

HR Frequently Asked Questions COVID-19

The FAQs have been reviewed and updated. They are now in alphabetical order, under sub headings to assist you to quickly locate what you are looking for. Some FAQs have been archived at the end of the document, as they are currently not as relevant to staff.

If you have any queries the HR team please contact the dedicated HR COVID-19 Hub which is staffed Monday to Friday 09.00 to 17.00 via email ctm_cov19_hr@wales.nhs.uk or telephone 01443 443636

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Annual leave

Ref	Question	Response
1.1	<p>What is the current position with booking and taking annual leave for staff employed under AfC whose leave year runs from 1 April 2020 – 31 March 2021 and Staff employed under Medical and Dental T&Cs that have a personal leave year that runs from 1 April 2020 - 31 March 2021?</p>	<p>During March 2020 the Health Board advised line managers that due to the impact of the pandemic they could discuss with staff whether they were prepared to stand down their annual leave arrangements and as an alternative have this period of leave paid or / carry forward leave. For Agenda for Change staff this arrangement ceased with effect from the 1st April 2020 and for consultant and SAS Doctors, with a personal annual leave year that ends on the 30 September 2020.</p> <p>The Health Board’s decision to permit staff to be paid for annual leave where it has not been reasonably practicable for them to take it, due to the effects of COVID-19 will be revisited should there be another significant surge in hospital admissions rates over the forthcoming months. This would be in addition to the legal requirement to permit staff to carry forward annual leave, where it has not been reasonably practicable for them to take it, due to the effects of COVID-19)</p> <p>During COVID-19 the Health Board has actively been encouraging all staff to plan, book and take their annual leave, to support their physical and mental health and avoid burn out. In general the Health Board has approved and honoured the vast majority of annual leave requests since the commencement of the new leave year, despite COVID-19.</p> <p>The Health Board has over the course of the past few months started to re-set services and it has begun to increase routine activity and services. It does however recognise that some staff may have found it difficult to plan, book and take their annual leave during the period March – July 2020, due to the surge in COVID-19 hospital cases and a requirement for managers to request staff on surge rotas to stand down their leave, to enable the Health Board to continue to provide essential services.</p> <p>Where staff were / are required by their manager to stand down their planned and booked annual leave commitments, in the current leave year (2020/2021) they have a</p>

		<p>responsibility to re-book and take their leave, as soon as practically possible, in the interest of their own physical and mental wellbeing and the health and safety of our patients and staff etc.</p> <p>Where staff do not proactively re-book their leave their line manager will discuss the matter with them, to encourage them to do so. This approach is not intended to be draconian, but to support staff in taking regular and planned time away from their workplace, to support their health and wellbeing.</p> <p>It is anticipated that these staff will be able to take their full contractual annual leave entitlement in the current leave year, as the current staffing levels and rotas should support them to do so.</p> <p>Please refer to the Health Board’s Guidance on Taking Annual Leave During COVID-19.</p>
1.2	<p>What will happen if I am unable to take all of my annual leave entitlement in the current leave year, due to my manager standing down my leave to due to the needs of the service as a result of the effects of COVID-19?</p>	<p>Where it is not reasonably practicable for a member of staff to take their leave in the current leave due to the effects of COVID-19 they will be permitted to carry forward up to a maximum of 20 days (pro rata for part-time staff) into the following two annual leave years (2021/22 and 2022/2023). This will be approved in accordance with the European Working Time COVID-19 Amendment Regulations.</p> <p>It is important to note however that this amendment to the policy for the carry-over of leave will only apply where it has not been reasonably practicable for staff to take their annual leave due to the effects of COVID-19</p> <p>This policy amendment cannot be used in circumstances where staff wish to cancel or postpone annual leave as they are or have been unable to use it to go away on holiday etc.</p>
1.3	<p>What was the position with booking and taking annual leave</p>	<p>As a last resort, line managers were afforded the temporary discretion by the Health Board to stand down annual leave for staff over the forthcoming few months in key services during COVID-19, including existing commitments. Managers were requested to</p>

**before the end of
March 2020?**

give due consideration to the health and well-being of staff and the need for them to take time-out away from the pressures of work, in order to prevent burnout. Managers therefore had discretion to authorise leave for this purpose.

The Health Board made the assumption based on previous year's annual leave data that because all AfC staff and many Medical and Dental staff were nearing the end of their annual leave year, they would not have significant amounts of untaken leave.

To support the service the Health Board temporarily suspended restrictions on the carry-over of annual leave during March 2020, to ensure that the organisation had sufficient staff in work to deliver services, which required some staff standing down their annual leave commitments to allow this.





AL Carry Over form -
March 2020.docx


Managers were given the discretion to discuss alternative arrangements with affected staff, noting the knock-on effect, and the requirement to meet service requirements later in year. The options available were:

- Payment of unused leave for 2019 / 2020;
- Payment of unused leave for 2021/2022;
- Further carry forward of leave into 2021/22;
- Agreeing staggered leave (with individuals and teams) throughout the year to avoid staff taking leave at the same time.

These arrangements were put in place with the proviso that teams should be mindful of the need to take time away from the current pressures of work, and while staff were being asked to work in different ways, the Health Board could not allow staff to burn-out at this critical time.

		<p>Therefore, where it was not reasonably practicable for staff to take leave due to the effects of COVID-19, they were eligible to request the carry forward or payment of any untaken leave using the Annual Leave Carry Over Form.</p> <p>If you fell into this category and you have not yet formalised your request to carry forward / received payment for any outstanding leave as at the 31 March 2020, you should do so as soon as possible. You should complete an Annual Leave Carry Over Form.</p> <p>If you would prefer to be paid for this leave you follow the process set out in section 1.5 below. Please note that this form must confirm the dates of the leave which you were unable to take towards the end of the leave year and be signed off by your CSG Manager, prior to being submitted to the Workforce Department for processing.</p>
1.4	<p>I am a consultant/SAS doctor with a personalised annual leave year which runs from 1 September 2019 to 30 September 2020, am I entitled to apply to the carry forward my untaken annual leave under the Health Board's temporary annual leave position at March 2020?</p>	<p>The Health Board will accept applications for the carry forward / payment of outstanding annual from those consultants/SAS doctors whose annual leave year ended the 30 April 2020 – 30 September 2020 and where it was not been reasonably practicable for them to take their annual leave .due to the effects of COVID-19</p> <p>If you fall into this category and you have not yet formalised your request to carry forward / received payment for any outstanding leave at the end of your leave year as above, you should do so as soon as possible. You should complete an Annual Leave Carry Over Form (see section 1.3 above). If you would prefer to be paid for this leave you follow the process set out in section 1.5 below. Please note that these forms must be signed off by your CSG Manager, prior to being submitted to the Workforce Department for processing.</p>
1.5	<p>What is the process for payment of outstanding annual leave in accordance</p>	<p>If it was not reasonably practicable for you to take your annual leave due to the effects of COVID-19 and you were therefore prevented from taking your annual leave at the</p>

	<p>with the Health Board's temporary annual leave position as at March 2020?</p>	<p>end of the annual leave year (1 April 2019 – 31 March 2020)*, and you do not wish to carry forward this element of leave, you can apply to sell it back to the Health Board.</p> <p>*This will also apply to consultants/SAS doctors with a personal leave year that ended between the 30 April – 30 September 2020)</p> <p>To request to sell your outstanding 2019 / 2020 annual leave you must request your manager to complete a 'Holidays to be paid 2019/2020' form. Please note that outstanding annual leave will be paid at a plain time rate.</p> <p>The spreadsheet should be submitted via email to payroll by 31 October 2020 to Payroll.Enquiries.Cwm_Taf@wales.nhs.uk</p> <p>  Selling Annual Leave Form 2019-20 (Digital) </p>
<p>1.6</p>	<p>What is the position in respect of annual leave and public holiday arrangements for doctors and dentists in training during the Covid-19 pandemic?</p>	<p>The current position regarding annual leave and public holidays for doctors and dentists in training during the pandemic are set out in the attached Joint Statement.</p> <p>  Joint statement on junior doctor leave </p>
<p>1.7</p>	<p>Can my pre-booked annual leave be cancelled?</p>	<p>The Health Board is actively promoting and encouraging all staff to book and take their annual leave during the pandemic to support their ongoing physical and mental health and wellbeing.</p> <p>Therefore, where possible managers will endeavour to ensure that staff are permitted to take their booked and approved annual leave. Managers may however, approach staff to seek their agreement to stand down their leave arrangement, where it would become difficult to provide a safe service for our patients due to the pandemic.</p>

		<p>All staff should therefore continue to plan, book and take their annual leave in their current annual leave year. At this time staff are not being asked or expected by their managers to postpone or cancel their approved annual leave.</p> <p>Should the Health Board experience another surge in case numbers, similar to those experienced in the early spring, managers may request key staff and those working on surge rotas whether they are prepared and agree to postponing their planned leave to support the COVID-19 response. In these circumstances, staff will be asked to reschedule the leave for later in the leave year. If the staff member is unable to take their postponed leave before the end of their annual leave year, they will be permitted to seek payment for five days and carry forward a maximum of 20 days to be taken during their 2021/2022 and 2022 / 2023 annual leave years.</p> <p>Should an employee leave the employment of the Health Board during the forthcoming leave year(s) (2021/2020 and 2022 /2023) and they have been unable to take their carried forward annual leave (<i>which could not be taken due to the effects of COVID-19</i>), the Health Board would be required to make a payment in lieu of annual leave in their final salary payment.</p>
1.7	<p>I cannot take the remainder of my annual leave by the end of March 2020 due to work pressures, can I carry it over?</p>	<p>Yes, but you should ensure that you have spoken to your line manager about this and they will arrange for this to be carried over. You must proactively book and take your annual leave once your work activity returns to pre-COVID-19 levels.</p> <p>  AL Carry Over form - March 2020.docx </p>
1.8	<p>If I am told that I am required to self-isolate and I am off work on annual leave, will I be</p>	<p>If you are on annual leave and during this period you are contacted and advised that you must self-isolate, you must inform your manager immediately. Your absence will be recorded as a medical exclusion on ESR. Any planned leave that you were unable to</p>

	able to claim the time back?	take during the isolation period will be credited back to your ESR annual leave entitlement.
1.9	I am currently shielding at home following advice from the CMO, am I required to book a take my annual leave during this period?	<p>Those staff that are still advised to shield are not required to book and take their annual leave during this period. However, the Health Board would strongly encourage staff in this situation to plan, book and take annual leave during this period to support their mental and physical wellbeing.</p> <p>N.B. A communication went out across the Health Board during August 2020, which incorrectly stated that shielding staff were required to take a pro-rata number of annual leave days during this period. This communication was incorrect and has since been rescinded by the Health Board.</p>

2. Bank Holidays

Ref	Question	Response
2.1	<p>What are the arrangements bank holiday working?</p>	<p>Within the UHB, many of our staff work over bank holiday as we continue to provide a comprehensive service. For the majority of the front line services, the requirement to provide bank holiday service is the norm and, as such, the agreed national enhancements will be paid to all staff who are required to work or be on-call during a general public holiday.</p> <p>It is recognised that there may be a requirement for more staff to work over the Easter period than would be usual. As such, we would expect individual teams to determine if there is a need for staff to be in work on Good Friday and/or Easter Monday and for this to be agreed with line managers.</p>
2.2	<p>Will someone lose their bank holidays if self-isolating or shielding during these holiday dates?</p>	<p>Public holidays are not accumulated and are set dates.</p> <p>If you are self-isolating or shielding over a bank holiday and you would not normally work bank holidays, the bank holidays will stand and must be booked from your annual leave allocation.</p> <p>If you would normally work the bank holidays, then based on what you would have contractually been rostered, payment will be made.</p>

3. Face Coverings

Ref	Question	Response
3.1	<p>Do I need to wear a face mask / covering in work?</p>	<p>The law on face coverings in Wales has changed. It is now mandatory to wear face coverings in enclosed public spaces. For all Health Board sites this means indoor public areas such as waiting rooms and corridors, coffee shops etc. All staff should now wear face coverings in these areas.</p> <p>What does this mean for staff?</p> <p>We are still awaiting formal guidance from Welsh Government regarding secondary care staff, but guidance has been received for primary care staff. The Health Board has therefore issued interim guidance for secondary care staff which is in line with the guidance for primary care. This advice may change later, depending on what the Welsh Government advises. For now:</p> <ul style="list-style-type: none"> • Staff should wear face coverings if they are moving through any public areas of our sites. • They do not need to wear face coverings in areas which are not usually accessible (or only accessible with permission) to patients and the public. • This means that at this time you do not need to wear a face covering in your office environment etc. where you can reliably maintain two metres social distancing. However, staff working in areas where two metre physical distancing cannot be maintained, must wear a face coverings. • Additionally, when walking through a waiting room, corridor etc. to get to your office or workplace, you will need a face covering, which you can then take off when you get to the office.

		<p>As with the public, face coverings do not need to be worn by staff in public areas if they have a medical reason not to.</p> <p>All clinical staff should continue to follow existing guidance around the use of PPE in their area.</p>
3.2	<p>What is the difference between a face covering and a face mask?</p>	<p>A face covering is the term being used by the UK government to describe a piece of material (recommended to be a minimum of three layers) that can be secured around the face to cover the nose and mouth. A face covering can be worn by the general public as opposed to face masks worn by healthcare and other at-risk workers. A face covering is not the same as the surgical masks or respirators used by healthcare and other workers as part of personal protective equipment. Example of face coverings are:</p> <ul style="list-style-type: none"> • Scarf • Bandana • Homemade mask • Shop-bought disposable or reusable mask <p>A face mask is a term used surgical style masks (classified as personal protective equipment PPE) for healthcare workers and those who encounter work related risk of COVID-19.</p> <p>The advice is that a simple face covering is sufficient for individuals to wear in public areas, including shops and public transport.</p> <p>When putting on face coverings and while they are on you should only handle the straps, ties or clips. You should not touch the front of the face covering, or the part of the face covering that has been in contact with your mouth and nose. You should also wash your hands thoroughly with soap and water for 20 seconds or use hand sanitizer before and after removing your face covering.</p>

		This link takes you to the Welsh Government page where you can find advice on making a three-layer face covering. https://gov.wales/how-make-3-layer-face-covering
3.3	Do I have to wear a face mask / covering if I have a medical reason that prevents me from doing so?	Face coverings do not need to be worn by staff in public areas if they have a genuine medical reason not to. Those staff that believe they have grounds for medical exemption should seek advice and request a letter or provide evidence obtained from a medical professional or occupational health. The letter / evidence should be provided to your line manager to ensure that they are aware of your exemption from wearing a mask.
3.4	What should you do if you see someone in a public area not wearing a face covering?	<p>The Health Board is encouraging people to follow the new compulsory face covering rules, but there is a need to be sensitive to the fact that some people, patients, the public and staff members may have medical reasons not to wear one, and could feel embarrassed or uncomfortable if challenged.</p> <p>Therefore, staff must be compassionate in their approach and recognise that we should not refuse to deliver care to patients, if they consider themselves exempt.</p> <p>It is recommended that rather than directly challenge anyone who is not wearing a face covering, should you feel the need to say something, a considerate approach could be to ask if they need one and let them know that masks are available at the entrances of our hospitals.</p> <p>Children under 11 and people who cannot put on, wear or remove a face covering because of a physical, mental illness / impairment or disability do not have to wear one. People with hidden health conditions including those with breathing problems, anxiety, panic disorders and autism are also exempt from wearing a face covering.</p>
2.5	Can we provide face coverings / masks to	There is an expectation that our patients and the public will have their own face coverings as it is now compulsory to wear them in all indoor public places.

	our patients / the public?	However, to help manage the transition to the new arrangements patients and visitors who do not have access to a face covering can be provided with one. Face masks are available at the entrances to our hospital sites.
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4. Flexible Working

Ref	Question	Response
4.1	What policies are available to support staff to work flexibly during COVID-19?	<p>If you would benefit from working more flexibly during the pandemic please speak to your line manager who will discuss and agree what can be accommodated, taking into consideration business continuity and requests from colleagues in a similar position.</p> <p>The following range of options can also be considered including:</p> <ul style="list-style-type: none"> • Temporary adjustment to your usual working pattern which may include part-time hours; • Deployment to another area; • Paid Special Leave (See Special Leave Section); • Working from Home; • Flexible working hours e.g. split shifts/condensed hours; • Using Annual Leave (including carried over leave from 2019/20); • Time Off In Lieu (TOIL); • Unpaid leave; • Purchase of additional annual leave; • Annualised hours – work extended hours to pay back hours lost over an agreed period of time; • Compressed hours; and • Carer’s Leave Policy.
4.2	Will staff be supported to work from home?	<p>The latest Welsh Government advice (19 October 2020) confirms that staff are able to be outside to travel for work purposes during the fire break period, but only where it is not reasonably practicable for them to work from home.</p> <p>In line with the CTMUHB position, to support our staff, where possible to work from home managers are required to conduct an assessment of their teams, to determine their ability</p>

		<p>to work from home, until the local restrictions are lifted or they are able to return to the workplace.</p> <p>Where a functions must be discharged from a Health Board site these will need to continue despite the local lock down restrictions, but these will be agreed with staff following the assessment and strictly on an exceptional basis. Manager should arrange to meet with those staff affected by this requirement and will ensure that you are all kept informed of developments.</p> <p>Staff should speak to their manager if they have any concerns about home working, including the availability of a suitable working environment, IT issues / equipment etc.</p> <p>We recognise that for some people who will be working remotely or otherwise, may need to redeploy them to support other critical areas. The manager must therefore ensure regular contact with their staff to enable the Health Board to bring people back and redirect them where necessary.</p> <p>Additional information is available from NHS Employers, especially around staff wellbeing when working from home: https://www.nhsemployers.org/covid19/health-safety-and-wellbeing/enabling-and-supporting-staff-to-work-from-home</p> <p>For IT related home working queries, please contact the ICT COVID-19 hub here: http://ctuhb-intranet/News/Coronavirus/ICT/_layouts/15/start.aspx#/SitePages/Home.aspx</p>
4.3	<p>Deployment of medical trainees into other areas to better utilise their skills? What is the process and can it be done quickly?</p>	<p>Cardiff University is signposting medical students to temporary workforce teams.</p> <p>HEIW are co-ordinating Doctors in Training, this will be in partnership with Medical Workforce.</p>

4.4	We have someone out on a secondment – can we bring them back?	<p>We have secondment agreements inside and outside the organization. At this time there is no blanket decision.</p> <p>We recommend managers discuss the situation with HR colleagues based on their local business need.</p>
4.5	I am on a term time contract – can I bring forward the week I have off for May half term?	<p>Please discuss this with your line manager – if your department can support this, then we would support this as an additional level of flexibility.</p>
4.6	It is possible I might be asked to perform a different role to my own to support COVID-19 efforts. Am I obliged to do so and will I be given the appropriate training?	<p>It is very likely that staff in certain areas or staff that undertake certain specific roles will be expected to assist in other priority areas. Some services will be stood down temporarily to focus staff resources where they are most needed.</p> <p>It is therefore possible that if you work in one of the areas which is stood down, whether completely or partially, you may be expected to help elsewhere. This temporary movement is referred to as 'deployment'.</p> <p>Once appropriate training has been provided you may be expected to assist. Managers will ensure that you receive the appropriate training to ensure you are able to deliver safe and effective care / the service.</p> <p>It is important that arrangements are made well in advance in order to plan for this eventuality and, therefore, it is likely that discussions will start to take place with staff and Trade Unions in preparation for this.</p> <p>If you are deployed from an area where you would earn unsocial hours payments (or other similar payments), to an area where these do not apply, your enhancements will be paid as normal.</p>

4.7	I have been deployed to a base that requires me to travel for a longer period of time. Can I reclaim the additional travel time?	Additional travel time should be factored in to the duration of the working shift/day.
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5. General Health Conditions and COVID-19

Ref	Question	Response
5.1	Is there any specific advice for pregnant members of staff?	<p>Pregnant staff may be particularly vulnerable, and employers have additional responsibilities to protect them. As the situation progresses, employers should regularly risk assess and should discuss with them whether it is appropriate to move them to a different location, arrange for them to work from home or even to temporarily remove them from the workplace.</p> <p>Pregnant women should discuss any concerns with their line manager, and keep in regular contact.</p> <p>Additional advice is available from</p> <p>The Royal College of Obstetricians and Gynaecologists: https://www.rcog.org.uk/en/guidelines-research-services/guidelines/coronavirus-pregnancy/covid-19-virus-infection-and-pregnancy/</p> <p>NHS Guidance on Pregnancy and COVID-19</p>
5.2	I am 28 weeks pregnant and have no medical conditions. My role is a healthcare worker/medical secretary. Should I be in work?	<p>Everyone in the UK is advised to follow guidance from the Government to lessen the spread of COVID-19. In Accordance with the PHE Guidance on Social distancing</p> <p>https://www.gov.uk/government/publications/covid-19-guidance-on-social-distancing-and-for-vulnerable-people/guidance-on-social-distancing-for-everyone-in-the-uk-and-protecting-older-people-and-vulnerable-adults</p> <p>The Royal College of Obstetricians and Gynaecologists (RCOG) provided the following advice during March 2020:</p>



		<p><i>"For pregnant women from 28 weeks' gestation, or with underlying health conditions such as heart or lung disease at any gestation, a more precautionary approach is advised. Women in this category should be recommended to stay at home. For many healthcare workers, this may present opportunities to work flexibly from home in a different capacity, for example by undertaking telephone or videoconference consultations, or taking on administrative duties."</i></p> <p>Pregnant staff should undertake an NHS Wales COVID-19 Risk Assessment, bearing in mind the RCOG advice to ensure their continued health and safety in the workplace.</p> <p>Pregnant staff who have chosen NOT to follow Government advice and attend the workplace must not be deployed into roles where they are working with patients. They should be redeployed into roles that are non-patient facing and where strict social distancing measure can be adhered to.</p> <p>https://www.rcog.org.uk/globalassets/documents/guidelines/2020-03-30-occupational-health-advice-for-employers-and-pregnant-women-during-the-covid-19-pandemic.pdf</p>
5.3	<p>What impact will COVID-19 have on my maternity leave</p>	<p>Because each individual's circumstances can be different, please contact the HR Team for individual advice: Either</p> <p>Email: ctm_cov19_hr@wales.nhs.uk or</p> <p>Telephone: 01443 443636</p>
5.4	<p>I have asthma and use inhalers. Can I attend work?</p>	<p>Now that the government's shielding period has ended, this will depend on the outcome of your NHS Wales COVID-19 Risk Assessment. If you have not already undertaken a risk assessment you should do one as soon as possible via your ESR account and arrange to discuss the outcome with your manager.</p> <p>Should the manager or staff member require further clarity, based on the outcome of the risk assessment, they may refer the Occupational Health Service for an occupational assessment. This may assist to determine whether you can remain in work with</p>


		<p>reasonable adjustments / redeployment to non-patient facing role or continue to shield at home.</p>
<p>5.5</p>	<p>As Wales will have a fire break Lockdown end October – early November, what will be the control measure for previously shielding staff or any staff who were instructed /advised to stay at home, if they are unable to work from home, especially given the situation with COVID-19 cases in our DGHs?</p>	<p>The Welsh Government has confirmed that shielding will not be reinstated during the fire break period. It is therefore not necessary for those who are clinically extremely vulnerable to adopt strict shielding measures during this period. The regulations in place themselves act to reduce the circulation of the virus and by sticking strictly to the rules, people who are vulnerable will reduce their risk of exposure. Further reductions in risk can be achieved by:</p> <ul style="list-style-type: none"> - keeping contacts outside the household to a minimum and avoiding all situations either inside or outside where a physical distance of 2m from those outside your household cannot be maintained; - shopping at quieter times of day and going once per week rather than every day, if you cannot do this online - washing hands regularly for 20 seconds with soap and water and using hand sanitiser - where hand washing facilities are not available - wearing a face covering when required - avoiding touching surfaces that have been touched by others.

6. General / Miscellaneous Questions

Ref	Question	Response
6.1	Will there be any pay increase, bonus, or enhanced rate of pay for agenda for change staff during this period?	Agenda for Change is a nationally agreed framework covering both pay and terms and conditions, and we will be adhering to this national agreement.
6.2	What is the difference between self-isolation and social distancing?	<p>Self-isolation is following the government’s stay at home advice. This is about protecting others and slowing down the spread of COVID-19. It is very important that anyone who has Covid-19 symptoms, however mild, or may have been exposed to it, limit the number of people they come into contact, with in line with the Public Health advice.</p> <p>Self-isolation requires that you do not:</p> <ul style="list-style-type: none"> • Go to work, school or public areas; • Use public transport or taxis; • Have visitors, such as friends and family in your home; • Go out to buy food or collect medicine – order them by phone or online, or ask someone else to drop them off at your home. <p>Social distancing requires you to take steps to reduce the social interaction between yourself and other people. You must:</p> <ul style="list-style-type: none"> • Avoid contact with someone who is displaying symptoms of coronavirus (COVID-19). These symptoms include high temperature and/or new and continuous cough and or a loss or change to your sense of smell or taste; • Avoid non-essential use of public transport, varying your travel times to avoid rush hour, when possible;

		<ul style="list-style-type: none"> • Work from home, where you can. The Health Board will support you to do this, if you work in a suitable role; • Avoid large gatherings, and gatherings in smaller public spaces such as pubs, cinemas, restaurants, theatres, bars, clubs; • Avoid gatherings with friends and family. Keep in touch using remote technology such as phone, internet, and social media; and • Use telephone or online services to contact your GP or other essential services.
6.3	<p>How should I transport my uniform that I have worn on a shift?</p>	<p>For staff members that have a uniform, the appropriate use of personal protective equipment (PPE) will protect staff uniform from contamination when worn appropriately.</p> <p>It is best practice to change in/out of uniforms at work and not to wear them to and from the workplace. Uniforms should be transported home in a disposable plastic bag. This bag should be disposed of in normal household waste stream.</p> <p>Community staff will be required to travel between patients in the same uniform and as above the appropriate choice of PPE will protect their uniform when involved in patient contact.</p> <p>Uniforms should be laundered as follows:</p> <ul style="list-style-type: none"> • Separately from other household linen. • In a load not more than half the machine capacity. • At the maximum temperature the fabric can tolerate, then ironed or tumble-dried.
6.4	<p>I am looking to recruit to a post, or am in the process of recruiting. Can I bypass employment checks?</p>	<p>No, safe recruitment practices are still a key component of the Health Board's processes.</p> <p>If you are waiting for someone to complete their employment checks, please bear in mind that the individual may still have a contractual notice period to complete once all pre-employment checks are completed.</p> <p>If the DBS check or references are outstanding, you can work with HR to risk assess this.</p>

		<p>If the Occupational Health check is outstanding, please send the individual's name, date of birth and job reference to ctt_occhealthnewstart@wales.nhs.uk to ask for a progress update with the clearance.</p> <p>We do not have a policy framework to allow us to bypass this check, and it is key to understanding any adjustments or additional protection that an employee may require to fulfil their role safely.</p>
<p>6.5</p>	<p>I have recruited a new member of staff from overseas. What do I need to be aware of in relation to their international travel to relocate?</p>	<p>As of the Welsh Government guidance, currently as at 16 July 2020, registered health or care professionals are no longer exempt from self-isolation so if a new recruit arrives in the UK from a non-exempt country or territory on or after 10 July 2020, they will be required to self-isolate for 14 days.</p> <p>Up to date guidance identifying the countries and territories which are exempt is available on the following Welsh Government site:</p> <p>https://gov.wales/exemptions-self-isolation-coronavirus-covid-19-html</p>
<p>6.6</p>	<p>What is the position regarding Covid-19 Workforce Risk Assessments, including for those not coming out of a period of shielding?</p>	<p>A Covid-19 Workforce Risk Assessment Tool has now been released on an All Wales basis. Everybody needs to complete this risk assessment (not just those leaving shielding).</p> <p>The All Wales Guidance is available here:</p> <p> 14-08-2020 Covid-19 Workforce</p> <p>And the Tool's FAQs are available here:</p> <p> 14-08-2020 Covid-19 Workforce</p>

6.7	<p>Will formal processes and timescales in workforce/employee relations policies and procedures be suspended during the pandemic?</p>	<p>The Health Board and our trade union colleagues will work in partnership to ensure that all formal high and low level employment relations cases are resolved / dealt with in a speedy and pragmatic during the pandemic. All such cases will be dealt with in accordance with the NHS Wales Management of Disciplinary and Grievance Hearings during COVID-19 guidance.</p> <p>  NHS Wales Disc & Griev Hearings durir </p>
6.8	<p>What is the Health Board's position regarding the bringing in and sharing of food in the workplace to celebrate a staff member's birthday or an occasion?</p>	<p>To ensure robust social distancing in the workplace at this time, the Health Board is requesting that staff do not bring in and share food for events / occasions such as birthdays, retirements etc. While we appreciate that this is an important part of the NHS culture, during this time we must discourage and prevent staff gathering together. To prevent such gathering, staff are encouraged to mark these occasions by giving a card, having a collection etc. as an alternative.</p>
6.9	<p>Has the Health Board produced any guidance for staff in respect of movement between different wards and DGH sites?</p>	<p>To ensure that the Health Board is able to continue to provide safe and timely services to our patients during COVID-19, staff may be requested to work on a different ward(s) and or DGHs. Where such decision are made they will be subject to risk assessment and discuss with the affected staff.</p>

7. Health and Wellbeing

Ref	Question	Response
7.1	<p>I am concerned about my mental health and wellbeing, and that of my family. What advice can you give me?</p>	<p>Social isolation, reduction in physical activity, unpredictability and changes in routine can all contribute to increasing stress. Many people including those without existing mental health needs may feel anxious about this impact including support with daily living, ongoing care arrangements with health providers, support with medication and changes in their daily routines.</p> <p>If you are receiving services for your mental health, learning disability or autism and are worried about the impact of isolation please contact your key worker or care coordinator or provider to review your care plan. If you have additional needs please contact your key worker or care coordinator to develop a safety or crisis plan.</p> <p>Understandably, you may find that shielding and social distancing can be boring or frustrating. You may find your mood and feelings are affected and you may feel low, worried or have problems sleeping and you might miss being outside with other people.</p> <p>At times like these, it can be easy to fall into unhealthy patterns of behaviour which in turn can make you feel worse. There are simple things you can do that may help, to stay mentally and physically active during this time such as:</p> <ul style="list-style-type: none"> • Look for ideas of exercises you can do at home on the NHS website; • Spend time doing things you enjoy – this might include reading, cooking, other indoor hobbies or listening to favourite radio programmes or watching TV; • Try to eat healthy, well-balanced meals, drink enough water, exercise regularly, and try to avoid smoking, alcohol and drugs; • Try spending time with the windows open to let in the fresh air, arranging space to sit and see a nice view (if possible) and get some natural sunlight, or get outside into the fresh air, keeping at least 2 metres away from others.

Constantly watching the news can make you feel more worried. If you think it is affecting you, try to limit the time you spend watching, reading, or listening to media coverage of the outbreak. It may help to only check the news at set times or limit this to a couple of times a day.

Try to focus on the things you can control, such as your behaviour, who you speak to and who you get information from. Every Mind Matters provides simple tips and advice to start taking better care of your mental health. Please see the following link for 10 tips to help:

<https://www.nhs.uk/oneyou/every-mind-matters/coronavirus-covid-19-anxiety-tips/>


The CTMUHB COVID-19 Wellbeing Intranet site can be found below:

<http://ctuhb-intranet/News/Coronavirus/SitePages/Wellbeing.aspx>

At the start and end of every shift ask staff if they are ok and listen to how they are feeling. If any member of staff is struggling, you can signpost them to Occupational Health. If you need any additional guidance on how to support staff then Dr Clare Wright (Strategic Lead for Wellbeing) can be contacted for advice and support via the HR Hub ctm_cov19_hr@wales.nhs.uk Tel 01443 443636

If you are struggling with your mental health, please see the NHS mental health and wellbeing advice website for self-assessment, audio guides and tools that you can use. If you are still struggling after several weeks and it is affecting your daily life, please contact NHS 111 online. If you have no internet access, you should call NHS 111.



Staff now have access to a 24/7 employee assistance programme, introduced for mental health support. The service can be accessed by calling 03303 800658. To find the full range of services available, visit vivup.co.uk


<p>7.2</p>	<p>How can I support the health and wellbeing of my staff during the pandemic?</p>	<p>At the start and end of every shift ask staff if they are ok and listen to how they are feeling. If any member of staff is struggling, you can signpost them to Occupational Health.</p> <p>If you need any additional guidance on how to support staff then Dr Clare Wright (Strategic Lead for Wellbeing) can be contacted for advice and support via the HR Hub ctm_cov19_hr@wales.nhs.uk Tel 01443 443636</p> <p>Provide daily briefings to staff on any changes that are occurring around the provision of care in your unit. If there are no changes or no new information is available, it is also important that you pass that on to staff. The feeling of not knowing what is happening can be really stressful for staff. A template is attached</p> <p style="text-align: center;">  Pre brief Debrief template.docx </p> <p>Ensure that you have some way of keeping in contact with your staff if they have to self-isolate or be at home caring for their children.</p>
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8. Medical Job Plan, Appraisal and Revalidation

Ref	Question	Response
8.1	I am a medical member of staff and have an appraisal booked, what do I do?	<p>If clinical commitments make it difficult for you to prepare for, or arrange your appraisal, then don't worry.</p> <p>Inform Rebecca Seldon and your appraisal date can be delayed. If you are in self-isolation and wish to carry out your appraisal via a video call method e.g. Skype, Face time, WhatsApp this can be facilitated.</p> <p>If a delayed appraisal has an impact on your revalidation do not worry. We may be able to recommend revalidation anyway, or if not we can defer your revalidation date (which has no implications for you).</p>
8.2	What happens if I don't have a job plan?	<p>There will be a pause to the current initiatives to implement job planning reviews. This will be restarted when there is more capacity. This will not affect Commitment Awards, ACCEA applications etc.</p>

9. NHS Wales COVID-19 Workforce Risk Assessments

Ref	Question	Response
9.1	<p>What is the position regarding NHS Wales Covid-19 Workforce Risk Assessments, including for those not coming out of a period of shielding?</p>	<p>NHS Wales has developed a Covid-19 Workforce Risk Assessment Tool to be used by all NHS Wales organisations. It is mandatory for all Health Board staff to complete a risk assessment, not just those staff who were shielding or those from the BAME community.</p> <p>The All Wales Guidance is available here:</p> <p> 14-08-2020 Covid-19 Workforce</p> <p>And the Tool's FAQs are available here:</p> <p> 14-08-2020 Covid-19 Workforce</p>
9.2	<p>How do I access the NHS Wales COVID-19 Risk Assessment?</p>	<p>It is now mandatory for all Health Board staff to complete a NHS Wales COVID-19 Risk Assessment, regardless of whether or not they have completed an earlier version.</p> <p>The risk assessment process is designed to assist you and the Health Board as your employer, to do everything possible to keep you safe and well during the pandemic.</p> <p>The NHS Wales COVID-19 Risk Assessment is now a mandatory training requirement within your ESR compliance matrix. It will appear as follows in your ESR account 110 MAND COVID19 Workforce Risk Assessment - 6 months .</p>

		<p>This new ESR competency will automatically appear “red” on your compliance matrix. Once you have successfully completed the relevant learning certification, the ESR competency will turn “green”, confirming that you are now compliant.</p> <p>The Risk Assessment can be accessed by completing an ESR 110 E-learning Certification. The Learning Certification is called</p> <p>110 e-Learning Certification - COVID-19 Workforce Risk Assessment</p> <p>At this time you are recommended to complete the Risk Assessment every 6 months, or more frequently should any of your relevant health conditions or circumstances change. The following guidance will assist you to undertake your risk assessment on ESR.</p> <p> E-learning - Completing COVID1</p> <p>How to complete the NHS Wales COVID-19 Risk Assessment on ESR Guidance</p> <p>If you have any queries regarding the NHS Wales COVID-19 Workforce Risk Assessment Tool, please discuss them with your manager in the first instance.</p>
9.3	<p>If a previously shielding member of staff has completed the risk assessment and scores 7 or above, can they return to work to their substantive</p>	<p>Those staff that work in patient facing roles who has previously been advised to shield by the Chief Medical Officer and score 7 or above on the NHS Wales COVID-19 Risk Assessment continue to be extremely vulnerable to COVID-19. Therefore, the Health Board as their employer has a duty of care to protect their health, safety and wellbeing and pay due regard to the risk assessment outcome, as the risk to these staff still remain high.</p>

	<p>“patient facing” role, with suitable PPE, if they are requesting to do so?</p>	<p>Where shielding staff are employed in patient facing role and they wish to return to work, efforts must be concentrated on finding meaningful work for them either in a low risk non-patient facing environment or remotely at home.</p> <p>Therefore, where shielding staff are employed in patient facing role and they wish to return to work in their substantive post, efforts must be concentrated on finding meaningful work for them either in a low risk non-patient facing environment or remotely at home. Managers should not allow these staff to return to work in patient facing roles, regardless of the provision of suitable PPE.</p>
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10. Occupational Health – Advice for Managers

<p>10.1</p>	<p>Occupational Health and Wellbeing has advised that a nurse should be either working from home or practising stringent social distancing measures. I cannot implement the advice what should I do?</p>	<p>You should ask the member of staff to undertake a NHS Wales COVID-19 Workforce Risk Assessment to identify alternative duties (if any) that they can perform that would enable them to remain in the workplace, while complying with the OH advice and COVID-19 guidance. The risk assessment must be undertaken and recorded in the staff member’s ESR account.</p> <p>Examples of arrangements already implemented in CTMUHB include:</p> <ul style="list-style-type: none"> • District Nurses who usually travel together to a patients’ house are now going in their own cars and contacting the patient/family prior to the visit to ensure all household contacts are asymptomatic. Where individuals are symptomatic the work can be allocated to another Nurse who is competent with wearing the relevant personal protective equipment (PPE) • A senior Doctor is taking a history from a patient, maintaining appropriate space to comply with the social distancing measures, a colleague is undertaking the examination then the senior Doctor plans the treatment and advice for the patient. • A Porters’ usual duties include direct patient contact, pushing patients on a trolley. They have now been moved away from the patient facing role and now completing office based work. • A Health Care Support Worker was shielding at home and the manager arranged for them to sort training packages for new staff and update Standard Operating Procedures (SOP), as they were unable to use a CTMUHB computer at home. • A receptionist who should be social distancing has been moved to a back office dealing with telephone calls and other administrative duties. Colleagues are being reminded of the importance of social distancing.
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10.2	<p>There are six staff working in the same office and they are unable to sit at the recommended 2 metres apart for social distancing due to the layout of the desks. What can they do?</p>	<p>Speak to your direct line manager and consider the following:</p> <ul style="list-style-type: none"> • Consider altering the days of work worked by staff and stagger start and finish times; • Mark the floor to identify the recommended 2 meter safe distance; • Consider re-configuring the desks and moving furniture to achieve the 2 meter safe distance; • Identify an alternative work area.
10.3	<p>I have a member of staff with learning disabilities but otherwise no health conditions. Can they work?</p>	<p>You must ensure that they understand the guidance relating to infection, prevention and control measure e.g. hand washing, wearing a face covering, wearing of appropriate PPE and correct 'donning' and 'doffing' (if it is a requirement of their role) and that they are competent at doing so. You should maintain a record of the conversation and what was agreed with the member of staff.</p> <p>Guidance in relation to Social Distancing can be found at: https://www.gov.uk/government/publications/covid-19-guidance-on-social-distancing-and-for-vulnerable-people/guidance-on-social-distancing-for-everyone-in-the-uk-and-protecting-older-people-and-vulnerable-adults</p> <p>Guidance for employers and businesses on coronavirus (COVID-19) can be found at: https://www.gov.uk/government/publications/guidance-to-employers-and-businesses-about-covid-19/guidance-for-employers-and-businesses-on-coronavirus-covid-19</p>

11. Pay Progression

Ref	Question	Response
11.1	<p>Pay Progression - Band 8c and 8d and Band 9 roles:</p> <p>I am the top of my band will I have to re-earn the incremental points.</p>	<p>Due to the current climate posed by the COVID-19 virus, line managers and their staff will not be required to follow the new pay progression rules to re-earn incremental points. Payroll have been informed of this interim change in policy that will remain in place until such time as the situation changes.</p>
11.2	<p>Pay Progression – Staff who are due a pay step increase what will happen if a PDR/pay progression meeting cannot be completed due to work pressures during COVID-19.</p>	<p>Due to the current climate posed by the COVID-19 virus, line managers and their staff will not be required to follow the new pay progression rules to earn an annual pay step (incremental point). Payroll have been informed of this interim change in policy, will remain in place until such time as the situation changes.</p>

12. Self-Isolation of Children / Dependents Support for Employees

Ref	Question	Response
12.1	<p>What support is there for individuals who have to look after a child or dependant who has been advised to self-isolate because they are in, a school grouping which has been advised to self-isolate, or an at risk category?</p>	<p>Your manager will be as supportive and as flexible as possible in these circumstances and will consider agreeing a temporary change to working arrangements, such as working a different combination of shifts which can be organised around childcare, change of hours etc.</p> <p>As an alternative to or in addition to the above, those individuals whose role is suitable for and can be undertaken remotely from home, will be permitted to work from home in these circumstances. If following the consideration of all options relating to flexible working, a suitable arrangement cannot be found to accommodate the individual's carer responsibilities, then a period of special leave may be granted in line with the All Wales special leave policy, i.e. up to 3 days (pro rata for part time staff) may be granted per episode which can be used flexibly and broken down into sessions/hours to meet an individual's needs. A combination of other leave may be taken to further extend the period of absence e.g. annual leave, time off in lieu (TOIL) or unpaid leave.</p> <p>Also, the manager will have the discretion to extend the period of paid leave beyond the 3 days, where an individual does not have a spouse, partner or someone living within their household to share the care arrangement with, following consideration of the individual's circumstances, but must be able to account for their decision.</p>

13. Self-Isolation and COVID-19 Related Absence

Ref	Question	Response
13.1	I have symptoms, what do I need to do?	<p>If you are showing symptoms, however mild, please do not report to work.</p> <p>The main symptoms of coronavirus are (as at September 2020):</p> <ul style="list-style-type: none"> • A high temperature – this means you feel hot to touch on your chest and back (you do not need to measure your temperature). • A new continuous cough – this means coughing a lot for more than an hour or 3 or more coughing episodes in 24 hours (if you usually have a cough, it may be worse than usual). • A loss or change to your sense of smell or taste – this means you have noticed you cannot smell or taste anything, or things smell or taste different to normal. <p>Most people with coronavirus will have at least 1 of the above symptoms.</p> <p>You must telephone your line manager to advise them that you have COVID-19 symptoms.</p> <p>If you have any or all of the above symptoms you will need to book a COVID-19 test. From the 22 September 2020 the Health Board has in place a temporary priority booking number for symptomatic key frontline staff and their immediate family members.</p> <p>Staff should call 01443 443151 to book a COVID-19 test, but only if they have at least one of the following symptoms:</p>

		<p>Check your symptoms via the NHS Direct Wales symptom checker available here: https://www.nhsdirect.wales.nhs.uk/SelfAssessments/symptomcheckers/?ScName=CoronaVirusCOVID19&SCTId=175</p> <p>The most up to date advice is available on UK government and Public Health Wales website, and also available on the UHB Intranet. Always check the advice afresh as the guidance is being refined as we learn more about this illness. The UHB intranet is being updated as advice changes. Please refer to the Public Health Wales latest information: https://phw.nhs.wales/topics/latest-information-on-novel-coronavirus-covid-19/</p> <p>Staying at Home Guidance from Public Health Wales is available here: https://phw.nhs.wales/topics/latest-information-on-novel-coronavirus-covid-19/self-isolation-advice/</p> <p>If you do not have any symptoms and have not been in contact with a confirmed COVID-19 case, you should continue to attend work, following the current government and Health Board guidance. Welsh Government - Self Isolation Guidance for households with possible coronavirus</p>
13.2	<p>What should I do if a member of my household is showing symptoms of COVID-19 or is confirmed to be infected following testing?</p>	<p>If someone in your household is showing COVID-19 symptoms, however mild, you and all other household members must stay at home and not leave the house for 14 days. The 14 day period starts from the day when the first person in the house became ill or if they do not have symptoms, from the day their test was taken. If you start displaying symptoms during this time, you must stay at home for at least 10 days from the date when your symptoms appeared, regardless of what day you are on in your original 14 day isolation period.</p> <p>If you live with others and you are the first in the household to have symptoms of coronavirus (COVID-19), however mild, then you must stay at home and self-isolate</p>

		<p>for at least 10 days from the date when your symptoms appeared. You should <u>arrange to have a test to see if you have COVID-19.</u></p> <p>All other household members who remain well must stay at home and not leave the house for 14 days. The 14 day period starts from the day when you first became ill.</p> <p>Please follow the advice from Public Health Wales, and keep in contact with your line manager.</p> <p>Welsh Government - Self Isolation Guidance for households with possible coronavirus</p>
13.3	<p>Self-isolation and returning to work following self-isolation – what do I need to be aware of?</p>	<p>If you have symptoms of COVID-19, however mild, you must self-isolate for at least 14 days from the date when your symptoms started.</p> <p>Those who have tested positive must now self-isolate for 10 days. The 10 day period starts from the day symptoms start, or if asymptomatic, from the day a test is taken. A test should be arranged within 5 days of the symptoms starting. Everyone else in the household must stay at home and self-isolate for 14 days.</p> <p>Public Health Wales’s self-isolation advice is available here: Welsh Government - Self Isolation Guidance for households with possible coronavirus</p> <p>https://gov.wales/self-isolation-stay-home-guidance-households-possible-coronavirus</p>
13.4	<p>What should I do if I am contacted by contact tracing to confirm that I have had close contact with someone that has</p>	<p>You will only be called if it has been confirmed that you have had close contact with someone who has COVID-19. This means you are at increased risk of catching the disease and passing it on to others.</p> <p>You will be asked to self-isolate for 14 days, to make sure you do not spread the virus. It is really important to do this even if you do not have any symptoms. If you have been infected, you could become infectious to others at any point up to 14 days.</p>

	tested positive for COVID-19?	<p>It should be noted that members of your family are not required to self-isolate, but they should follow the general social distancing guidance and avoid contact with you while you are isolating at home.</p> <p>You will also be asked to monitor your symptoms so that you can get tested as soon as possible, if needed. You will only be advised to take a test if you are displaying symptoms. Testing while asymptomatic can generate false negatives and is therefore not recommended.</p>
13.5	If I need to self-isolate because I have COVID-19 symptoms, will I be paid?	You should report your absence in accordance with the Managing Attendance at Work Policy and you will receive your contractual sick pay entitlement.
13.6	If I need to self-isolate because a household member has COVID-19 symptoms and I do not have symptom, will I be paid if I do not go to work?	<p>You will be paid as normal as the current advice is that you and everyone living in your household should stay at home (self-isolate) for 14 days from the first day the household member started displaying symptoms.</p> <p>In this instance you must contact your manager to make them aware that you are required to self-isolate in accordance with Government Guidance as a member of your household is displaying COVID19 symptoms. In this situation if you are not able to work from home during the isolation period, your absence will be recorded as Special Leave / Infection Precaution.</p> <p>If you start displaying COVID19 symptoms while on a period of self-isolation, please inform your manager immediately to ensure your absence is changed to sickness. You must stay at home for at least 10 days from the date when your symptoms appeared, regardless of what day you are on in your original 14 day isolation period.</p>
13.7	I am a bank worker and need to self-isolate so cannot	<p>This guidance document is for substantive staff only.</p> <p>Guidance for bank workers is being developed and its release is imminent.</p>

	<p>work my shifts, will I be paid?</p>	
<p>13.8</p>	<p>I am concerned about the risk of contracting COVID-19 and I don't want to attend work, what should I do?</p>	<p>We understand that this is a difficult and concerning time for everybody. We will endeavour to do everything we can to support you through what is a challenging time. However, there is a clear requirement for you to attend work as normal if you are well.</p> <p>Where business needs allow and depending on your role, your manager may be able to consider flexible working arrangements, to allow working from home, annual, or unpaid leave.</p> <p>If you or a member of your household is in the vulnerable category, please see the advice above regarding shielding.</p> <p>It is normal for people to feel worried at times of uncertainty and anxiety often makes us want to avoid situations that concern us. If this is the case then it is important that you talk through your worries with someone that you trust, e.g. your line manager or a work colleague. Often talking over your fears can help you to better understand what is bothering you and to find solutions.</p>
<p>13.9</p>	<p>How will my absence be recorded?</p>	<p>Absences will be recorded using the usual Health Board's system (Health Roster or ESR). All absences related to a confirmed case of coronavirus will not count for the purposes of triggering a prompt, in accordance with the Managing Attendance at Work Policy.</p> <p>For the purposes of Covid-19 related absences, all references to full pay in this set of FAQs refer to what the individual would have otherwise earned. Full pay will continue to be paid and this will include regularly paid supplements, including any recruitment and retention premia and payments for work outside normal hours i.e. pay will be calculated on the basis of what the individual would have received had he/she been at work.</p> <p>Where an employee has exhausted their full sick pay entitlement, they will receive half pay which will include the above regular payments.</p>

13.10	How do I record my staff's COVID-19 absence?	<p>Please use the relevant health board system for recording staff absence (Health Roster or ESR).</p> <p>Detailed guidance for recording absence within these systems can be found via the following link: http://ctuhb-intranet.cymru.nhs.uk/News/Coronavirus/Workforce%20Documents/How%20to%20record%20%20Absence%20related%20to%20Coronavirus%20in%20ESR%20and%20Health%20roster.pdf</p>
13.11	If a staff member is well and required to self-isolate do they need to provide a FIT note and complete Self-Certification / Return to Work meeting	<p>These staff do not require a FIT note or to complete a self-certification form / have a return to work interview, when they are able to return to work.</p>
13.12	If a staff member is off unwell with COVID-19, do they need to provide a FIT note and have a return to work meeting?	<p>These staff are required to complete a self-certification form and participate in a return to work interview when they return to work.</p> <p>There is no requirement to provide a medical FIT note to cover the period of absence as the self-certification period has been extended to 14 days for COVID-19 related absences. All other absences should follow the standard Managing Attendance at Work Policy processes.</p>
13.13	I am self-isolating and am well enough/able to work from home, how is my absence recorded?	<p>You will not be recorded as absent from work, as long as you are able to undertake your role and associated work from home, during this period.</p>

<p>13.14</p>	<p>There are a high proportion of staff in our team / department who are self-isolating, can I be required to work extra hours to cover the work?</p>	<p>No staff will not be forced to work beyond their contractual hours. Should the Health Board need you to work additional hours, your manager will contact you to determine your availability to work any additional hours.</p> <p>During the pandemic the Health Board has deployed staff to different areas to ensure that we can continue to deliver safe and effective care to our patients. During the pandemic we are likely to have high priority areas or areas affected by staff absence This will alter over time. Therefore we will continue to keep the need to redeploy staff, under constant review.</p> <p>Where we need to deploy staff, we will initially look to use volunteers. However, we may reach a point where volunteer levels are unable to sustain the needs of the service. These are unprecedented time. Please be assured that we will only redeploy staff where it is safe to do so, where they have had the necessary training and have the necessary support to be able to deliver services safely.</p> <p>Managers must ensure that where staff are working additional hours that you make sure they are still getting adequate rest breaks. While we are facing challenging times we must make sure all staff are working safely and that they are not working excessive hours. EWT regulations requires staff to have an 11 break every 24 hours. While this rest requirement can be breached in emergency situations, during surges in COVID-19 there may be occasional breaches of this regulation to ensure service continuity and safe patient services, but this should not become the norm.</p> <p>If you have local arrangements for accruing time off in lieu there is no need to change them. However, departments need to consider how practical it will be to allow staff to take lieu time in the months ahead in addition to accrued and untaken annual leave. Departments should consider temporarily revising time off in lieu arrangements and arrange for any additional hours worked, to be paid.</p>
<p>13.15</p>	<p>I am due to have an operation and have</p>	<p>If you are able to work from home then you will be permitted to do so. If this is not possible, this will be considered as a medically advised isolation.</p>

	been advised to self-isolate for 14 days ahead of my operation date. How will this be recorded?	The Health Board would ask staff in these circumstances to consider taking some of their annual leave, if they have been unable to do so to date, due to the requirement to provide key services during the pandemic.
13.16	I share a household with someone who has been advised to self-isolate for 14 days ahead of surgery, and I have been advised to self-isolate as well. Will I be paid?	<p>If you are able to work from home then you will be permitted to do so, during this period.</p> <p>If it is not possible for you to work from home, even with adjusted duties, and there is no practical solution to allow you to remain in work and 'shield' the member of the household, you will be required to book 8 days annual leave and you will receive basic pay for the remainder of the 14 day period.</p>
13.17	I have come to the end of 10 days isolation following confirmation of being COVID-19 positive, can I return to work?	<p>If you have not had a high temperature (this means you feel hot to touch on your chest and back (you do not need to measure your temperature)) for 48 hour period and you feel well you can return to work on day 8 following the onset of symptoms. For further information, please see the guidance below.</p> <p>https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection</p>
13.18	I have been self-isolating for 10 days following a positive COVID-19 test, and have not had a temperature for 48 hours but still have a cough. Can I return to work?	The cough may persist for several weeks in some people, despite the coronavirus infection having cleared. A persistent cough alone does not mean someone must continue to self-isolate for more than the 10 days.
13.19	I have no symptoms and have been off for	If you have not developed symptoms after your 14 day isolation you should return to work. For further information please see the guidance below.

	14 days as a household contact was symptomatic. Can I return to work?	https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection
13.20	If I am isolating because someone in my household has symptoms and the person with symptoms then tests negative, do I still need to isolate for 14 days?	Should the person's COVID-19 test report as negative and you have had no other contact with a confirmed case, you and the other members of your household, including the person tested, no longer need to self-isolate and can return to work, school etc.
13.21	I have been off for 13 days self-isolating due to a household member having tested positive for COVID-19. I have now developed symptoms. What should I do?	<p>Should you develop coronavirus symptoms late in the 14-day isolation period (for example, on day 13 or day 14) you will be required to self-isolate for a further 10 days from the day that you develop the symptoms.</p> <p>The 14-day household-isolation period will have greatly reduced the overall amount of infection the rest of the household could pass on, and it is not necessary to restart 14 days of isolation for the whole household. This will have provided a high level of community protection. Further isolation of members of this household will provide very little additional community protection.</p> <p>At the end of the 14-day period, any family member who has not become unwell can leave household isolation.</p> <p>https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection</p>
13.22	I have been practising social distancing but I have briefly seen someone who has	Providing you were following the social distancing guidance and you are asymptomatic you can remain in work.

	<p>subsequently developed symptoms. Do I need to stay off work?</p>	<p>If however, you are contacted by TTP and have had close contact with the person that has tested positive and / or you develop symptoms you must follow the self-isolation guidance. For further information please see the guidance below.</p> <p>https://www.gov.uk/government/publications/covid-19-guidance-on-social-distancing-and-for-vulnerable-people/guidance-on-social-distancing-for-everyone-in-the-uk-and-protecting-older-people-and-vulnerable-adults</p>
<p>13.22</p>	<p>What situations do the 10 days self-isolation rules apply to?</p>	<p>You must self-isolate for at least 10 days if:</p> <ul style="list-style-type: none"> • you have symptoms of coronavirus and you tested positive, had an unclear result or did not have a test; • you tested positive but have not had symptoms. <p>If you have symptoms, the 10 days starts from when your COVID-19 symptoms started.</p> <p>If you have not had symptoms, the 10 days starts from when you had the test. But if you get symptoms after your test, you must self-isolate for a further 10 days from the day when your symptoms started.</p> <p>Stop self-isolating after 10 days if you feel OK You can stop self-isolating after 10 days if either:</p> <ul style="list-style-type: none"> • you do not have any symptoms; • you just have a cough or changes to your sense of smell or taste (these can last for weeks after the infection has gone). <p>Keep self-isolating if you feel unwell Keep self-isolating if you have any of these symptoms after 10 days:</p> <ul style="list-style-type: none"> • a high temperature or feeling hot and shivery; • a runny nose or sneezing; • feeling or being sick; • diarrhoea.


		<p>Only stop self-isolating when these symptoms have gone. If you have diarrhoea or you are being sick, stay at home until 48 hours after they've stopped.</p>
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14. Special Leave

Ref	Question	Response
14.1	<p>How much paid special leave can I apply for during the Covid-19 situation?</p>	<p>It has been agreed that staff can apply to have up to a maximum of 7 days paid special leave for the period of the Covid-19 situation. This is an extra allocation to the 6 days already provided for in the policy, but it does not entitle staff to 13 days paid leave in total.</p> <p>The agreement is that this is a new allocation specifically for COVID-19 related issues e.g. school closures an extra allocation to the 6 days in the policy, but does not mean staff are entitled to 13 days in total. This means there is a specific 7 days allocation for staff who are experiencing difficulties due to COVID 19 regardless of what special leave they may have already been granted in the current 12 month rolling period.</p> <p>There is now also a provision to approve special leave to support individuals who have to look after a child or dependant who has been advised to self-isolate because they are in a school grouping which has been advised to self-isolate, or an at risk category.</p> <p>Where flexible and temporary working arrangements (including working from home) cannot provide a solution then a period of special leave may be granted in line with the All Wales special leave policy, i.e. up to 3 days (pro rata for part time staff) may be granted per episode which can be used flexibly and broken down into sessions/hours to meet an individual's needs. A combination of other leave may be taken to further extend the period of absence e.g. annual leave, time off in lieu (TOIL) or unpaid leave.</p> <p>Also, the manager will have the discretion to extend the period of paid leave beyond the 3 days, where an individual does not have a spouse, partner or someone living within their household to share the care arrangement with, following consideration of the individual's circumstances, but must be able to account for their decision.</p>

		In addition staff may also take a combination of other leave to further extend the period of absence e.g. annual leave, time off in lieu (TOIL) or unpaid leave.
14.2	Can special leave be broken down? i.e. used in hours rather than days (or days rather than a week)	<p>Special leave may be used flexibly and broken down into days, sessions, hours to meet an individual's needs.</p> <p>A combination of other leave may also be taken to further extend the period of absence e.g. annual leave, time off in lieu (TOIL) or unpaid leave.</p>
14.3	I have been accepted on the Covid-19 vaccine trial – can I have special leave for the appointments?	<p>The Health Board will approve special leave to take part in a COVID-19 vaccine trial, where the manager is able to support the application without a detriment to service delivery.</p> <p>Evidence of acceptance on to the trial is a pre-requisite to this being considered / granted.</p>

15. Study Leave

Ref	Question	Response
15.1	What will happen to my Study Leave?	<p>During the pandemic only training or study leave that is essential to service delivery should continue, and all other study leave may be stood down at the discretion of line managers.</p> <p>Any queries relating to the cancellation of existing commitments should be directed to your line manager for discussion. Likewise, no new commitments for external training or study leave should be agreed for the foreseeable future, unless it is deemed essential to the provision of key services.</p> <p>on annual leave, study leave and public holiday arrangements for doctors and dentists in training during the Covid-19 pandemic</p>
15.2	What is the current position in respect of doctors and dentists in training during the Covid-19 pandemic?	<p>The current position regarding study leave for doctors and dentists in training during the pandemic are set out in the attached Joint Statement.</p> <p>  Joint statement on junior doctor leave </p>

16. Test, Trace and Protect

Ref	Question	Response
16.1	What is the position on staff testing?	<p>From the 22 September 2020 the Health Board has a temporary priority booking number for symptomatic key frontline staff and their immediate family members.</p> <p>Staff should call 01443 443151 to book a COVID-19 test, but only if they have at least one of the following symptoms:</p> <ul style="list-style-type: none"> • A high temperature – this means you feel hot to touch on your chest and back (you do not need to measure your temperature). • A new continuous cough – this means coughing a lot for more than an hour or 3 or more coughing episodes in 24 hours (if you usually have a cough, it may be worse than usual). • A loss or change to your sense of smell or taste – this means you have noticed you cannot smell or taste anything, or things smell or taste
16.2	If I have been tested for COVID-19 (because I have been contacted by TTP to advise me that I have been in contact with a confirmed COVID-19 case) and I don't have	<p>If you have decided to get a COVID-19 test without being symptomatic and it confirms a negative test result, this will not over-ride the requirement to self-isolate for the 14 day period, as it can take up to 14 days for symptoms to appear.</p>

	any symptoms and not yet received my test result can I attend work?	
16.3	What are the arrangements for contact tracing?	Full contract tracing FAQs are available on the Health Board's website: https://cwmtafmorgannwg.wales/contact-tracing-faqs/
16.4	I have received a message from a contact tracer in line with the Test Trace Protect plan advising that I have potentially been in contact with someone with COVID-19. What steps need to be taken?	<p>You are advised to go home and self-isolate in line with the advice of the contact tracer which will depend on the test result (positive – 10 days post symptom development /until 2 days without fever whichever is the latest or 14 days from last contact with case if the test result is negative). The contact tracer will arrange the test.</p> <p>If asymptomatic, you should self-isolate for 14 days from last contact with case (or households with continuous contact with the case, this will be 14 days from the start of symptoms in the case).</p> <p>Where individuals self-isolate for 10 days with symptoms this will be classed as normal sickness absence but will also be disregarded in respect of cumulative absence and triggers which operate within the Managing Attendance at Work Policy and the individual will receive full pay. Isolation is recorded in line with 2.11 above.</p> <p>Any self-isolation absence in the interests of control of infection (asymptomatic) will be disregarded in respect of the cumulative absence and triggers which operate within the Managing Attendance at Work Policy. These absences will be treated as medical exclusion and will be paid at full pay. In these circumstances, the individual will not be required to provide a Fit Note as the absence will be authorised absence.</p>
16.5	What if a member of staff refuses to take a COVID-19 test having been advised to do so, either following	<p>It is anticipated that refusal to take test will be very rare in light of the current situation.</p> <p>Line managers should encourage staff to take tests in order to comply with health and safety requirements and in support of the regulations of their professional body in the case of medical and clinical staff.</p>

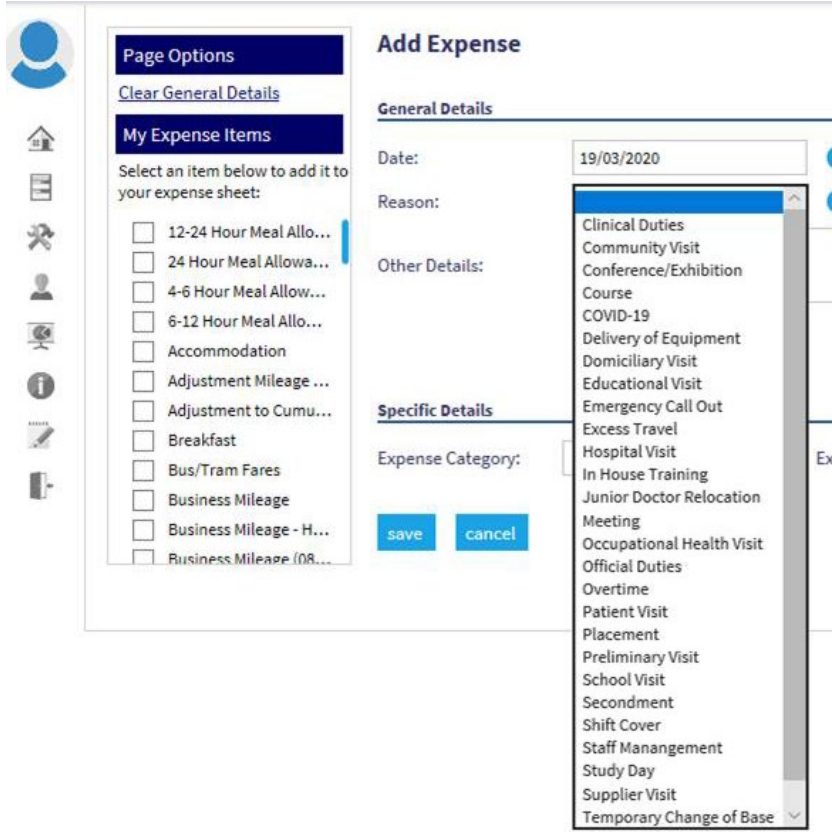
	exposure at work or following contact by a contact tracer?	<p>From a control of infection perspective, the requirement for individuals to take tests if recommended, is similar in principle to ensuring that individuals are up to date with regard to immunisation, e.g. hepatitis B. Health and Safety legislation places a responsibility on individuals and organisations to protect patients so if an individual ultimately refused a test they would be sent home for a period of 14 days and this would be treated as unpaid leave.</p>
16.6	You are identified as a contact of a known individual that has been tested positive for COVID-19, but your COVID test result is negative, what should you do?	<p>You must continue to self-isolate for a 14 day self-isolation period, despite a negative test (with or without symptoms) and follow the advice on https://gov.wales/test-trace-protect-coronavirus</p> <p>If you subsequently become unwell after the 14 day incubation period, you should self-isolate again, and may need a further test.</p>
16.7	What is the NHS COVID-19 app?	<p>The new NHS COVID-19 app is a part of the NHS Wales Test, Trace and Protect Service and is now available and free to download onto your mobile telephone. The app is publicised as the fastest way to see if you are at risk from coronavirus, as the faster you know, the quicker you can alert and protect your family, friends and community.</p> <p>The app has a number of tools to protect you, including contact tracing, local area alerts and venue check-in. It uses proven technology from Apple and Google, designed to protect every user's privacy.</p>
16.8	I have the NHS Wales Test, Trace and Protect COVID-19 App on my mobile phone / device am I required	<p>If you have this App on your mobile phone / device, you must turn off the blue tooth contact tracing functionality when in the workplace, even if you leave your phone / device in a locker, bag etc.</p>

	to turn this off when I am in the workplace?	Turning the App off when in the workplace is important, as it does not take into account where you work and whether you are wearing any PPE. If this functionality is left switched on in the workplace the blue tooth contact tracking functionality will engage with other nearby / passing devices which has this App installed and switched on.
16.9	I have been contacted by TTP to advise that I have had recent contact with a patient with confirmed COVID-19. During the contact I was wearing PPE (gloves, apron and mask) but not the Visor eye / face protection, will I need to self-isolate?	<p>If an employee in a healthcare setting is contacted by track and trace to say they have been in recent contact with a patient that has tested positive for COVID-19 unless they were wearing full medical grade PPE (Single use gloves, Single use apron (or gown if risk of spraying/splashing), FRSM type IIR mask for direct patient care and Eye/face protection), they will be required to self-isolate.</p> <p>Therefore, should an employee not have been wearing all four pieces of the full medical grade PPE when they were in contact with the patient, they will be required to self-isolate for 14 days.</p> <p>Please Note PHW is due to issue new guidance week commencing 19 October 2020 regarding the wearing of visors eye protection for staff. It is anticipated that the guidance will confirm that visors eye protection should be used on a risk assessment basis only, for medium and high pathways (i.e. not essential to be worn in all COVID-19 or possible COVID-19 areas) and essential during all AGP procedures.</p>
16.10	I am off on annual leave and have been contacted by TTP to confirm that I have been in close contact with a confirmed positive case. Will I be able to claim my annual leave back?	<p>In this scenario you must report your absence to your manager. Your absence will then be recorded as a medical exclusion on ESR. Any period of planned leave that falls in the self-isolation period will be credited back to your annual leave entitlement.</p> <p>If you become unwell during the self-isolation period with COVID-19 or for any other ill health reason, you should contact your manager to ensure that this period of absence is recorded as sickness absence, in which case your booked leave would not stand and you may be able to claim it back if you comply with the Managing Attendance at Work Policy requirements.</p>

16.11	<p>There appears to be conflicting advice being given regarding the requirement to self-isolate when contacted by TTP. What is the correct advice?</p>	<p>If an individual is contacted by and asked to self-isolate by NHS Track and Trace, because they have been in close contact with someone who has tested positive for COVID-19 they must self-isolate for 14 days.</p> <p>The individual requested to self-isolate by Track and Trace should not request a COVID-19 test, unless they are symptomatic, as it can take up to 14 days for symptoms to appear.</p> <p>Where an individual is contacted by Track and Trace and told to self-isolate for 14 days, but decides to get a COVID-19 test without being symptomatic, which confirms a negative test result, this will not over-ride the requirement to self-isolate for the 14 day period, as it can take up to 14 days for symptoms to appear.</p> <p>If during the period of self-isolation the individual develops COVID-19 symptoms and tests positive for COVID-19, they must self-isolate for a further 10 days from the day on which their symptoms appeared.</p>
16.12	<p>If I have a random COVID-19 test in work and I am in a patient facing role, should I self-isolate until I have the result confirmed?</p>	<p>These are random asymptomatic tests. As long as you are not symptomatic, there is no reason not to be in work. Therefore, you should report to work as normal.</p>

17. Travel

Ref	Question	Response
17.1	<p>We are hearing that staff are being stopped by the Police who are asking for sight of a letter from the UHB confirming the need for them to be mobile (in addition to UHB ID badges). Will there be an official UHB letter or can someone talk to SWP and agree on what we are doing?</p>	<p>A Key Worker Certificates can be obtained upon request from Beth Winder via her email address Beth.Winder@wales.nhs.uk</p> <p>We will be checking our staff records to ensure those requesting the certificate are Health Board employees or workers.</p>
17.2	<p>Is there any advice about the renewal of driving licences?</p>	<p>There has been no provision made to extend the renewal period of the licences from the gov.uk website. The DVLA has a recorded message informing they are working on HGV renewals and people directly involved with COVID-19 (key workers). Licenses can be updated online with a current passport. Staff should be mindful that there may be delays due to COVID-19, therefore, they should apply in good time and in well in advance of the expiry date.</p> <p>We have received confirmation from North Wales Police that anyone driving with an out of date licence will be committing an offence and their insurance policies will be invalid.</p>
17.3	<p>Is there any advice about MOTs?</p>	<p>Due to the COVID-19 pandemic, the government announced that from 30th March 2020, MOT due dates for cars, motorcycles and light vans will be extended by 6 months to help prevent the spread of coronavirus. Vehicles will therefore be automatically given a 6-month MOT exemption.</p>

		<p>The DVSA are not changing the records for all vehicles affected during this six month window in one large batch, instead the records will be amended incrementally on an ongoing daily basis.</p>
<p>17.4</p>	<p>If I am travelling to an alternative work location(s) as a result of being redeployed to support front line / critical services, will I be eligible to claim expenses?</p>	<p>You will be able to claim for any travel expenses incurred as a result of being deployed to supporting services. This will be claimed through the e-Expenses system and claimed as business mileage. The system will automatically deduct home to base and you can use the reason 'COVID-19' for reporting.</p> 
<p>17.4b</p>	<p>I have been deployed to a base that requires</p>	<p>Additional travel time should be factored in to the duration of the working shift/day.</p>

	me to travel for a longer period of time. Can I reclaim the additional travel time?	N.B Previously Q 4.7
17.5	How should the situation be handled if an individual needs to self-isolate (quarantine) for 14 day following return from an overseas trip?	<p>The UK and Welsh governments advises against all non-essential travel. However there are a number of countries and territories which are on a quarantine exemption list. Please note that this list may change on as regular basis. From June 2020 new rules have been put in place on entering the UK from those countries and territories that are not on the exemption list.</p> <p>The Welsh Government list of exempted destinations can be found here, noting the Welsh list may differ from those of the other three UK countries: https://gov.wales/exemptions-self-isolation-coronavirus-covid-19-html</p> <p>The rules are for both residents and visitors. When these rules are in place, all individuals entering the UK will be required to provide their journey and contact details. They will not be allowed to leave their home / place they are staying for the first 14 days following their entry into the UK.</p>
17.6	What will the working position be of an individual self-isolating in these circumstances for 14 days?	<p>Each individual instance will need to be considered on its own merits.</p> <p>If an individual is able to work from home, then they should be supported to do so.</p> <p>As a general principle, if an individual returns from an overseas holiday from a country or territory that is not on the exemption list and they are unable to work from home, while they are self-isolating for the 14 days this period should be managed via a combination of annual leave, unpaid leave and time off in lieu.</p> <p>The UHB may want to give sympathetic consideration to circumstances where the individual's booking was made prior to 17 March 2020 (when Foreign and Commonwealth advice on travel was amended) and the individual is unable to secure a refund or been allowed to reschedule for a future date by the travel company/airline.</p>

There may be some cases where an individual needs to travel overseas for a family emergency, or to attend a funeral, or other long standing family matter. In these events, the individual may still need to self-isolate at home on return for a period of 14 days, depending on the country or territory that they travelled to, and they will receive basic pay for this period.

Individuals may be on holiday in an approved destination which then is removed from the list of exempt countries and territories. In this situation individuals will be supported to self-isolate upon their return i.e. the absences will be treated as medical exclusion and will be paid at full pay. In these circumstances, the absence will be authorised absence. ([Information on recording absence in in question 13.10](#)).

Where individuals have a holiday currently booked or choose to book a holiday to a destination which is not on the list of countries included in the exemption list or to a destination which subsequently is removed from the list and they still decide to travel, this will be in the knowledge that they will have to self-isolate for 14 days upon their return to the UK. In these circumstances they will have to work from home if they can and where working from home is not possible, individuals will be required to take a combination of annual leave, TOIL or unpaid leave.

In all cases individuals are required to have a conversation with their line manager before travel and plan how they will meet this guidance on their return.

Registered health or care professionals are no longer exempt from self-isolation. Therefore where staff arrive into the UK from a non-exempt country or territory are required to self-isolate for 14 days.

ARCHIVED FAQs

Logged in Alphabetical Order and Retaining the Original Reference Number

Agency Staffing

Ref	Question	Response
14.1	What is the position regarding Agency staff working across more than one Health Board?	<p>This is being discussed at a national level and any position will be reflected in these FAQs.</p> <p>If we have agency nurses working with us, and we have gaps, please request via Deb Matthews with lines of work that would encourage them to stay within the Health Board.</p>
14.2	Can Agency staff have access to training?	<p>If we have existing agency staff that work here regularly, and there is training available with capacity, and they can be released from the area, we could support them to attend in some circumstances – please speak to the Senior Nurses.</p>

Overtime

Ref	Question	Response
7.1	Can overtime be paid to Band 8a staff and above?	<p>Advice at September 2020 At this time overtime cannot be paid at time and a half to these band, as the Health Board has begun to re-set its services following the spring COVID-19 surge in hospital admissions. Should there be another surge in hospital admissions due to COVID-19 this position will be revisited.</p> <p>Advice at March 2020 - See current position above Yes, overtime can be paid at time and a half to these bands, but only where the additional activity relates specifically to the management of COVID-19. This is effective from 19 March 2020.</p>
7.2	Can the overtime payments be paid more frequently? Fortnightly or weekly for example.	<p>We have looked at the frequency of the substantive pay for those completing additional hours (including bank and overtime). Unfortunately it is not possible to have a substantive monthly pay cycle and a weekly/fortnightly pay cycle for additional hours – we have discussed this with Payroll and are advised that it will cause errors in tax calculations and payments. We have also been advised that the HMRC do not support this arrangement.</p>
7.4	What are the arrangements bank holiday working?	<p>Within the UHB, many of our staff work over bank holiday as we continue to provide a comprehensive service. For the majority of the front line services, the requirement to provide bank holiday service is the norm and, as such, the agreed national enhancements will be paid to all staff who are required to work or be on-call during a general public holiday.</p> <p>It is recognised that there may be a requirement for more staff to work over the Easter period than would be usual. As such, we would expect individual teams to determine if there is a need for staff to be in work on Good Friday and/or Easter Monday and for this to be agreed with line managers.</p>

7.5	What are the arrangements for overtime?	<p>If you are contracted to work part time, additional hours up to 37.5 hours are paid at plain time, regardless of activity.</p> <p>For Healthcare Support Workers, additional hours over 37.5 hours are offered as bank. If the shift remains unfilled at 24 hours before the start time, Heads of Nursing may offer these shifts as overtime.</p> <p>For all others, hours worked over 37.5 hours per week will be paid in line with the Agenda for Change national agreement.</p>
7.6	Will someone lose their bank holidays if self-isolating or shielding during these holiday dates?	<p>Public holidays are not accumulated and are set dates.</p> <p>If you are self-isolating or shielding over a bank holiday and you would not normally work bank holidays, the bank holidays will stand and must be booked from your annual leave allocation.</p> <p>If you would normally work the bank holidays, then based on what you would have contractually been rostered, payment will be made.</p>

School Closures and Looking After Dependants

Ref	Question	Response
5.1	My child's school or nursery has closed/is closing – what do I do?	<p>The closure of schools across Wales has been announced by the Welsh Government. We understand how this will impact on our staff with children and the difficulties in trying to make suitable alternative arrangements over such a prolonged period.</p> <p>Please see our statement on the all-Wales position here: http://ctuhb-intranet/News/Coronavirus/LatestMessage/SitePages/Home.aspx</p> <p><i>Please note that the extension of 7 days special leave is in addition to the standard Special Leave Policy advice, and is to be used for COVID-19 situations only.</i></p> <p>In relation to the guidance around childcare for children of key workers, please refer to the advice from Welsh Government via the link below or contact your usual childcare provider for further information: https://gov.wales/coronavirus-and-childcare-provision</p>
5.2	What other advice and support is available for staff regarding childcare?	<p>For information and advice on childcare and school hub provision for key workers during the COVID-19 situation, please refer to your respective local authority's website as follows:</p> <p>Bridgend – https://www.bridgend.gov.uk/my-council/council-priorities-and-performance/coronavirus-covid-19-latest-information-and-advice/apply-for-emergency-childcare-for-key-workers/</p> <p>Rhondda Cynon Taff - https://www.rctcbc.gov.uk/EN/Resident/EmergenciesSafetyandCrime/InformationforResidentsCoronavirus/SchoolClosuresandadviceforparents.aspx</p>

Merthyr Tydfil - <https://www.merthyr.gov.uk/resident/coronavirus/school-closures-emergency-childcare-and-free-school-meals/>

Powys - <https://en.powys.gov.uk/emergencyhubs>

Swansea - <https://www.swansea.gov.uk/covid19schoolsandcolleges>

Cardiff - <https://www.cardiff.gov.uk/ENG/Your-Council/Strategies-plans-and-policies/Emergency-Planning-and-Resilience/coronavirus-information/key-worker-childcare/Pages/default.aspx>

Newport - <http://www.newport.gov.uk/en/Schools-Education/Childcare-for-prioritised-key-workers.aspx>

Shielding and Vulnerable and Extremely Vulnerable People

Ref	Question	Response
3.1	With regards to the extremely vulnerable group who are advised to isolate for 12 weeks - does the manager request a copy as evidence?	<p>Yes please.</p> <p>Your status will be recorded in line with the advice in question 2.11.</p>
3.2	For those in the extremely vulnerable group and advised to self-isolating for 12 weeks, what is the position for those who do not feel they are highest at-risk	<p>Public Health England have published the following guidance: https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19</p> <p>We are following national medical advice - if someone wishes to go against this, they must put their reasoning in writing to, and have a discussion with, their manager. We cannot advise on individual cases via the FAQs.</p>
3.3	A member of my household is in the extremely vulnerable category and has been advised to self-isolate for 12 weeks. Do I need to isolate for this period too?	<p>The advice is that those who live with vulnerable people shielding for 12 weeks are not required to adopt the protective shielding measures for themselves. They should only do what they can to support the vulnerable person in shielding and they should stringently follow guidance on social distancing, reducing their contact outside the home.</p> <p>The social distancing measures to be stringently followed are as follows:</p> <ol style="list-style-type: none"> 1. Avoid contact with someone who is displaying symptoms of coronavirus (COVID-19). These symptoms include high temperature and/or new and continuous cough 2. Avoid non-essential use of public transport when possible 3. Work from home, where possible. Your employer should support you to do this.

		<ol style="list-style-type: none"> 4. Avoid large and small gatherings in public spaces, noting that pubs, restaurants, leisure centres and similar venues are currently shut as infections spread easily in closed spaces where people gather together. 5. Avoid gatherings with friends and family. Keep in touch using remote technology such as phone, internet, and social media 6. Use telephone or online services to contact your GP or other essential services <p>If all options are exhausted and it is apparent that there is no practical solution to allow the individual to remain in work and “shield” the member of the household, then the individual will be asked to take 8 days annual leave and will receive basic pay for the remainder of the period.</p>
3.4	<p>I am classed as a vulnerable person, what do I need to do?</p>	<p>Current Public Health Wales Guidance dated 20/03/2020 strongly recommends you should work from home if at all possible. If unable to do so you should discuss this further with your line manager to see if you can work strictly in line with the social distancing measures in order to avoid contact with others.</p> <p>Vulnerable people includes those who are:</p> <ul style="list-style-type: none"> • aged 70 or older (regardless of medical conditions) • under 70 with an underlying health condition listed below (i.e. anyone instructed to get a flu jab as an adult each year on medical grounds): <ul style="list-style-type: none"> ○ chronic (long-term) respiratory diseases, such as asthma, chronic obstructive pulmonary disease (COPD), emphysema or bronchitis ○ chronic heart disease, such as heart failure ○ chronic kidney disease ○ chronic liver disease, such as hepatitis ○ chronic neurological conditions, such as Parkinson’s disease, motor neurons disease, multiple sclerosis (MS), a learning disability or cerebral palsy ○ diabetes ○ problems with your spleen – for example, sickle cell disease or if you have had your spleen removed

- a weakened immune system as the result of conditions such as HIV and AIDS, or medicines such as steroid tablets or chemotherapy
- being seriously overweight (a BMI of 40 or above)
- those who are pregnant (additional guidance below)

Note: there are some clinical conditions which put people at even higher risk of severe illness from COVID-19. If you are in this category, you will have received (or are about to receive) a letter from the Chief Medical Officer/Welsh Government about additional measures you should take to stay safe.

People falling into this group are those who may be at particular risk due to complex health problems such as:

- people who have received an organ transplant and remain on ongoing immunosuppression medication
- people with cancer who are undergoing active chemotherapy or radiotherapy
- people with cancers of the blood or bone marrow such as leukemia who are at any stage of treatment
- people with severe chest conditions such as cystic fibrosis or severe asthma (requiring hospital admissions or courses of steroid tablets)
- people with severe diseases of body systems, such as severe kidney disease (dialysis)

Welsh Government guidance is strongly advising people with serious underlying health conditions, which put them at very high risk of serious illness from coronavirus (COVID-19), to follow “shielding” measures to keep them safe.

“Shielding” means protecting those people who are extremely vulnerable to the serious complications of coronavirus because they have a particular existing health condition. It involves staying at home for at least 12 weeks, and reducing contact with other people as far as possible to reduce the risk of being exposed to coronavirus.

Please refer to the 'Guidance on shielding and protecting people defined on medical grounds as extremely vulnerable from coronavirus (COVID-19)' as below (dated 24.03.20):

<https://gov.wales/guidance-on-shielding-and-protecting-people-defined-on-medical-grounds-as-extremely-vulnerable-from-coronavirus-covid-19-html>

You should also rigorously follow the social distancing advice in full, outlined below. Please follow Public Health England guidance on social distancing for everyone:

Social distancing measures are steps you can take to reduce the social interaction between people. This will help reduce the transmission of coronavirus (COVID-19).

They are:

1. Avoid contact with someone who is displaying symptoms of coronavirus (COVID-19). These symptoms include high temperature and/or new and continuous cough
2. Avoid non-essential use of public transport when possible
3. Work from home, where possible. Your employer should support you to do this.
4. Avoid large and small gatherings in public spaces, noting that pubs, restaurants, leisure centres and similar venues are currently shut as infections spread easily in closed spaces where people gather together.
5. Avoid gatherings with friends and family. Keep in touch using remote technology such as phone, internet, and social media
6. Use telephone or online services to contact your GP or other essential services

Everyone should be trying to follow these measures as much as is pragmatic.

For those who are over 70, have an underlying health condition or are pregnant, we strongly advise you to follow the above measures as much as you can, and to significantly limit your face-to-face interaction with friends and family if possible.

This advice is likely to be in place for some weeks.

Please ensure these discussions take place with your line manager.

Public Health England's advice is available here:

<https://phw.nhs.wales/topics/latest-information-on-novel-coronavirus-covid-19/guidance-on-social-distancing-for-everyone-in-the-uk-and-protecting-older-people-and-vulnerable-adults/>

Extremely Vulnerable Staff

It is only the people in the **EXTREMELY** vulnerable category that are starting to receive letters. If you are expecting a letter and have not received one by end of 6th April you should contact your own GP.

Vulnerable Staff

The advice if they are If you fall within the vulnerable category, (over 70, pregnant, etc.), you **WILL NOT** receive a letter and will need to discuss with your line manager about flexible working arrangements, as set out below.

Please speak to your line manager immediately, who will discuss and agree what can be accommodated, taking into consideration business continuity and requests from colleagues in a similar position.


Equally, a range of options can also be considered including:

- Temporary adjustment to your usual working pattern which may include part-time hours
- Deployment to another area
- Paid Special Leave (extra 7 days pro-rata given for childcare support during the COVID-19 period only)
- Working from Home
- Flexible working hours e.g. split shifts/condensed hours
- Using Annual Leave (including carried over leave from 2019/20)
- Time Off In Lieu (TOIL)
- Unpaid leave
- Purchase of additional annual leave

		<ul style="list-style-type: none"> • Annualized hours – work extended hours to pay back hours lost over an agreed period of time when the schools reopen • Compressed hours • Carers’ Leave Policy <p>If they you have exhausted all these options with your line manager, and it is still not possible, then we would have to support staff and consider medical suspension, which will need to be reviewed on a monthly basis.</p>
3.5	<p>Someone (child or adult) in my household is in the extremely vulnerable category and has received a letter from Welsh Government – do I also need to shield with them?</p>	<p>If you live with someone, you do not need to practice the ‘shielding’ measures but you do need to take extra steps to help protect the other person – it is very important you follow the current guidance about social distancing and reduce contact with other people outside the home to reduce the risk of being exposed to the virus. If you are caring for someone who is extremely vulnerable, you must follow the guidance on social distancing. Please also speak to your line manager, and discuss the flexible working options available as set out below.</p> <p>Equally, a range of options can also be considered including:</p> <ul style="list-style-type: none"> • Temporary adjustment to your usual working pattern which may include part-time hours; • Deployment to another area; • Paid Special Leave (extra 7 days pro-rata given for childcare support during the COVID-19 period only); • Working from Home; • Flexible working hours e.g. split shifts/condensed hours; • Using Annual Leave (including carried over leave from 2019/20); • Time Off In Lieu (TOIL); • Unpaid leave; • Purchase of additional annual leave; • Annualized hours – work extended hours to pay back hours lost over an agreed period of time when the schools reopen; • Compressed hours; and

		<ul style="list-style-type: none"> Carers' Leave Policy.
3.6	I live with or care for someone who is classed in the vulnerable category, what do I do?	<p>If you and they are clear of any symptoms then you should carry on working as normal.</p> <p>You will need to be aware of the advice to those in the vulnerable category, especially in relation to social distancing, and support those individuals with that distancing.</p>
3.7	Is there any additional advice for those of us in the BAME category?	<p>In response to the emerging evidence of the disproportionate effect that COVID-19 has on BAME communities and specifically our staff, Welsh Government has made a statement that all BAME staff should be offered risk assessment and issued a tool for this. All BAME staff are required to undertake this risk assessment in conjunction with their line manager as a matter of urgency. Click here</p> <p>This risk assessment should be filed on the individual personal file but if there are any health concerns as a result of this risk assessment, discussions should be held with Occupational Health.</p>
3.8	If I am shielding, but have had COVID-19, should I return to work?	<p>If you are in the extremely vulnerable group, namely those in receipt of letters advising them to shield for 12 weeks, you may now return to work in a non-patient facing role, subject to the outcome score of your NHS Wales COVID-19 Risk Assessment. The Health Board will be able to assist to deploy you into a suitable role, which may require you to work from home, should it be practically possible for you to do so.</p> <p>N.B Advice from 17 August 2020</p>
3.9	I am a recipient of the letter advising me to shield for 12 weeks. What is the guidance after this period?	<p>The Chief Medical Officer (CMO) has said that he will write to everyone in the shielding category again to reiterate the guidance as it applies to them. Everyone in this category will receive this letter by 15th June at the latest, and the guidance in the letter will apply to those in the shielding category until 16th August, which gives Welsh Government a further two months to monitor COVID-19 in the community and transmission rates etc.</p> <p>Those affected by this extension will need to provide their manager with a copy of the letter confirming their shielding extension.</p>

	<p>N.B Shielding stopped in Wales on the 16 August 2020</p>	<p>If, for whatever reason, you do not receive a letter and your line manager is requesting evidence of the need to shield the advice is to contact your GP.</p>
<p>3.10</p>	<p>What does the Chief Medical Officer’s announcement regarding the shielding mean to my return to work?</p>	<p>The Chief Medical Officer has announced that people in Wales who are shielding will no longer need to do so after 16 August (https://gov.wales/shielding-wales-pause-16-august).</p> <p>The Health Board wishes to thank everyone who has supported those who have been shielding or shielding a household member. We acknowledge that there may be some anxiety and concern for those returning to work at the end of the shielding period.</p> <p>The Workforce and OD function is currently developing, in partnership with Trade Union colleagues, guidance for managers to assist them to appropriately manage the return and transition of employees back to the workplace.</p> <p>Managers will begin return to work discussions and undertake a NHS Wales Covid-19 Risk Assessment with their shielding staff, in advance of the 16 August, to ensure any identified actions/arrangements can be put in place for those returning to the work place. The manager and returning employee will discuss, agree, and sign off a supportive and documented return to work plan. The Health Board will ensure that measures are in place to support returning employees to minimize their anxieties and concern. For example, enforcing social distancing requirements, reducing people interactions and providing hand sanitizing/hand washing facilities.</p> <p>The manager and the employee will regularly review the risk assessment and work place over the forthcoming months, to ensure that any changes in circumstances or government guidance are considered and addressed. Managers and returning employees can access Occupational Health support at any time should they have any additional health concerns that may impact on the employee’s ability to undertake their role or work in their workplace.</p> <p>Guidance and support information for those returning from shielding is available here:</p>

		 <p>200730 CTM Wales Shielding Employee:</p> <p>For those who have been following the CMO’s guidance to shield, a fit note is not required for their return to work.</p>
18.8	<p>A family member is “shielding” as advised by their specialist. I am concerned that I may have been exposed to COVID-19 in my role and pass it on to my family member.</p>	<p>You should contact HR for further guidance.</p> <ul style="list-style-type: none"> • The following measures should be followed if you have a vulnerable person living with you. Minimise as much as possible the time any vulnerable family members spend in shared spaces such as kitchens, bathrooms and sitting areas, and keep shared spaces well ventilated. • Aim to keep 2 metres (3 steps) away from vulnerable people you live with and encourage them to sleep in a different bed where possible. If they can, they should use a separate bathroom from the rest of the household. Make sure they use separate towels from the other people in your house, both for drying themselves after bathing or showering and for hand-hygiene purposes. • If you do share a toilet and bathroom with a vulnerable person, it is important that you clean them every time you use them (for example, wiping surfaces you have come into contact with). Another tip is to consider drawing up a rota for bathing, with the vulnerable person using the facilities first. • If you share a kitchen with a vulnerable person, avoid using it while they are present. If they can, they should take their meals back to their room to eat. If you have one, use a dishwasher to clean and dry the family’s used crockery and cutlery. If this is not possible, wash them using your usual washing up liquid and warm water and dry them thoroughly. If the vulnerable person is using their own utensils, remember to use a separate tea towel for drying these. <p>We understand that it will be difficult for some people to separate themselves from others at home. You should do your very best to follow this guidance and everyone in your</p>

		<p>household should regularly wash their hands, avoid touching their face, and clean frequently touched surfaces. For further information please see:</p> <p>https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection</p>
18.9	<p>I am a healthcare worker and am the sole carer of someone who is extremely vulnerable and is “shielding” do I have to come to work?</p>	<p>You should contact HR for further advice as you are the sole carer it is likely that the Equality Act 2010 would apply, the law will protect you against direct discrimination or harassment because of your caring responsibilities. This is because you’re counted as being ‘associated’ with someone who is protected by the law because of their age or disability. For further information on:</p> <ul style="list-style-type: none"> • Home care provision • Guidance on Social Distancing assistance with foods and medicines • Advice for visitors <p>Please see the following guidance:</p> <p>https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19</p>

15. Travel

Ref	Question	Response
15.3	I was unable to return to the UK when planned because of travel disruption caused by the COVID-19 outbreak. Do I have to take annual leave?	<p>Where staff were stranded overseas at the end of their holiday because of the disruption of their planned return flight caused by the COVID-19 outbreak then the following will apply: Where staff affected are absent from work because of the flight disruption for a period of up to 5 working days they will be given 3 days paid special leave. Any remaining absence will be treated as annual leave / time in lieu (TIL) or they will be required to make the time up on their return.</p> <p>Where staff are absent for a period exceeding 5 working days then a proportional amount of special leave will be granted e.g. 10 working days absence would result in 6 days special leave with the remainder taken as annual leave /TIL or worked back as above.</p> <p>Any queries on this matter should be directed to the HR hub: ctm_cov19_hr@wales.nhs.uk 01443 443636</p> <p>Anyone affected by a Restricted Movement Order must contact their line manager as soon as a delay is known. Discussion must include identification of remote working possibilities, including alternative duties. If these are not feasible, then advice should be sought from HR.</p>
15.4	Staff can't get to work due to public transport being reduced/stopped. What do they do?	<p>Staff should speak to their line manager and consider the following possible options:</p> <ul style="list-style-type: none"> • amended working patterns to reflect the changes in public transport that is still • running but on a reduced service • alternative forms of transport e.g. walking, cycling

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| | | <ul style="list-style-type: none">• lift sharing with a colleague, where safe to do so• working in an alternative location that is easier to reach• deployment to another area of work requiring support and within transport range• home working |
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19. Resignations

Ref	Question	Response
19.1	<p>I have a member or members of staff due to leave to go to another role (outside the Health Board). Can I stop them from going?</p>	<p>You cannot stop someone leaving if they have given their contractual notice.</p> <p>However, you could consider asking them whether they would be prepared to consider extending their notice period, to help the service during this difficult time.</p>

11. Retirement, Retire and Return

Ref	Question	Response
11.1	<p>I have a scheduled retirement date but am willing to defer this to continue to support the service. What do I do?</p>	<p>Please contact your line manager and HR representative asap. We recommend you speak to the Pensions Department to check for any possible impact on your pension arrangements.</p> <p>If you are retiring imminently, and are interested in continuing to work for the Health Board, please contact the Bank Office to enroll on the bank.</p> <p>We are currently looking at those who have retired within the last 2 years who are not currently working on our 'bank'. These individuals are being contacted, with nurses and midwives being contacted first. Doctors are being contacted via Welsh Government.</p> <p>We are also awaiting confirmation from Professional Registration bodies in relation to registration requirements. If your professional registration is still valid, we will need confirmation of the registration details.</p> <p>Staff requesting to retire and return will be required to complete a NHS Wales COVID-19 Workforce Risk Assessment to ensure that they are not in the high risk category We need to be mindful of the information provided by the Government on vulnerable people.</p>
11.2	<p>I have restrictions on the hours I can work as I have retired and been re-engaged.</p>	<p>Yes. The government has brought in emergency legislation in response to the COVID-19 outbreak. The legislation temporarily suspends the 16-hour rule which currently prevents staff who return to work after retirement from the 1995 NHS Pension Scheme from</p>

Have the rules changed as a result of Covid-19?

working more than 16 hours per week in the first four weeks after retirement. A 24 hour break will still be required.

It will also suspend abatement for special class and mental health officer status holders in the 1995 Scheme (which usually means that earnings on return plus pension cannot exceed earnings pre-retirement). In addition the requirement for staff in the 2008 Section and 2015 NHS Pension Scheme to reduce their pensionable pay by 10% if they elect to 'draw down' a portion of their benefits and continue working has been removed. This will allow retired staff who have already returned to work to increase their commitments if required, without having their pension benefits suspended.

Individuals are advised to check with NHS Pensions if they have any specific queries in relation to their pension, especially those who are in receipt of Ill Health pension as abatement has NOT been abolished for these retirements and there are further restrictions that may apply that could be detrimental to benefits.

If you have any questions about NHS Pensions, please contact:

Telephone: 0300 330 1346
 Outside UK: +44 191 279 0571
 Monday to Friday, 8am to 6pm

Email: nhsbsa.pensionsmember@nhsbsa.nhs.uk