and sporting activities
- | Before food preparation
- | After using public transport
- | Before eating any food, including snacks
- | Before leaving work
- | On arrival at home

### 5.4 At-Risk Groups

needs to ensure that N/As and staff who are considered particularly vulnerable to COVID-19 have a risk assessment in place.

will ensure that any additional guidance for vulnerable individuals is followed in line with [national guidance](#).

### 5.5 Safe Staffing

uses tools to report capacity for bed vacancies ([Capacity Tracker](#)) to support system resilience, where applicable, and follows all guidance on [Infection Prevention and Control for COVID-19](#).

is not normally required to limit staff movement between sites or services. will, however, limit staff movement if instructed to do so by the local Director of Public Health or health protection team (HPT) if, for example, there is a high prevalence of COVID-19 locally or in an outbreak.

### 5.6 Admission Of N/As

will assess the risks of admission of individual N/As on a case by case basis to ensure that the risks to the individual, other N/As and staff are minimised.

The latest [guidance](#) on the admission of N/As will be followed and risk assessments carried out will consider all relevant factors influencing transmission risk.

### 5.7 Actions if a N/A Meets the Criteria and Displays Symptoms

- | If a N/A complains of symptoms, must ensure that staff understand the [Infection Prevention and Control Guidance for COVID-19](#)
- | The N/A must be isolated immediately. Staff must sensitively explain why they need to be moved and support with any anxiety and fears they may have
- | They must be isolated in a separate, single room with a separate bathroom, where possible



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- | must seek advice from its local Health Protection Team if it has a single possible case of COVID-19
- | If a further clinical assessment is advised, contact their GP
- | The self-isolation period for N/As is 10 days, which may be ended earlier in specific circumstances, subject to risk assessment and negative lateral flow tests in accordance with the criteria highlighted in the [guidance](#)
- | If symptoms worsen during isolation or are no better after 10 days, contact their GP for further advice around escalation and to ensure that person-centred decision making is followed
- | For a medical emergency, dial 999
- | Staff must immediately instigate full infection control measures to care for the N/A with symptoms, which will avoid the virus spreading to other N/As and stop staff members becoming infected. will follow HS18 - Personal Protective Equipment (PPE) Policy and Procedure and CC18 - Infection Control Policy and Procedure at and current [guidance on PPE](#)
- | Inform family members, where the N/A gives consent, so that they are kept informed. Where possible, support the N/A to notify their family
- | During periods of isolation, wellbeing may be supported by:
  - | Receiving one visitor at a time (this does not include visiting professionals)
  - | Going into outdoor spaces within the grounds of through a route where they are not in contact with other N/As – this should be supported where safe and possible given its importance in rehabilitation and to minimise the deconditioning impact of isolation
- | It is important that N/As are supported to remain in touch with their families while they are in isolation and the agreed way this will be achieved will be documented in the Care Plan
- | Review and update the Care Plan and risk assessment
- | Ensure that any advance decisions are recorded and that the correct documentation is available
- | Where the N/A lacks capacity, continue to explain and ensure that the least restrictive options are taken to maintain their safety and the safety of everyone at . Where required, involve the N/A's GP
- | Follow CC94 - COVID-19 Testing Policy and Procedure at and the Government's advice on their [website](#)

### 5.8 Staff with Symptoms

Staff with symptoms at will follow the relevant [guidance](#) for staff in health and social care settings.

Staff must self-isolate straight away and take a LFD test as soon as possible, if they have any of the main symptoms of COVID-19, even if they are mild:

- | A fever or high temperature (37.8C or greater)
- | A new, continuous cough
- | A loss or change to their sense of smell or taste
- | Shortness of breath
- | Feeling tired or exhausted
- | An aching body
- | A headache
- | A sore throat
- | A blocked or runny nose
- | Loss of appetite
- | Diarrhoea
- | Feeling sick or being sick

Anyone who tests positive for coronavirus must follow the current self-isolation requirements which can be found [here](#).

### 5.9 Action if a Member of Staff has Symptoms or Tests Positive for COVID-19

Staff will stay at home if they have tested positive for COVID-19. Staff members do not need to take a PCR test if they have already taken an LFD test and the result was positive.

The following apply to staff returning to work:

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- | The staff member should not have any of the main COVID-19 symptoms
- | The staff member should not attend work until they have had 2 consecutive negative lateral flow tests taken at least 24 hours apart. The first of these tests must be no sooner than 5 days after the onset of symptoms or first positive test
- | The staff member must feel well and not have a high temperature
- | The staff member should comply with all relevant infection control precautions and PPE should be worn properly throughout the day
- | If the staff member works with N/As who are especially vulnerable to COVID-19 (as determined by the organisation), a risk assessment should be undertaken, and consideration given to redeployment during the 10 days following their last contact with the case

If any of the above cannot be met, the staff member should not come to work and should follow the [COVID-19 supplement to the infection prevention and control resource for adult social care guidance](#).

**5.10 Supporting Hospital Discharge**

Teresa Torres will follow the guidance on [discharge to a care home from hospital](#), ensuring that communication channels remain open between the hospital and family and that the N/A is involved in all decisions and discussions.

If an individual tests positive prior to discharge, they can be admitted to , if is satisfied they can be cared for safely. They should be isolated on arrival for 10 days.

**5.11 Isolation Notes Online**

[Isolation notes](#) will provide employees of with evidence for that they have been advised to self-isolate due to coronavirus, either because they have symptoms or they live with someone who has symptoms, and so cannot work.

Isolation notes can be obtained without contacting a doctor, to reduce the pressure on GP surgeries and prevent people needing to leave their homes.

For the first seven days off work, employees can self-certify so they do not need any evidence for . After that, may ask for evidence of sickness absence. Where this is related to having symptoms of coronavirus or living with someone who has symptoms, the isolation note can be used to provide evidence of the advice to self-isolate.

**Changes to Quarantine**

From 18 March 2022, people who arrive in England from abroad no longer need to take a COVID-19 test or quarantine. They are also not required to self-isolate following travel unless they have been advised to self-isolate due to coronavirus.

**5.12 Cleaning the Office and Workplace where there are Confirmed Cases of COVID-19**

will follow Infection Prevention and Control on cleaning and hygiene as well as carrying out its activities in line with [General COVID-19 guidance on hygiene](#). An additional cleaning schedule is in place that includes but is not limited to:

- | All surfaces and objects which are visibly contaminated with body fluids
- | All potentially contaminated high-contact areas such as toilets, door handles, telephones
- | Clothing and linen used by the person should be set aside pending assessment of the person by a healthcare professional

Staff can also refer to the National Standards of Healthcare Cleanliness 2021 for further cleanliness guidance. A link can be found in the Further Reading section of this policy.

**5.13 Waste Disposal**

will follow the [government guidelines](#) on waste disposal and be aware of any changes required due to local guidance.

**5.14 Visitors**

has implemented safe visiting arrangements in accordance with the [COVID-19 Infection Prevention and Control guidance](#).

Visitors will not be permitted to access the premises of if they are unwell, even if they have tested negative for COVID-19, are fully vaccinated and have received their booster.

If visitors have any symptoms that suggest other transmissible viruses and infections, such as a cough, high temperature, diarrhoea or vomiting, they will be permitted to access the premises of only at least 5 days after they feel better. Visitors providing personal care will be required to wear appropriate PPE.

will no longer ask N/As to isolate following high-risk visits out of the care home (including following emergency hospital stays) and will not require N/As to take a test following a visit out.

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**5.15 Confidentiality**

will follow confidentiality and UK GDPR policies and procedures to ensure that the details of staff involved in caring for N/As with suspected or confirmed COVID-19 are kept confidential. Employees must also respect each other's confidentiality and take care not to inadvertently share information when using social media.

Where staff are suspected or confirmed to have contracted COVID-19, their personal details must be treated as confidential, as they would be for any other N/A at .

**5.16 Mass Testing and Vaccinations**

will seek to ensure that all Care Workers, alongside N/As, will be supported to follow GOV.UK guidance and requirements on any mass testing projects rolled out in response to spikes across the regions, to control further spread.

From 11 November 2021 legislation was introduced that all care home workers working in a CQC registered care home were required to be fully vaccinated against COVID-19 unless they had a valid exemption. Following a consultation process, the Government decided to lift the mandatory vaccination requirement for care workers in CQC regulated care homes to be fully vaccinated against COVID-19. Therefore, from 15 March 2022, members of staff were no longer required to provide proof of their vaccination status or proof of valid exemption. However, between these dates, Teresa Torres was still required to ensure that any applicants who began working at had shown evidence of their vaccination status or proof of exemption as part of the onboarding process.

The Mandatory COVID-19 Vaccination Policy and Procedure at was archived on 15 March 2022.

To ensure the safety of N/As, has undertaken risk assessments. risk assessments should take into account the COVID-19 vaccination status of both staff members and the people they care for. All relevant clinical advice is considered, including whether any individuals are at higher risk of severe COVID-19 infection. As a result of these risk assessments, will consider taking additional steps such as prioritising the deployment of vaccinated staff to care for those who are at higher risk of severe COVID-19 infection, where proportionate.

**5.17 COVID-19 Booster Vaccinations**

A booster dose of the coronavirus (COVID-19) vaccine helps improve the protection from the first 2 doses of the vaccine. It helps give longer-term protection against getting seriously ill from COVID-19.

recognises that the coronavirus vaccination programme is continuing to evolve and will ensure that it follows the latest guidance in relation to vaccinations and booster programmes where required.

Those eligible for a booster vaccination will be contacted by the NHS and can get a booster dose if they had a 2nd dose of the COVID-19 vaccine at least 3 months ago. In some cases, those at highest risk may be able to get the booster vaccination earlier, in line with clinical guidance. Where a person has been given an extra (third) dose, a booster vaccination should be given around three months after the extra (third) dose.

Further information can be found in the Underpinning Knowledge/References section of this policy.

**5.18 Long COVID**

recognises that, as well as coronavirus, N/As and staff may also be affected by the long term effects of coronavirus, known as 'Long COVID'. Symptoms of long COVID include:

- | Extreme tiredness (fatigue)
- | Shortness of breath
- | Chest pain or tightness
- | Problems with memory and concentration ("brain fog")
- | Difficulty sleeping (insomnia)
- | Heart palpitations
- | Dizziness
- | Pins and needles
- | Joint pain
- | Depression and anxiety
- | Tinnitus, earaches
- | Feeling sick, diarrhoea, stomach aches, loss of appetite
- | A high temperature, cough, headaches, sore throat, changes to sense of smell or taste





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### | Rashes

Where staff or N/As present with symptoms of long COVID and are worried 4 or more weeks after having coronavirus, they should contact their GP or be supported to, where this is part of the N/A's Care Plan. In the event of an emergency, 999 or 111, where appropriate, should be contacted.

Support can be provided to manage and monitor symptoms at home or specialist support may be required. Where this affects the care being provided to a N/A, a Care Plan review will be undertaken and staff informed of any care changes.

Further information on long COVID can be found in the suite of coronavirus policies, procedures and resources available and within the Further Reading section of this policy.

### **5.19 Risk Assessment**

will regularly review its COVID-19 Risk Assessment and the effectiveness of the measures implemented to reduce the risk of transmission in its premises and services.

The risk assessment will be reviewed:

- | Where positive cases are confirmed
- | In response to changes in relevant COVID-19 control guidance
- | Where deficiencies in the management of COVID-19 risks are identified



## 6. Definitions

### 6.1 Long COVID

- | Long COVID describes the effects resulting from COVID-19. It now refers to those who continue to experience long term effects of COVID. Some have reported symptoms in excess of 12 weeks

### 6.2 Pandemic

- | A pandemic is the worldwide spread of a new disease. COVID-19 was characterised as a Pandemic on 11th March 2020

### 6.3 World Health Organisation

- | The World Health Organisation (WHO) is a specialised agency of the United Nations that is concerned with world public health

### 6.4 COVID-19

- | Novel coronavirus is a new strain of coronavirus first identified in Wuhan City, China. The virus was named Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2). The disease it causes is called COVID-19
- | A new variant of the disease, VOC-202012/01, was discovered in October 2020 and is known to spread more quickly than SARS-CoV-2. Further variants have also been found
- | The three most common symptoms of COVID-19 include:
  - | A fever (37.8 degrees Celsius)
  - | A new/persistent cough
  - | A loss or change in the sense of smell or taste

Everyone is different and may suffer from other symptoms including a sore throat, runny nose, muscle aches, chills etc.

- | The virus causing COVID-19 is spread through close contact between people, typically where they are within 1 metre of each other. A person can become infected when aerosols or droplets containing the virus are inhaled or come directly into contact with the eyes, mouth or nose

### 6.5 Outbreak

- | A disease outbreak is the occurrence of disease cases in excess of normal expectancy. The number of cases varies according to the disease-causing agent and the size and type of previous and existing exposure to the agent

### 6.6 Health and Social Care Key Workers

- | This includes but is not limited to doctors, nurses, midwives, paramedics, social workers, care workers, and other frontline health and social care staff including volunteers; the support and specialist staff required to maintain the UK's health and social care sector; those working as part of the health and social care supply chain, including producers and distributors of medicines and medical and personal protective equipment



## Key Facts - Professionals

Professionals providing this service should be aware of the following:

- | Wash your hands often with soap and water or use alcohol sanitiser that contains at least 60% alcohol if handwashing facilities are not available - this is particularly important after taking public transport
- | must make sure that it has the facts about the coronavirus or the disease COVID-19 from a reliable source. UK Health Security Agency and the Department of Health and Social Care are two examples
- | must have an up-to-date business continuity plan in place. HS14 - Pandemic Policy and Procedure has a checklist to help plan for an outbreak of a disease like COVID-19. It is important that this is updated to help prepare for future waves of coronavirus
- | It is important that N/As are made aware of how they can help limit the spread of COVID-19 and that they understand the signs and symptoms of the disease
- | will need to work closely with n/a, health providers, suppliers and other agencies to ensure that there is continuity and consistency of care



## Key Facts - People affected by the service

People affected by this service should be aware of the following:

- | Although vaccines are available, you must still wash your hands regularly with soap and water which will help prevent the spread of the disease. Try not to touch your eyes, nose and mouth with unwashed hands
- | It is ok to feel worried or anxious. has plans in place to make sure you will get the care that you need
- | A coronavirus is a type of virus. Coronaviruses are common across the world. Typical symptoms of coronavirus include fever, a cough and a loss or change in your sense of smell or taste, that may progress to severe pneumonia causing shortness of breath and breathing difficulties. This virus is called Coronavirus. The disease it causes is called COVID-19



## Further Reading

As well as the information in the 'underpinning knowledge' section of the review sheet we recommend that you add to your understanding in this policy area by considering the following materials:

### Refer to the suite of Policies and Procedures, including:

- | Home Working Policy and Procedure
- | Personal Protective Equipment (PPE) Policy and Procedure
- | Infection Control Policy and Procedure
- | Pandemic Policy and Procedure
- | Sickness Absence Policy and Procedure
- | Visitors Policy and Procedure
- | Visiting out of Care Homes Policy and Procedure
- | COVID-19 Testing Policy and Procedure
- | Admissions During COVID-19 Policy and Procedure
- | Assessing and Reducing Risk to Workforce (COVID-19) Policy and Procedure
- | Staff Vaccination and Immunisation Policy and Procedure

### NHS - National Standards of Healthcare Cleanliness 2021:

<https://www.england.nhs.uk/wp-content/uploads/2021/04/B0271-national-standards-of-healthcare-cleanliness-2021.pdf?msclkid=9952c9ddaac711ecb02bbaa028fc3816>

### NHS - National Standards of Healthcare Cleanliness 2021: Supporting Documents:

<https://www.england.nhs.uk/publication/national-standards-of-healthcare-cleanliness-2021-supporting-documents/>

### WHO - Hand Hygiene: Why, How & When?

<https://www.who.int/publications/m/item/hand-hygiene-why-how-when>

### Public Health England Posters:

<https://campaignresources.phe.gov.uk/resources/search?utf8=%E2%9C%93&query=COVID-19>

### NHS - Long-Term Effects of Coronavirus (Long COVID):

<https://www.nhs.uk/conditions/coronavirus-covid-19/long-term-effects-of-coronavirus-long-covid/>

### British Heart Foundation - Long Covid: The Symptoms and Tips for Recovery:

<https://www.bhf.org.uk/informationsupport/heart-matters-magazine/news/coronavirus-and-your-health/long-covid>

### NHS - How to Get a Booster Dose of the Coronavirus (COVID-19) Vaccine:

<https://www.nhs.uk/conditions/coronavirus-covid-19/coronavirus-vaccination/coronavirus-booster-vaccine/>



## Outstanding Practice

To be 'outstanding' in this policy area you could provide evidence that:

- | has robust infection control policies and procedures in place and staff understand the importance of good hand hygiene, how to use personal protective equipment appropriately and they share their knowledge with N/As appropriately
- | Staff have accurate and up-to-date information and is able to respond quickly and safely to a fast changing situation
- | has shared its pandemic and business continuity plan and everyone knows what their roles and responsibilities are
- | The wide understanding of the policy is enabled by proactive use of the QCS App



## Forms

Currently there is no form attached to this policy.