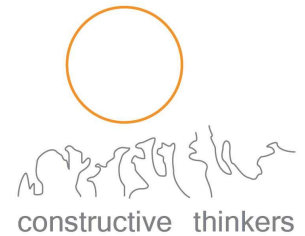




COVID19 Policy

General



Quest Interiors takes its responsibilities with regard to health and safety extremely seriously and has a duty of care to both employees and site operatives working on behalf of the organisation. In light of the situation surrounding COVID19, the company has issued the following policy to ensure that every possible precaution is taken whilst undertaking activities on behalf of the company.

1. Background and scope of guidance

This policy guidance assists Quest Interiors and its contractors in implementing control measures and providing advice to staff on:

- the coronavirus, COVID-19
- how to help prevent spread of all respiratory infections including COVID-19
- what to do if someone suspected or confirmed to have COVID-19 has been in a workplace setting
- what advice to give to individuals who have travelled to specific areas, as outlined by the Chief Medical Officer ([full list is available here](#))
- advice for the certification of absence from work resulting from Covid-19.

Quest Interiors is committed to supporting staff and contractors during the current outbreak of the virus and will do everything it can to prevent exposure.

2. Information about the virus

A coronavirus is a type of virus. As a group, coronaviruses are common across the world. COVID-19 is a new strain of coronavirus first identified in Wuhan City, China in January 2020.

The incubation period of COVID-19 is between 2 to 14 days. This means that if a person remains well 14 days after contact with someone with confirmed coronavirus, they have not been infected. Most people will no longer be likely to transmit the virus 7 days after the onset of symptoms.

3. Signs and symptoms of COVID-19

The following symptoms may develop in the 14 days after exposure to someone who has COVID-19 infection:

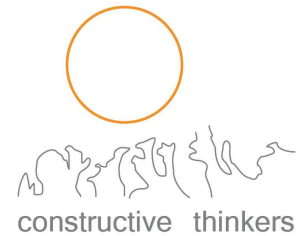
- new continuous cough (coughing repeatedly).
- difficulty in breathing.
- fever (high temperature) - hot to touch either on your chest or back.





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Generally, these infections can cause more severe symptoms in people with weakened immune systems, older people (70 or older), and those with long-term conditions.

It is uncertain how the virus affects expectant mothers; therefore, they are also classified as vulnerable.

4. How COVID-19 is spread

From what we know about other coronaviruses, spread of COVID-19 is most likely to happen when there is close contact (within 2 metres or less) with an infected person. It is likely that the risk increases the longer someone has close contact with an infected person.

Respiratory secretions containing the virus are produced when an infected person coughs or sneezes. These are most likely to be the main means of transmission.

There are 2 main routes by which people can spread COVID-19:

- infection can be spread to people who are nearby (within 2 metres) or possibly could be inhaled into the lungs.
- it is also possible that someone may become infected by touching a surface, object or the hand of an infected person that has been contaminated with respiratory secretions and then touching their own mouth, nose, or eyes (such as touching door knob or shaking hands then touching their own face).

There is currently little evidence that people who are without symptoms are infectious to others.

5. Preventing spread of infection

There is currently no vaccine to prevent COVID-19. The best way to prevent infection is to avoid being exposed to the virus.

Public Health England (PHE) recommends that the following general cold and flu precautions are taken to help prevent people from catching and spreading COVID-19:

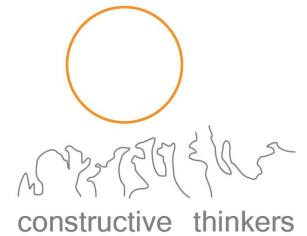
- cover your mouth and nose with a tissue or your sleeve (not your hands) when you cough or sneeze. See [Catch it, Bin it, Kill it](#)
- put used tissues in the bin straight away





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- wash your hands with soap and water often – use alcohol based hand sanitiser gel if soap and water are not available. See [hand washing guidance](#)
- try to avoid close contact with people who are unwell
- clean and disinfect frequently touched objects and surfaces
- do not touch your eyes, nose or mouth if your hands are not clean.

If you are worried about symptoms, please call NHS 111. Do not go directly to your GP or other healthcare environment.

Further information is available on the [PHE blog](#) and [NHS.UK](#).

People who have returned from high risk areas in the last 14 days should follow the COVID-19 self-isolation stay at home guidance.

With regards to travel information to other countries or for individuals working in the UK, we recommend following the Foreign and Commonwealth Office (FCO) country advice pages.

6. How long the virus can survive

How long any respiratory virus survives will depend on a number of factors, for example:

- what surface the virus is on
- whether it is exposed to sunlight
- differences in temperature and humidity
- exposure to cleaning products.

Under most circumstances, the amount of infectious virus on any contaminated surfaces is likely to have decreased significantly by 72 hours.

We know that similar viruses are transferred to and by people's hands. Therefore, regular hand hygiene and cleaning of frequently touched surfaces will help to reduce the risk of infection.

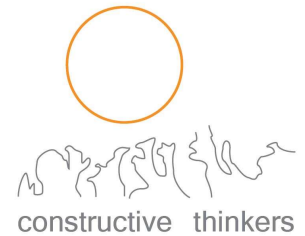
See [hand washing guidance](#).





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7. Guidance on facemasks

Employees are not recommended to wear facemasks (also known as surgical masks or respirators) to protect against the virus. Facemasks are only recommended to be worn by symptomatic individuals (advised by a healthcare worker) to reduce the risk of transmitting the infection to other people.

PHE recommends that the best way to reduce any risk of infection is good hygiene and avoiding direct or close contact (closer than 2 meters) with any potentially infected person.

Any member of staff who deals with members of the public from behind a full screen will be protected from airborne particles.

8. What to do if an employee becomes unwell

If an employee has symptoms of COVID-19, however mild they are to stay at home and not leave their house for 7 days. If the employee lives with other people, then those people should stay at home for at least 14 days. (Note if they show symptoms within this time period then they must remain in isolation for a 7 day period from the start of symptoms).

Symptoms include: A new continuous cough and/or high temperature

They do not need to call NHS111 to go into self-isolation. If their symptoms worsen during home isolation or are no better after 7 days then they need to contact NHS111 online at 111.nhs.uk. If they do not have internet access, then they should call NHS111 or in a medical emergency call 999.

If someone becomes unwell in the workplace, the unwell person in the first instance should be removed to an area which is at least 2 meters away from other people. If possible, find a room or area where they can be isolated behind a closed door, such as a staff office. If it is possible to open a window, do so for ventilation.

They should avoid touching people, surfaces and objects and be advised to cover their mouth and nose with a disposable tissue when they cough or sneeze and put the tissue in a bag or pocket then throw the tissue in the bin. If they don't have any tissues available, they should cough and sneeze into the crook of their elbow.

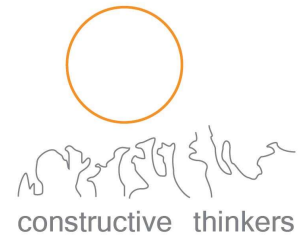
Arrangements should then be in place for them to travel home for self-isolation. If they need to go to the bathroom whilst waiting, they should use a separate bathroom if available.





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The employee must inform their manager/supervisor of the incident.

9. What to do if a member of staff or the public with suspected COVID-19 has recently been in your workplace

There is no need to close the workplace or send other staff home at this point. Most possible cases turn out to be negative. Anyone becoming unwell will follow the stay at home guidance,

10. What to do if a member of staff or the public with confirmed COVID-19 has recently been in your workplace

Closure of the workplace is not recommended.

A risk assessment of each setting will need to be undertaken to determine the likely risk to others.

Consider:

- any employee in close face-to-face or touching contact
- talking with or being coughed on for any length of time while the employee was symptomatic
- anyone who has cleaned up any bodily fluids
- any close friendship groups or workgroups
- any employee living in the same household as a confirmed case.

The work area should continue to be cleaned and good hygiene practices maintained.

Should any staff member become unwell then they are to follow the stay at home guidance.

Contacts are not considered cases and if they are well, they are very unlikely to have spread the infection to others:

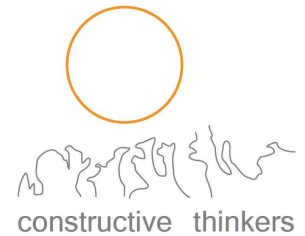
Staff who have not had close contact with the original confirmed case do not need to take any precautions and can continue to attend work.





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11. Certifying absence from work

By law, medical evidence is not required for the first 7 days of sickness. After 7 days, it is for the employer to determine what evidence they require, if any, from the employee. This does not need to be fit note (Med 3 form) issued by a GP or other doctor.

Your employee will be advised to isolate themselves and not to work in contact with other people by NHS 111 if they are a carrier of, or have been in contact with, an infectious or contagious disease, such as COVID-19.

We strongly suggest that employers use their discretion around the need for medical evidence for a period of absence where an employee is advised to self-isolate due to suspected COVID-19, in accordance with the public health advice being issued by the government.

12. Handling post, packages or food from affected areas

Employees should continue to follow existing risk assessments and safe systems of work. There is no perceived increase in risk for handling post or freight from affected areas.

13. Cleaning offices and public spaces where there are suspected or confirmed cases of COVID-19

Coronavirus symptoms are similar to a flu-like illness and include cough, fever, or shortness of breath. Once symptomatic, all surfaces that the person has come into contact with must be cleaned including:

- all surfaces and objects which are visibly contaminated with body fluids
- all potentially contaminated high-contact areas such as toilets, door handles, telephones and keyboards.

Public areas where a symptomatic individual has passed through and spent minimal time in (such as corridors) but which are not visibly contaminated with body fluids do not need to be specially cleaned and disinfected.

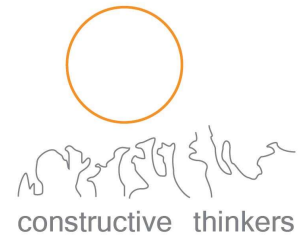
If a person becomes ill in a shared space, these should be cleaned using disposable cloths and household detergents, according to current recommended workplace legislation and practice.





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14. Rubbish disposal, including tissues

All waste that has been in contact with the individual, including used tissues, and masks if used, should be put in a plastic rubbish bag and tied when full. The plastic bag should then be placed in a second bin bag and tied for disposal.

15. Vulnerable groups and stay at home advice

The organisation shall identify employees who are and/or who live with vulnerable groups.

Where possible the organisation will encourage staff to work from home and/or avoid all non-essential travel. This would be considered on a case by case basis and based on risk assessment.

As part of the assessment we would consider:

- The method of travel
- Avoiding large groups of people/social activities
- The necessity of face to face meetings.

Should you have any questions regarding any of the above then speak with the Health and Safety Team/Senior Management.

Due to the nature of the outbreak, advice and guidance is updated on a regular basis.

Check GOV.UK [for the latest information from the UK government.](https://www.gov.uk)

Signed

A handwritten signature in blue ink, appearing to read 'James Winsor'.

James Winsor

Position: Director

Dated: 03.06.2020

