

Covid-19 Guidance for Close Contact Work

Guidance rescinded 19/07/2021

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1. Introduction

- 1.1 This guidance is supplementary to the high level guidance on office and general teaching and laboratory space. Much of the guidance regarding social distancing and sanitation specified elsewhere has not been repeated here.
- 1.2 This guidance is aimed at providing targeted guidance to staff that are unable to carry out their work without close contact with participants or others. Where possible these activities should still be avoided so as to minimise the number of close contact interactions that occur. This guidance is based on relevant extracts from the government guidance for close contact work.
<https://assets.publishing.service.gov.uk/media/5ef2889986650c12970e9b57/working-safely-during-covid-19-close-contact-011020.pdf#page=1&zoom=auto,-112,848>
- 1.3 The main audience of this guidance is expected to be research scientists conducting studies or specific training activities within laboratories. It may be that this guidance is relevant to other groups, in this case it is important to consider alternatives to close contact work if possible. For guidance on face to face interviews or other work with volunteers or subjects please see <http://wwwstage.sussex.ac.uk/hso/documents/cv-19-06-face-to-face-research-v14-ah---copy.pdf> this also includes details of the ethical approval process.
- 1.4 A risk assessment signed off by your line manager will typically be required for any close contact work. This does not need to be reviewed centrally but must be stored and approved by your School or Division. A generic risk assessment template can be found on the Health & Safety website here http://www.sussex.ac.uk/hso/policies/subject_areas/general. Guidance on what to consider in any risk assessment appears below.

2. Covid-19 as a Hazard

- 2.1 The hazards from covid-19 that have been considered in this guidance are;
- Transmission via hand contact
 - Transmission via droplet or airbourne means
- 2.2 Controls for transmission via hand contact. Best practice for controlling the spread of covid-19 between surfaces appears below organised by the type of activity or equipment. It is key to remember that covid-19 is a respiratory virus and an individual having covid-19 on their hand will not cause an infection unless they transfer it to their face.
- 2.3 Controls for transmission via droplets or airbourne transmission. In normal work the control for this would be via 2 metre social distancing or 1 metre social distancing with additional controls (masks in most instances). For close contact work this is obviously not possible. For information on how this can be applied for close contact work please see section 5 below “Hierarchy of Controls”.

3. Definition of Close Contact relating to Covid-19

- 3.1 In this context close contact is defined as:
- Skin to skin physical contact
 - Being closer than 1 metre for one minute or more without face to face contact
 - Talking to someone face to face at a distance less than 1 metre

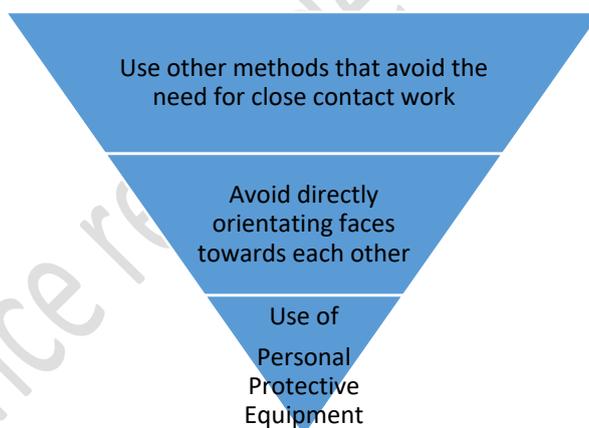
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- 3.2 In the event that anyone you have had close contact with develops symptoms of Covid-19 within 2 days of your close contact you will be required to self isolate for 14 days from the date of the close contact.
- 3.3 In the event that anyone you have had close contact with tests positive for Covid-19 between 2 and 14 days after the contact you will also be required to self isolate for 14 days from the date of the close contact.
- 3.4 Mechanisms must be in place to inform relevant parties of this need to self isolate promptly. University members are required to fill in the Covid-19 symptom or self isolation reporting form if they are required to isolate. This is available here <http://www.sussex.ac.uk/hso/specialist/hscovidpage>

4. Hierarchy of Controls

- 4.1 The Hierarchy of Control is a well established method for controlling hazards. With regards to close contact work during the pandemic apply the following hierarchy when considering the appropriateness of close contact work.
- 4.2 Hierarchy of Control for droplet or airbourne transmission of Covid-19

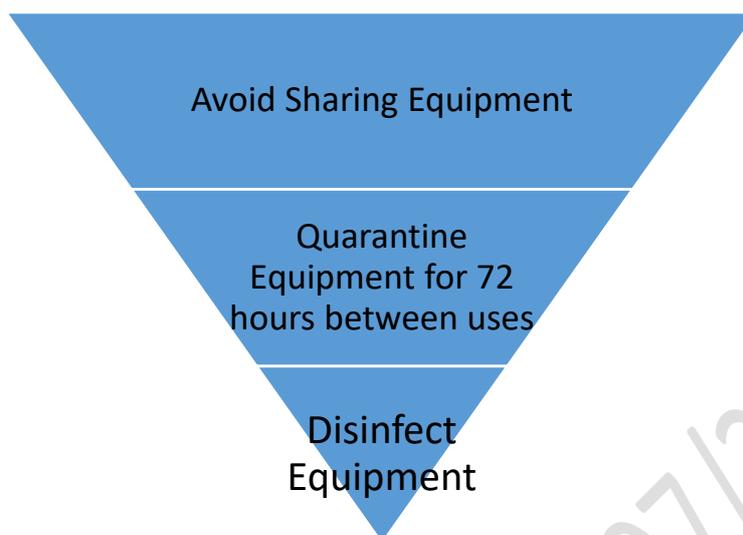
Figure 1



- 4.3 It is also important to limit the time where close contact occurs, the number of people involved and to consider the area in which the work is being carried out.
- 4.4 Hierarchy of Control for contact spreading of covid-19 from equipment.

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Figure 2



- 4.5 When quarantining equipment it should either be locked away so that others cannot use the equipment or labelled with the name of the last member of staff to use the equipment, the date it was last used and the date when it can next be used.
- 4.6 Special attention must be paid to any equipment that is placed or worn on an individuals face as this raises the risk of transmission. In this context the face would be considered any area from forehead to chin or from ear to ear including the ears themselves. It would exclude the scalp and neck.
- 4.7 Equipment that is blown into or otherwise interacts with someones mouth cannot be shared unless it is autoclaved or other means of more thorough disinfection is used between uses.
- 4.8 Covid-19 is a respiratory virus and an individual having covid-19 on their hand will not cause an infection unless they transfer it to their face. Where you are touching another person as part of your work washing or sanitising your hands before and after skin to skin contact is usually a better control than the use of gloves.
- 4.9 When equipment is frequently passed between individuals and it is not practical to wash or sanitise your hands each time gloves are likely to be a suitable control.

5. Track and Trace information

- 5.1 It is a requirement of close contact work that contact information is taken and recorded in a fashion that can be accessed by the University.

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5.2 Table 1.1 below is an example of the information that is required.

First Name	Surname	Date	Phone	Email Mandatory for Members of the University	Status
					Student/Staff/Member of the Public*

* Delete as appropriate

Where a participant is accompanied by a member of their household (for instance a parent, guardian or housemate) only 1 set of contact details are required.

5.3 The university is required to store information for the purpose of track and trace, this information must be available in an electronic searchable format.. In the case of face to face research involving human participants this information should be stored centrally, details of how this is managed can be found in the “Face to Face research guidance” <http://wwwstage.sussex.ac.uk/hso/documents/cv-19-06-face-to-face-research-v14-ah---copy.pdf> For other work this should be stored within your School or Division.

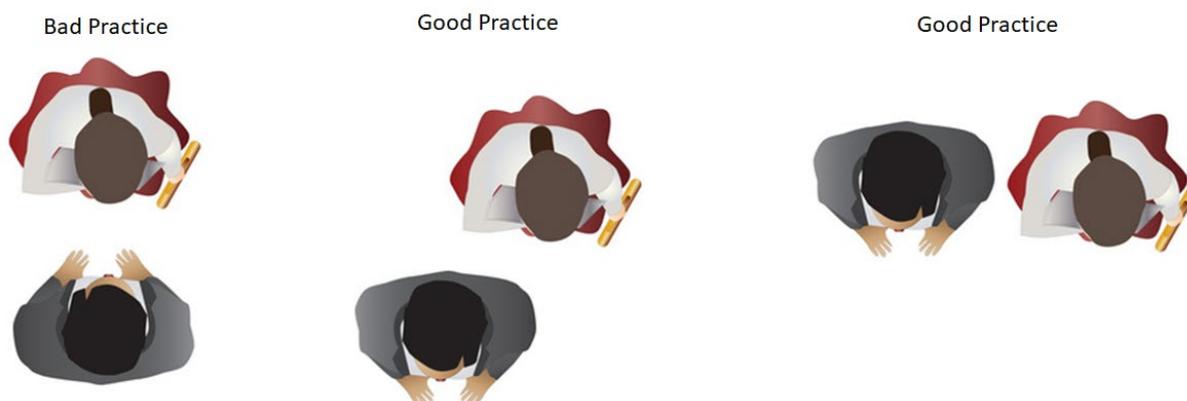
6. Room Selection

- 6.1 When carrying out close contact work it should be carried out in a room where there is suitable ventilation. A detailed paper on general room ventilation is available on the Health & Safety Covid-19 resources centre under the drop down menu risk assessment database. This is available here <http://www.sussex.ac.uk/hso/specialist/hscovidpage>
- 6.2 For research additional information is available in the guidance for Face to Face research including a list of suitable rooms.

7. Setup and orientation of people in close contact work

7.1 When setting up an area for close contact work it is important to minimise people facing each other directly. Figure 3 below shows examples of good and bad practice.

Figure 3



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8 Screens and Protective Equipment

- 8.1 Where possible screen can be used to limit potential transmission. Screens can be requested from the University Estates team via this email address estates.covid@sef.fm. When requesting screen it is best to do so early and you will need to have a clear understanding of the area and the purpose of the screen that will be installed.
- 8.2 Visors are effective at stopping droplets or spittle that can transmit covid-19 and should be used by staff when working in close contact. Visors can be procured from the University via your School or Division as a quantity have been made in house. In some circumstances it may be appropriate for participants in studies to wear a visor if possible, in this case they must be quarantined for 72 hours before being used by another person.
- 8.3 Facemasks reduce the transmission risk from small particles and must be worn during close contact work as well as a visor. When using a facecovering avoid rearranging it before sanitising your hands as this can increase the risk of transmission.

9 Room Cleaning

- 9.1 Cleaning or sanitisation supplies to support on campus research can be requested from estates.covid@sef.fm. It is suggested that requests are put in 2 weeks before the planned start date of any work to ensure that materials are available.
- 9.2 When considering areas that need to be sanitised consider areas which are high contact as a priority for instance door handles, light switches and fixed furnitures or equipment used.
- 9.3 Areas should be wiped down with a suitable sanitiser or alcohol based wipe before and after use.
- 9.4 Wipes and other cleaning materials can be disposed of via a standard waste bin.

10 Saliver and Body fluids

- 10.1 The below only applies to additional measures in place due to Covid-19, the existing considerations of health screening, sharing with partner organisations, shipping of samples and Human Tissue licensing still apply.
- 10.2 When taking saliver or other swabs of the mouth, nose or other bodily orifice, gloves, visor and face covering are required.
- 10.3 Standard controls for the storage of human tissue (swabs or bloods) are sufficient once a swab has been taken. For additional guidance contact your School Human Tissue License Holder and or Biological Safety Officer.
- 10.4 When storing samples in freezers or fridges do consider that the longevity of Covid-19 will be increased when stored under these conditions. It is suggested that you clearly label any stored sample with the name and contact details of the group responsible, date they were taken and date on which they should be disposed of where applicable.

11. Linked Guidance

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- 11.1 Please see the guidance document “Guidance for Performing Arts, Recordings or Loud Vocalisations in Teaching” for specific guidance on the following activities if they are relevant.
- Vocal Projection
 - The use of Microphones
 - The use of Camera Equipment
- This Guidance document is available from the Health & Safety Covid-19 Resources page
- 11.2 For guidance on laboratory or workshop areas please see the Guidance document “Guidance for laboratory areas”. This Guidance document is available from the Health & Safety Covid-19 Resources page
- 11.3 For general guidance on Face to Face Research involving human subjects please see the “Face to face research guidance” This Guidance document is available from the Health & Safety Covid-19 Resources page.

12. Vulnerable Groups

- 12.1 Staff should only partake in close contact work after a discussion with their line manager, if there are concerns with regards to an individuals or someone within their households increased risk from covid-19 consult the Human Resources self assessment tool available here <https://www.sussex.ac.uk/staff/autumn-2020/hr-policies-and-procedures/self-assessment-tool>
- 12.2 For a proforma and suggested exclusion criteria for potential subjects please see the “Face to face research guidance”.

13. Fabricsⁱ

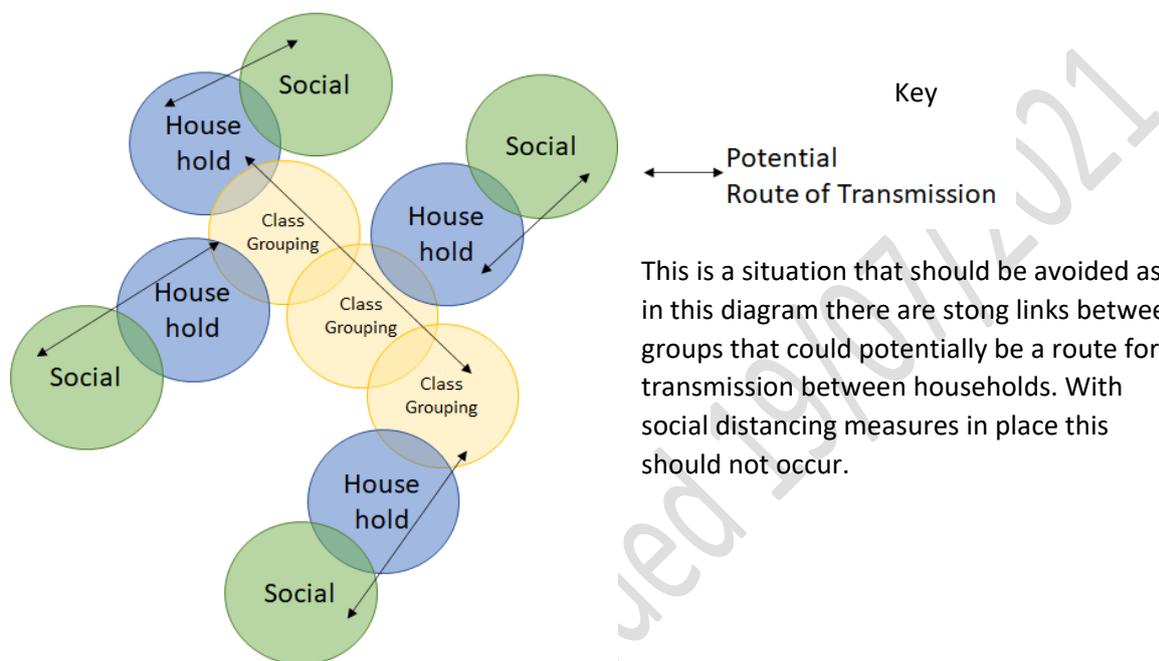
- 13.1 It is not possible to disinfect fabrics using an alcohol wipe. Soft furnishings used for seats should be avoided in a clinical or laboratory setting but are not a major contact point. Clothing or gowns should be washed between uses following the manufacturers instructions. When transporting dirty laundry a suitably robust plastic container or bag should be used. Bags should be sealed during transport and individuals washing clothing should ensure that they sanitise their hands afterwards. Clothing can also be quarantined for 72 hours if practical.

14. Segmentation

- 14.1 Where groups of staff are required to work in close contact with each other they should be grouped or work with a buddy that changes as little as possible. This is to limit the possibility of the transmission of Covid-19 between otherwise separate groups. This is shown diagrammatically in figure 4 below.

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Figure 4



This is a situation that should be avoided as in this diagram there are strong links between groups that could potentially be a route for transmission between households. With social distancing measures in place this should not occur.

14.2 Social distancing guidelines and other measures do not apply between members of the same household.

ⁱ <https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings>

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