**Guidance on Returning to Work – updated 2 July 2020**

**Planning**

The University has agreed which buildings and activities will be opened in Phase 1 of the reopening plan from June with a rolling plan thereafter for reopening more buildings and activities in stages through July to September. Where staff are currently working from home successfully this should continue for the time being.

Planning is taking place on identifying a range of measures to support safe working on campus, taking into account the government’s guidance on workplaces and research laboratories. This will include measures on social distancing, cleaning, staggering working patterns if necessary, considering one way systems through buildings, floor markings, and ensuring the same groups of people are in at one time (reducing the number of people employees are in contact with) etc.

The [Framework for Campus Reopening](https://intranet.birmingham.ac.uk/staff/documents/staff/campus/uob-campus-reopening-framework.pdf) prioritises critical research, education and student support, income generating activity, and relevant professional services. As plans are developed employees who support these areas may be requested to return to work on campus.

The overarching premise is that buildings will be safe to work in, following the work described above, and that if requested employees will be able to return safely. However, there are groups of employees who are at higher risk of severe illness if they contract the coronavirus and further consideration is required for staff in these groups. There are two distinct groups to consider: clinically extremely vulnerable and clinically vulnerable. These are national definitions set by government and we will follow government advice in respect of these groups.

**Clinically extremely vulnerable employees**

Clinically extremely vulnerable people may include the following people:

1. Solid organ transplant recipients.
2. People with specific cancers:
   * people with cancer who are undergoing active chemotherapy
   * people with lung cancer who are undergoing radical radiotherapy
   * people with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment
   * people having immunotherapy or other continuing antibody treatments for cancer
   * people having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors
   * people who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs
3. People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe chronic obstructive pulmonary disease (COPD).
4. People with rare diseases that significantly increase the risk of infections (such as severe combined immunodeficiency (SCID), homozygous sickle cell).
5. People on immunosuppression therapies sufficient to significantly increase risk of infection.
6. Women who are pregnant with significant heart disease, congenital or acquired.
7. Other people have also been classed as clinically extremely vulnerable, based on clinical judgement and an assessment of their needs. GPs and hospital clinicians have been provided with guidance to support these decisions.

The government’s advice is that this group should stay at home until 31 July 2020. There are some provisions for people who are currently shielding to go outside and meet others and also visit other households and stay overnight from 6 July 2020. From 1 August 2020 staff in this group can go to work (if they can’t work from home), as long as the business is “covid-safe” in line with government guidelines (which the University is following). These staff will need to be supported to stringently observe the guidelines on social distancing. The University reserves the right to request a copy of the letter.

The guidance to shield does not extend to people in the same household, although they should support the person shielding. If employees who are shielding are able to work from home they should continue to do so. Please see Appendix 1.

More information is available from the Government’s coronavirus website: <https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>

**Clinically vulnerable employees**

Clinically vulnerable people are those who are:

* aged 70 or older (regardless of medical conditions)
* under 70 with an underlying health condition listed below (that is, anyone instructed to get a flu jab each year on medical grounds):
* chronic (long-term) mild to moderate 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 neurone disease, multiple sclerosis (MS), or cerebral palsy
* diabetes
* a weakened immune system as the result of certain conditions, treatments like chemotherapy, or medicines such as steroid tablets
* being seriously overweight (a body mass index (BMI) of 40 or above)
* pregnant women

Clinically vulnerable employees are advised to stay at home as much as possible and, if they do go out, to take particular care to minimize contact with others outside their households.

People who are clinically vulnerable should continue working from home *where that is possible* and can be accommodated. If they cannot work from home, we can consider additional adjustments if they are required to support a return. Managers should discuss the return with staff and address any concerns returning staff may have, completing a Covid-19 Return to Campus Discussion form. Where staff have no concerns there is no need to complete the form. Please see Appendix 2 for the form. Occupational Health can assist with an assessment if managers require help. Adjustments may include, for example, agreeing to provide them with a single person office where this is possible, or agreeing to include them in a smaller than usual work group which will remain stable (thus limiting their contact with other people), or agreeing staggered start and end times so that they can travel safely. Please see Appendix 1.

More information is available from the Government’s coronavirus website in section 9 of the advice on staying alert and social distancing:

<https://www.gov.uk/government/publications/staying-alert-and-safe-social-distancing/staying-alert-and-safe-social-distancing> (til 4 July)

<https://www.gov.uk/government/publications/staying-alert-and-safe-social-distancing/staying-alert-and-safe-social-distancing-after-4-july> (after 4 July)

**Other groups who may be at risk**

We are very conscious that there is emerging evidence that other groups may be at greater risk of severe illness if they contract the coronavirus (such as older people, men and people from ethnic minorities), some of which may be linked to occupation. Public Health England was asked to investigate and report on this issue and their report was published on 2 June. We understand that recommendations will follow in due course. In the meantime managers should discuss the return to work with their staff, address any concerns by discussing any adjustments which may assist in alleviating any anxiety and risk, completing a Covid 19 – Return to Campus Discussion form. Occupational Health can assist with an assessment if managers require help. Please see Appendices 1 and 2.

**People who have multiple factors that could affect their response to covid-19**

There may be staff who are affected by more than one of the categories above or who have a variety of different conditions. These staff may need advice from Occupational Health and managers can arrange a referral as appropriate.

**Other staff concerns**

Any member of staff may have concerns about returning to work. This could be because they are concerned for their own health, or for the health of members of their household. The University campus, unlike other settings such as hospitals, is not an inherently risky environment. The University is following all government guidance and carrying out a rigorous risk assessment of each building to be opened. If staff have concerns they should discuss with their line manager in the first instance.

**Test and trace**

The government has introduced its test and trace strategy. This requires that anyone who has symptoms of coronavirus must self-isolate for 7 days (and their household members for 14 days) and get themselves tested for coronavirus. Contacts of people who test positive for coronavirus will be informed and will be required to self-isolate for 14 days (but only get tested if they develop symptoms themselves). You may therefore have employees who will need to self-isolate due to the new test and trace system.

More information is available from the government coronavirus website. <https://www.gov.uk/guidance/nhs-test-and-trace-how-it-works>

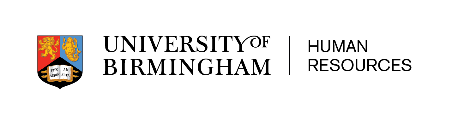
**FAQs**

Updated FAQs are available on the University’s coronavirus [intranet pages.](https://intranet.birmingham.ac.uk/staff/coronavirus/faqs-for-staff.aspx#Questionsrelatingtophasedcampusreopening)

Appendix 1

There will be people who have a combination of conditions which may move them into a different category and Occupational Health will be able to advise if this is the case.

|  |  |  |
| --- | --- | --- |
| **Description** | **Level of risk of severe illness as compared to the general population** | **Action Advised (note: additional actions may be identified as appropriate through discussion with managers or Occupational Health referral)** |
| Those under 70 with no underlying health condition. | Standard (green) | Social distancing and other measures as advised by government. |
| Those who are concerned about returning to work on campus or who live with household members who are vulnerable. | Standard (green) | Social distancing and other measures as advised by government. Discuss with manager as appropriate. |
| Those under 70 who have underlying health conditions but not those that are defined in government guidance (which would place them in the clinically vulnerable or clinically extremely vulnerable group). | Standard (green) | Social distancing and other measures as advised by government. |
| Those who are over 70, or who are under 70 and who have an underlying health condition, or are pregnant and therefore come into the category defined by the government as clinically vulnerable. | Increased (amber) | Work from home if possible.  If not, stringent social distancing and other measures as advised by government.  Consider adjustments such as staggered start and end times, single office use and smaller work bubbles.  Advise limited or no use of communal areas, such as shared kitchen facilities.  If member of staff is concerned, complete the Covid-19 Return to Campus Discussion form.  Referral to OH if more advice needed. |
| Those who may be in a group where there is emerging evidence of increased risk of severe disease if they contract coronavirus. | Increased (amber) | Work from home if possible.  If not, stringent social distancing and other measures as advised by government.  Consider adjustments such as staggered start and end times, single office use and smaller work bubbles.  If member of staff is concerned, complete Covid-19 Return to Campus Discussion form.  Advise limited or no use of communal areas, such as shared kitchen facilities.  Referral to OH if more advice needed.  Please note further recommendations may be issued by the government. |
| Those who have been identified by the government as clinically extremely vulnerable and have either received a letter to confirm this or other notification from their GP or clinician. | High (red) | Current advice is to stay at home (to **31 July 2020**  in first instance).  Continue to work from home if possible. |

 Appendix 2

covid-19 - Return to campus discussion form

# This form will be completed by a Line Manager/Supervisor to record the conversation held with a member of staff who has raised concerns about returning to work to assess their workplace exposure risk and agree, where appropriate, further workplace adjustments/ arrangements.

**EMPLOYEE DETAILS**

|  |  |
| --- | --- |
| Given name |  |
| Surname |  |
| Payroll number |  |

**ASSESSMENT COMPLETED BY MANAGER**

|  |  |
| --- | --- |
| Line Manager/Supervisor Name |  |
| Job title |  |
| Staff Member Name |  |
| School/Department |  |
| Role of staff member |  |

**ACTIONS TAKEN TO MINIMISE RISK IN SPECIFIC WORK AREA/BUILDING**

|  |
| --- |
| 1. |
| 2. |
| 3. |
| 4. |
| 5. |
| 6. |

**RISK FACTORS SPECIFIC TO THE ROLE, IF ANY**

|  |
| --- |
| 1. |
| 2. |
| 3. |
| 4. |
| 5. |

**ISSUES OR CONCERNS RAISED BY EMPLOYEE**

|  |
| --- |
|  |

**REVIEW and ADJUSTMENTS SUGGESTED FOR INDIVIDUAL STAFF MEMBER**

|  |
| --- |
|  |

**FURTHER ACTIONS REQUIRED? (eg further meeting once staff member has returned, or referral to Occupational Health if concerns remain)**

|  |
| --- |
|  |

**DATE OF REVIEW**

|  |  |
| --- | --- |
| Review Date |  |

**SIGNATURES**

|  |  |  |
| --- | --- | --- |
| Line Manager/Supervisor: | Staff Member: | Date: |