

LUDLOW TOWN COUNCIL A G E N D A

COUNCIL

To: All Members of the Council, Unitary Councillors; Press

Contact:- Gina Wilding

Ludlow Town Council, The Guildhall

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Despatch date: - 18^h March 2020

You are summoned to attend a meeting of Ludlow Town Council to be held at The Methodist Church, Broad Street, Ludlow on Monday 23rd March 2020 at 7.00pm

Gina Wilding

Gina Wilding
Town Clerk

Key Agenda Items:

- ***Covid-19 Risk Assessment and Business Continuity Planning***

The public may speak at this meeting

Public Open Session (15 minutes) – Members of the public are invited to make representations to the Council on any matters relating to the work of the Council or to raise any issues of concern.

1. Health and Safety

Councillors and members of the public are to note that the fire exits can be found to the rear of the building outside the Council Chamber and via the front door. The fire assembly point is on the pavement opposite the Guildhall. For fire safety purposes all Councillors should sign the attendance book and members of the public should sign the attendance sheet.

2. Recording of Meeting

Under the Openness of Local Government Regulations 2014, recording and broadcast including blogging, tweeting and other social media is permitted during public session of Council meetings.

The act of recording and broadcasting must not interfere with the meeting.

The Council understands that some members of the public may not wish to be recorded and asks that they make this known immediately.

3. Apologies

To receive apologies from councillors not present.

4. Declarations of Interests

To receive declarations of interests from councillors.

- a) Disclosable Pecuniary Interest
- b) Declaration of conflicts of Interest
- c) Declarations of personal interest

Members are reminded that they must not participate in the discussion or voting on any matter in which they have a Disclosable Pecuniary Interest and should leave the room prior to the commencement of the debate.

5. Public Open Session (15 minutes)

Members of the public are invited to make representations to the Council on any matters relating to the work of the Council.

6. Ludlow's Unitary Councillors Question and Answer Session

Ludlow's Unitary Councillors are invited to address the Council.

ITEM	Attachment
<p>7. SCHEME OF DELEGATION To approve delegated authority to the Town Clerk to make essential operational and policy decisions during any period of restricted activity declared by the Government in respect of the Covid-19 virus. That the delegation will enable the Council to fulfil its responsibilities to its residents, and that delegated decisions may be made in consultation with the Mayor and Committee Chairs as appropriate.</p>	No papers

8.	LOCAL SERVICES	8
	To consider the risk assessments, new ways of working, and approve proposals for service provision priorities	
9	COMMUNITY	
a)	To note the briefing from Dr Catherine Beanland	9a
b)	To adopt the undertakings:	
	i) We, as a community in the Ludlow area, agree to work together to support: each other, essential services, businesses and vulnerable groups during the Covid 19 emergency.	9b
	ii) In view of the nature of the Covid 19 emergency, the Community Health Trust be asked by Ludlow Town Council to now-open the two wards in Ludlow Hospital which have piped oxygen.	
c)	To approve printing of information and contact slips to assist people in self-isolation	9c

M e m b e r s h i p

Councillors Adams; Gill (Town Mayor); Pote (Deputy Mayor); Clarke; Cobby; Garner; Ginger; Jones; Lyle; Naysmith; Parry; O'Neill, Perks; Sheward; and Smithers.

The next Council meeting will be the [Annual Meeting](#) held on the **8th May 2020**

ITEM 8

LOCAL SERVICES



Business Continuity Planning and Risk Assessments in Response to Covid-19

1. BACKGROUND

- 1.1 There is comprehensive Coronavirus background information available in the briefing paper by Dr Catherine Beanland at item 9a.

2. RECOMMENDATIONS

- (i) To approve the implementation of Home Working by the Town Clerk as appropriate.
- (ii) To approve the Local Service priorities
- (iii) To approve the process for payments at 5.4
- (iv) To approve support for Ludlow's market during an exceptionally poor trading period by not increasing the rent in April, and maintaining the low season rent, reviewable on a month by month basis.

3. REASONABLE ACTIONS ARE GUIDED BY KNOWN INFORMATION:

The following information has been used to underpin the risk assessments.

- 3.1. This is respiratory virus spread in aerosols/droplets via person to person direct contact and indirect contact with infected surfaces/hands.
- LTC should follow NHS England hand sanitisation and reducing aerosol transmission advice, and adopt procedures for surface decontamination of "multi-use touch points" such as door handles, keypads etc.
- 3.2. This is a novel virus hence unlike influenza, there is no natural immunity/vaccine. Therefore it is likely a high proportion of people will become infected (current estimates are 80% of the UK population) and according to the Governments action plan up to 20% of the Council's staff/Councillors may be infected during the peak of the outbreak. Business continuity planning is therefore key to maintaining Council services and corporate decision-making capabilities.
- 3.3. The population segments at most risk of severe disease/death are those over 70 or with underlying medical conditions including diabetes, cancer,

cardiovascular and renal issues and respiratory issues. This has implications when assessing the risk to the public, councillors and staff in Ludlow as there is a higher than average proportion of residents over the age of 70, and a significant proportion of Councillors. A small number of staff have pre-existing conditions.

- 3.4 The Government have now announced that the country is in the delay phase, meaning the virus is no longer contained or restricted and spreading within the community.
- 3.5 The key risk of exposure is therefore from asymptomatic staff, Councillors or members of the public having contracted the virus and subsequently attending Council activities and thereby transmitting the virus to others.
- 3.6 The government is issuing a daily bulletin at 2pm giving the number of confirmed cases. There is a 24 hour delay before details of the locations of the confirmed cases are released by Public Health England. These bulletins will be monitored for information.
- 3.7 Although the Dept of Health and Social Care, Public Health England and the NHS are leading on the UK response to the outbreak, the Town Council nevertheless has a duty of care to staff. Councillors and members of the public should conduct its own risk assessments at local level specific for its activities and take steps accordingly.
- 3.8 On 16th March 2020, Prime Minister Boris Johnson has said everyone in the UK should now avoid "non-essential" travel and contact with others and to fight coronavirus.

He said people should work from home and avoid pubs, club, theatres where possible, as part of a range of stringent new measures.

Anyone in the same house as someone who has a cough or fever will also have to isolate for 14 days, he said.

All elderly and vulnerable people must also begin self-isolating within days.

In the first of a series of daily briefings on the virus, which causes the Covid-19 disease, Mr Johnson said "drastic action" was needed as the UK approaches "the fast growth part of the upward curve" in the number of cases.

4.0 RESPONSIBILITIES TO PEOPLE AT RISK

- 4.1 The Town Council's responsibility to the public is:
 - To provide information from official and trusted sources.
 - To have measures in place to reasonably ensure the safety of members of the public, visitors, service users and contractors using council land, buildings and facilities.

4.2 The Town Council's responsibility as an employer is:

- To look after the wellbeing of employees during their contracted hours

Specifically this includes staff identified as in vulnerable risk groups and reasonable modifications required which might include working from home – if this is possible.

Members of staff care for close family members vulnerable dependents – and where possible reasonable arrangements including home working should be made with staff.

4.3. **Staff**

Indoor Management of Risk for LTC staff:

- Staff use facilities including open plan offices, or shared offices and break rooms.
- Toilets have push button taps, soap dispensers and hot air dryers (risk of aerosols).
- Risk of infection from each other

ACTION:

- Hand washing posters have been distributed to all buildings.
- Tissues, soap, and surface wipes have been made available, and /or staff have been advised to keep an adequate stock of these products / and advise of shortages.
- Toilets – paper hand towels are available.
- Staff have been advised to use only one cup and take personal responsibility for cleaning and storing it.
- Staff at high risk from coronavirus have been identified – further information attached to this report.
- The council's insurers are being asked for advice on managing risk to staff, advice on what the town council may or may not be able to claim for.
- If they become ill, staff will be advised to contact 111 and follow the advice given, and notify the town clerk of the advice received.

4.4 **Home working**

Home working will reduce the risk and, where it is suitable, staff have been given the facilities to home work, and all staff have the means to keep in touch with each other.

A home working allowance of £6 per week from April may be payable to staff and pro-rated as appropriate.

Not all roles are suitable for home working, and the risks and risk mitigation will be considered in the section on service priorities.

4.5 Staff illness and self-isolating of staff with underlying health conditions will reduce the workforce and create unpredictable fluctuations in capacity.

4.6 **Outdoor Staff**

The risks to staff are reduced when working outside, but they still exist will have to be managed against the risks to the public if paly area checks are not undertaken and outside areas not maintained.

4.7 **Councillors**

Only seven of the fifteen serving councillors are under 70 years of age. So there is a high proportion of councillors in the high risk category.

4.8 **The Public**

The public as stated previously Ludlow Town Council has a duty of care to the public, and the wider community. In some instances this will be best served by temporarily closing facilities. However, open air facilities cannot be closed in the same way as buildings and will remain accessible and will therefore need to be managed.

Unused buildings and facilities will also need to be inspected from time to time to ensure that they remain safe.

5. **BUSINESS CONTINUITY PLANNING**

There are three aspects to business continuity planning:

1. Council / Councillors

Sufficient Councillors to ensure the lawful decision-making processes for statutory matters, and policies and personnel matters, or short term delegation of decision making.

2. Financial Procedures

Approval of payments, procurement in accordance with the financial regulations.

3. Council Local Services

To have sufficient staff to maintain the Council's local services – this is particularly important in respect of the Council's obligations, which are:

- keeping the Cemetery operational as a Burial Authority
- payment of invoices
- grounds maintenance of public sites to ensure safety
- weekly playground inspections.
- the open air market

5.2 Ludlow market is an essentially asset to continued prosperity of Ludlow. Below are some considerations and recommendations from the National Association of British Market Authorities.

MARKET CONTINGENCY PLANNING - CORONAVIRUS

NABMA provided general advice yesterday, and also practical guidance from John Walker, NABMA Consultant. Today more detailed guidance has been produced by Chris New, the NABMA Member Services Consultant.

At the outset, with decisions on the future of markets to be taken at Cabinet or Leader tier then the concern is that politicians may quickly countenance closure of all discretionary services, that include markets. It is important that decision makers therefore understand the commercial and social realities and benefits of markets and reflect upon them in their decision making.

NABMA GUIDANCE

The coronavirus pandemic means that some markets are already encountering loss of public footfall and lack of trader sustainability as the Government's measures to counter the virus come into play.

With older people being told to stay indoors, with some people self-isolating, with guidance on not participating in events where there are large numbers of people, etc. what contingency planning-can market management put into place NOW so that your traders and your markets can survive the breakdown in trading activity? Government advice and instructions are changing as things become more serious, but as of now:

NABMA advises your urgent serious consideration:

- Involve your Members of Parliament NOW to lobby for financial support for market traders to sustain local markets and the community benefits they provide (see the NABMA draft letter). Push this serious initiative up to your Director/Chief Officer/Chief Executive to action.
- Councillors and top management may be considering whether to close council facilities as part of their contingency planning to counteract the virus – but the markets need special consideration rather than being part of a general edict to close all discretionary services. Push this vital concern up to your Director/Chief Officer/Chief Executive and Councillors.
- Ensure that your Council does not take action to close your markets unless absolutely necessary, as it will be very hard to restart from scratch. NABMA maintains that markets are as safe as – if not safer – than many other retail outlets, due to their fresher air atmosphere and the importance that individual self-employed traders give to their customers.

- With good operational management of markets there is every reason to continue their operation to serve the public. Inform the public by posting notices as to what measures you are taking. Having cleaning staff showing continuous presence by wiping down surfaces, sanitizing door handles, etc. is a demonstration that gives customer confidence in the market. Posting staff on market hall entrances to keep public numbers to Government limits may be necessary.
- People need to access their local markets not just for general goods but particularly for fresh fruit and vegetables, meat and fish and allied foodstuffs. Food sales are a mainstay of markets and their continuance will create sustainability for market traders and be the basis of your market recovery planning for when the crisis is over. Lost traders may never recover their business, which puts the future of some markets at risk. Make sure your top management and councillors understand that markets are commercial entities, not simply council service operations.
- Waiving or reducing stall charges/retaining fees/parking charges for market traders to enable them to survive the loss of trade. Other Councils are implementing this already. The immediate shortfall in market service income may well be better than having no market at all.
- How will you cope to keep your markets operating if members of your staff have to self-isolate? Can you put in place alternative staffing arrangements via other council departments? Be prepared, be sharp and be flexible rather than being suddenly faced with immediate staff vacancies and no immediate chance of replacement staff to keep your market open.
- Boost your publicity to tell the community that your markets are remaining open to support the public, who may think they should only go to supermarkets for their food, etc during the crisis period. Press releases to local newspapers, local radio and regional TV will be vital to keep people market minded.
- Advertisements in traditional press, raising your social media profile – and getting your market traders to boost their social media output will inform the public that your market is open for business.
- Work with your traders to give them confidence in their own future and in the future of the market. With older people being significant customers to market cafes yet having to stay at home, can your cafes keep viable with greater distancing between seating arrangements? Can traders offer a home delivery option via social media platforms? Can management provide a facility to support food order collections? Are your trader communication systems up to date so that you can quickly keep them informed of matters arising?
- Keep your traders informed as to what Government support schemes are available to them. Be familiar with Government actions. The NABMA homepage gives that information. At the moment www.gov.uk has guidance, amongst other relevant advice, on “Covid-19, support for businesses” that may provide financial assistance packages and other measures. Liaise with your own council (which will have central funding to allocate) as to how your traders may be able to access funds

and knowledge to keep their businesses alive. Your support and information to your own traders may be instrumental in keeping them viable.

- Management will need to liaise closely with their suppliers and partners who sustain the operation of their market. Refuse collectors, sweepers from other departments, third party stall erectors, etc may have their own staffing problems during self-isolation periods. Keeping regularly in touch with operational partners may save you from emergency shortfalls in service and give you time to react.
- 150 NABMA members are already signed up to NABMA BASECAMP where you can see how - and quickly interact with - other market managers to see how they are coping with their issues and problems and to raise questions yourself and ask for advice. It's easy for you to join BASECAMP by going to the NABMA website homepage and registering. Learning how others are dealing with the crisis is a valuable tool and part of your NABMA membership benefits.
- Those not able to be signed up to BASECAMP for any reason can email NABMA directly (info@nabma.com) to gain advice and/or to put an issue to all members via a NETWORK NABMA "email out". You can also use our "Buddy" system by going to the NABMA website for the list of NABMA Colleagues who are happy to be telephoned to discuss any operational concerns. And you can ring Chris New, NABMA's Member Services Consultant on 0789 0843 112.

Please keep NABMA informed how you are dealing with the crisis. Your good ideas can be circulated to colleagues. We learn from each other through the NABMA NETWORK.

Calculations from market manager:

			Revenue per trading day		
	Current rates		rates from 1-4- 20		Increase
	£		£		£
Monday	265.74		363.10		97.36
Wednesday	316.21		410.30		94.09
Friday	671.56		881.10		209.54
Saturday	852.84		1102.50		249.66
Total	2106.35		2757.00		650.65
per week					

Comments

Information considers traders who will self - isolate due to age & personal circumstances.

Traders should eventually be permitted to retain their regular place on the market, with no penalty.
The integrity, and continuity of the market should be a prime consideration.

Full report in spreadsheet attached to this document

5.3 Below are the recommendations for priorities relating to keeping services active and temporarily closing services.

Service Area	Priority	Action	Risk
Payment of Invoices	High Priority Legal Duty	To be continue with New Procedure	Low Entirely digital system with full remote working for staff and councillors that retains audit trail accountability. Detailed process are supplied at 5.4.
Burials	High Priority Burial authority Statutory responsibility	Continue to provide service as capacity permits	Medium Generation of the paperwork, communication and payments can be undertaken digitally without need for face to face contact. Printed paperwork for staff can be collected and returned to a document tray. Face to face contact is limited to the grave digger, and distance can be maintained during this process; and distance can be maintained during the checking of the name plate.
Market	High Priority – source of food shopping	Keep trading for as long as permitted by government with modified	High Mitigation: <ul style="list-style-type: none"> • Payment in cash – use of PPE gloves and wipes

		practices to ensure safety of staff / traders / customers	<ul style="list-style-type: none"> In person contact – social distancing to mitigate risk
Street Trading	Medium-High priority – could be a source of food shopping	Keep trading for as long as permitted by government with modified practices to ensure safety of staff / traders / customers	<p>Low risk to staff</p> <ul style="list-style-type: none"> Payment taken over phone Applications and permits issued digitally <p>Medium to traders / customers</p> <ul style="list-style-type: none"> Payment in cash – use of PPE gloves and wipes In person contact – social distancing to mitigate risk
Reception / Information Services	High Priority /	provide service via home working	<p>Low</p> <ul style="list-style-type: none"> Moving to over the phone home working will reduce the risks
Public Toilets	Medium Priority – less visitors mean less need	Close until advised of reduced virus risk by government	High
Museum	Low Priority – relies on visitors, and they are not coming during the pandemic	Close until advised of reduced virus risk by government	<p>High</p> <ul style="list-style-type: none"> Small enclosed space
Grounds maintenance	Medium priority	Continue with a reduced programme – need to keep areas safe	Low
Play Area Checks		Continue with a reduced programme – need to keep areas safe	
Council and Committee Meetings	High Priority	Call statutory meetings	High

		<p>only, and operate a scheme of delegation</p> <p>Consider the following if legislation is changed: The NALC Legal Team are investigating whether an alternative to holding face to face meetings (e.g. video conferencing with live streaming of the public) can be utilised by Local Councils during a period of risk to public safety, or whether total suspension of the council decision making process is the only option. This information will be shared as soon as it is known.</p>	<ul style="list-style-type: none"> Public meetings are a high risk environment
<p>Civic Events</p>	<p>Low priority</p>	<p>Cancel - Mayor Making is not required in the process of electing a mayor, which</p>	<p>High</p> <ul style="list-style-type: none"> Public meetings are a high risk environment

		takes place at the Annual Meeting	
Large scale Outdoor Events	Medium Priority	Under advice	Open air event that attracts large gatherings of people. The emergency services are not supporting large events.

5.4 Detailed process for payments as referred to in matrix:

Service Area	Staff	Councillors	Roles, Proposed Processes & Risks:
Payment of Invoices	Gina Wilding Lucy Jones	Cllrs Gill, Cobley, Ginger, Lyle Perks & Parry	<p>New process would enable remote working</p> <p>Lucy Jones Role: preparation and entering of invoices on to RBS and Barclays.net Process: Set up for remote home working.</p> <ul style="list-style-type: none"> • Invoices supplied by email. • Payment list generated as normal on RBS. Invoices for sign off need to be digital and contained to one set that are signed off by the Town Clerk and the two signatories. • Combine all digital invoices into one document using Fusion software - bookmarks can be added for each invoices/ set of invoices that relate to each payment, • A separate word document is created listing all the invoices in a matrix with a three part sign off (town clerk / cllr 1 / cllr 2) for each invoice. The word document would need to be pass methodically from the town clerk to first cllr and second cllr so that there was a record of approval/ queries for audit. • Communication between Lucy and Gina by email and possibly phone, although needs to be

			<p>confirmed because Lucy does not have a work mobile.</p> <ul style="list-style-type: none"> • Communication between Gina and councillors be phone (work mobile) and email. <p>Risks: will need to take the card reader and access cards for the bank account and Barclays.net off site. Risk of loss. Risk of unauthorised access. Capacity: Lucy is only member of staff proficient in entering invoices on both systems.</p> <p>Mitigation - not considered vulnerable to covid-19, and able to work from home so payments might be slightly delayed by illness, but not prevented.</p> <p>Mitigation: Processes are password protected. Cards and equipment transported in closable wallet.</p> <p>Gina Wilding –</p> <p>Role: first stage approval of invoices for payment</p> <p>Process: as above set up for remote home working.</p> <p>Risks: will need to take the card reader and access cards for the bank account and Barclays.net off site. Risk of loss. Risk of unauthorised access. Gina is the only member of staff able to authorise first stage sign-off.</p> <p>Mitigation - not considered vulnerable to covid-19, and able to work from home so payments might be slightly delayed by illness, but not prevented.</p> <p>Mitigation: Processes are password protected. Cards and equipment transported in closable wallet.</p> <p>Cllrs Gill, Cobley, Ginger, Lyle Perks & Parry</p> <p>Role: second stage approval of invoices for payment</p> <p>Process: as above able to access Barclays.net website remote from the Guildhall.</p> <p>Risks: will need to take the card reader and access cards for the bank account and Barclays.net off site. Risk of loss. Risk of unauthorised access.</p>
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			<p>Mitigation: Processes are password protected. Cards and equipment transported in closable wallet. If needed town council laptop could be provided to ensure that sole council business use of equipment, but would require in person collection and return so might not be practicable.</p>
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5.4 Staff that are not required to undertake their usual role if facilities are closed, will be given other duties if possible, although some staff will have to self-isolate because they fall into a high risk category, or develop the illness.

5.5 Ludlow Museum at the Buttercross

Work to be done whilst the Museum is closed:

- Make firm plans for a new temporary exhibition which will be in place when the Museum re-opens based around the Weyman family of Ludlow. This will be of national interest in recognition of the author, and also of local interest in relation to the naming of Weyman Road.
- Shropshire Council have confirmed that we are able to allocate two cases to temporary exhibitions and this will allow us more space for different displays. The shutdown period will give us time to plan what can be put in this space and organise plinths to best display smaller items etc.
- We now hold keys for the exhibition cases, alongside Shropshire Council. This is a positive move and means that we can be in control of the temporary cases. Key access will be restricted and controlled by Guildhall office staff.
- Addition of the Mortimer tile in to the Mortimer exhibit case.
- Address the lighting issues of the Tudor coin display.
- Exploring the options for display of the town silver or maces at the Museum.
- Work alongside the Friends of the Museum and Shropshire Council to ensure the addition of the Iron Age coin hoard to the high security case, on a specially designed acrylic stand.
- Shropshire Museum service are launching a new website and we are working to ensure the Museum at the Buttercross gets good coverage.
- Whilst the Museum is closed we have work to complete towards the accreditation including ensuring that environmental monitoring procedures are in place and being followed; that we are reviewing the markers for improvement in our last accreditation report; that we are introducing and following a care and conservation plan.

Once the Museum is ready to reopen

- Following the recruitment of a replacement member of staff at Shropshire Council Collections Resource Centre and the recruitment of a Museum Assistant at the Museum we would like to offer our existing member of staff the opportunity to become further qualified in the Museum industry and develop a closer link with the Shropshire Councils resource centre.

The Friends of Ludlow Museum have suggested they may be able to fund the additional hours of this member of staff or assist us in applying for a grant.

Town Clerk

March 2020

LUDLOW MARKET DAILY RENT COLLECTION SHEET

Market day **MONDAY**

Paid stalls	22	Winter rates
Vans	2	
L/Pitch	1	
Buttercross	0	
S/ pitch	3	

Item	Amount collected £
Arrears	0.00
Rent	
Stalls	203.94
Vans	20.60
S / Pitch	27.81
L / Pitch	13.39
Adj	0.00
M/R sub total	265.74
Buttercross	0.00
Rent total	265.74
total	265.74

Market day **MONDAY**

Paid stalls	22	from 1/4/2020
Vans	2	
L/Pitch	1	
Buttercross	0	
S/ pitch	3	

Item	Amount collected £
Arrears	0.00
Rent	
Stalls	279.40
Vans	27.60
S / Pitch	38.10
L / Pitch	18.00
Adj	0.00
M/R sub total	363.10
Buttercross	0.00
Rent total	363.10
total	363.10

Market day **WEDNESDAY**

Paid stalls	20	Winter rates
Vans	2	
L/Pitch	1	
Buttercross	0	
S/ pitch	2	

Item	Amount collected £
Arrears	0.00
Rent	
Stalls	247.20
Vans	24.72
S / Pitch	24.72
L / Pitch	19.57
Adj	0.00
M/R sub total	316.21
Buttercross	0.00
Rent total	316.21
total	316.21

Market day **WEDNESDAY**

Paid stalls	20	from 1/4/2020
Vans	2	
L/Pitch	1	
Buttercross	0	
S/ pitch	2	

Item	Amount collected £
Arrears	0.00
Rent	
Stalls	318.00
Vans	34.00
S / Pitch	31.80
L / Pitch	26.50
Adj	0.00
M/R sub total	410.30
Buttercross	0.00
Rent total	410.30
total	410.30

Market day **FRIDAY**

Paid stalls	34	Winter rates
Vans	3	
L/Pitch	1	
Buttercross	1	
S/ pitch	4	

Item	Amount collected £
Arrears	0.00
Rent	
Stalls	525.30
Vans	49.44
S / Pitch	61.80
L / Pitch	21.63
Adj	0.00
M/R sub total	658.17
Buttercross	13.39
Rent total	671.56
total	671.56

Market day **FRIDAY**

Paid stalls	34	from 1/4/2020
Vans	3	
L/Pitch	1	
Buttercross	1	
S/ pitch	4	

Item	Amount collected £
Arrears	0.00
Rent	
Stalls	686.80
Vans	66.90
S / Pitch	80.80
L / Pitch	28.60
Adj	0.00
M/R sub total	863.10
Buttercross	18.00
Rent total	881.10
total	881.10

Market day **SATURDAY**

Paid stalls	42	Winter rates
Vans	2	
L/Pitch	2	
Buttercross	1	
S/ pitch	4	

Item	Amount collected £
Arrears	0.00
Rent	
Stalls	692.16
Vans	35.02
S / Pitch	65.92
L / Pitch	45.32
Adj	0.00
M/R sub total	838.42
Buttercross	14.42
Rent total	852.84
total	852.84

Market day **SATURDAY**

Paid stalls	42	from 1/4/2020
Vans	2	
L/Pitch	2	
Buttercross	1	
S/ pitch	4	

Item	Amount collected £
Arrears	0.00
Rent	
Stalls	890.40
Vans	46.60
S / Pitch	84.80
L / Pitch	61.60
Adj	0.00
M/R sub total	1063.40
Buttercross	19.10
Rent total	1102.50
total	1102.50

Revenue

Revenue per trading day							
	Current rates		rates from 1-4-20		Increase		
	£		£		£		
Monday	265.74		363.10		97.36		
Wednesday	316.21		410.30		94.09		
Friday	671.56		881.10		209.54		
Saturday	852.84		1102.50		249.66		
Total	2106.35		2757.00		650.65		
per week							
Comments	Information considers traders who will self - isolate due to age & personal circumstances.						
	Traders should eventually be permitted to retain their regular place on the market, with no penalty.						
	The integrity, and continuity of the market should be a prime consideration.						

ITEM 9

COMMUNITY

BRIEFING PAPER for Ludlow meeting Thursday 19th March Dr Catherine Beanland

Introduction

Statistics and Death Rates

How contagious is it?

Clinical criteria for Diagnosis

Possible future measures

Potential problems for Ludlow

Delivery and Volunteer/Unpaid Care

Cooperation

Social Services

Care Homes and Agencies

Increased capacity in Ludlow Hospital

Example of changes in Ludlow Portcullis

Advice on Self-isolation

Guidelines

Introduction:

There is an outbreak of novel (new type) Coronavirus (2019-nCoV) in Mainland China which has now spread to many areas.

People are considered to be most infectious while symptomatic (with symptoms), however there is limited evidence that asymptomatic and pre-symptomatic people (people who are well and have no symptoms) are also able to transmit the virus.

Novel Coronavirus (new type) (2019-nCoV) what we know so far:

Statistics and Death Rates

In the first big analysis of more than 44,000 cases from China, the death rate was the lowest for under 30 year olds at less than 1%.

However, the death rate for:

- 60-69 year olds rate was 3% rate,
- 70-79 year olds, 8% death rate and
- over 80+ year olds had a very worrying 15% death rate.

Deaths were five times more common among people with
diabetes,
high blood pressure or
heart or
breathing problems.

Also more slightly more likely in men

There may be a link of use of anti-inflammatories and the risk of complications according to French medics

About 26% develop severe symptoms that need ITU admission

As a GP in Shropshire I am concerned with these figures as many of my patients are elderly.

How Contagious is it?

A new study of nine people who contracted the virus in Germany suggests that people are mainly contagious before they have symptoms and in the first week of the disease.

“The infectivity is quite high.” In one case, Patient 1 sneezed during a meeting with one person, Wendtner says. “That was enough for infection.”

In other cases, “they had simple business meetings, sitting together for 60 minutes, 90 minutes [at a table or] in front of a computer, with no physical contact — just one handshake, that’s all,”

Plummeting numbers of infectious virus after antibody production turns on “means that after about 10 days or so, you’re not likely to be infecting other people,” Khan says.

Other studies also suggest that people with very mild or asymptomatic infections don’t shed as much virus and aren’t as likely to infect other people as people with more severe cases, he says.

The team never found evidence of the virus in blood or urine.

Researchers did detect viral RNA in feces, but no infectious virus there. That suggests that the virus isn’t spread through stool, an unknown until now.

Clinical criteria for diagnosis or suspicion:

The new study of nine people who contracted the virus in Germany

Fever and or

Acute respiratory infection (e.g. shortness of breath or cough) with or without fever.

Most had coughs, but only two developed a fever, the most common symptom reported in other studies.

Most symptoms were mild and one person never developed any at all.

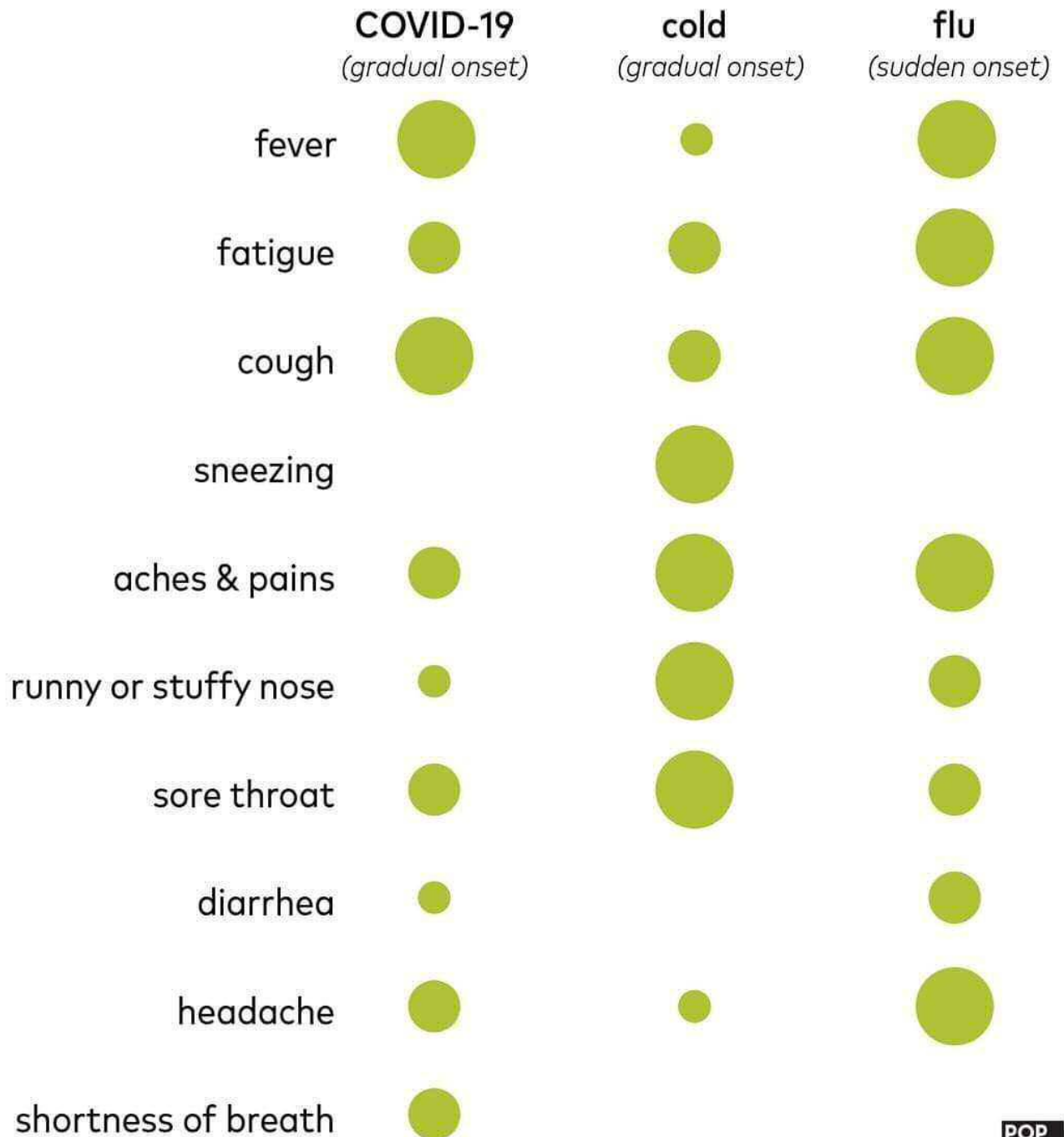
One patient developed severe pneumonia.

Two of the nine had runny noses, previously reported as a rare symptom of COVID-19.

Another four had stuffy noses and reported that they couldn’t smell or taste anything.

Is it coronavirus, or is it something else?

how common each symptom is → rare ● ●● common



Source: CDC, WHO

Possible future measures:

What do I think about schools being kept open?

It is likely that there will be NO vaccine ready for the winter (2020/2021) and the second wave of infection in October 2020 will be much worse in countries who have little or no immunity.

This is what happened in Spanish Flu the second wave the next winter was much worse than the 1st wave.

The closest analogy that I can find is Chicken pox.

A chickenpox party is a party that parents may hold to deliberately expose their children to the chickenpox or varicella-zoster virus. This is literally a sick party, and not sick as in "that's sick" or "that's cool." For a "pox party," parents will invite at least one child who is sick with the virus to mix with other children in an attempt to spread the virus and get all the children deliberately infected.

Being deliberately exposed to the chickenpox is like playing a really bad roulette game.

At best, you will have 5 to 10 days of fever, loss of appetite, headaches, feeling run down, and itchy, itchy rashes.

However, there are chances that you could get much worse problems such as pneumonia, encephalitis (inflammation of the brain), cerebellar ataxia (lack of muscle control or coordination), bleeding problems, sepsis, and bacterial infections of the skin, soft tissues, bone, and blood.

You can even die from the chickenpox.

The risk of such severe complications is quite low if you are a healthy child but goes up if you are an infant and/or an adult or have a weakened immune system.

Plus, if you are pregnant, the virus could cause birth defects.

Looking at the statistics having a chicken pox party seems crazy yet the usual comment from people is that it's better to have chicken pox as a child than as an adult because the chances of complications are much worse as an adult....

COVID-19 seems similar to Chicken pox

In fact looking at the side effects of chicken pox compared to COVID..

NO ONE has died from COVID under the age of 20 **NOT EVEN CHILDREN WITH REDUCED IMMUNITY.**

Also pregnant mothers and babies are not affected.

In my opinion...

The UK Government is taking a pragmatic, intelligent approach which may well be proved to be the right approach so long as there is no vaccine manufactured within this year for mass production.

If this is the case then they should be applauded for a bold decision which will ultimately save lives.

The idea therefore is to

INFECT YOUNG AND FIT PEOPLE ON PURPOSE...so that its over and done with and they can get on with their lives, go back to school and work and even take care of their elderly relatives.

If I could volunteer to get COVID 19 NOW I would....

However if you are over 60 or between 30-60 years old with medical conditions then you are at risk.

Future planned measures by the Government

People over 70 may be instructed by the government to stay in strict isolation at home or in care homes for four months, under a "wartime-style" mobilisation effort by the government likely to be enforced within the next 20 days.

Other possible measures already being planned include:

- the forced requisitioning of hotels and other buildings as temporary hospitals;

- the requisitioning of private hospitals as emergency hospitals;

- temporary closure of pubs, bars and restaurants - sometime after next weekend's ban on mass gatherings;

- emergency manufacture by several companies of respirators that would be necessary to keep alive those who become acutely ill;

- the closure of schools for perhaps a few weeks, but with skeleton staff kept on to provide childcare for key workers in the NHS and police. **THIS IS KEY AS CHILDREN ARE NOT AT RISK....**

Potential major problems for Ludlow

Delivery of Essential Items to self-isolators

1. Need for significantly increased capacity for increased Delivery of Essential items and care to people self-isolating or elderly/at risk for a potential long period of time.
2. Continuity plans are needed to underpin pandemic influenza response, in common with many other emergency response plans.
3. If you are a regular visitor or caregiver for an elderly person, you should have an emergency plan in place in case you are not able to visit. This plan should detail the medication the person is on, important contact numbers, and the names of people who might be able to step in if you are unwell or unable to visit.
4. That way, if the worst comes to the worst, you'll know that your elderly friend or relative is still accessing the medication and help they need.
5. An integrated approach to planning and response that effectively employs all of the health and social care services in a local area, using flexible working across all agencies and making best use of potentially scarce facilities and resources, including the skills of volunteers.
6. Need for Risk Assessment for Current Volunteers and list/numbers
7. Consideration of New Groups to ask for volunteers other than traditional ones such as churches
 - a. Staff and volunteers released from duties in day care centres and those who normally transport people to them may then be a valuable redeployment resource as they possess a range of transferable skills and will have been security checked.
 - b. Teachers and other health care workers if they are not working
 - c. Students and young people could be very helpful
 - d. Dentists, opticians may be underutilised and have transferable skills

Need for cooperation between services locally

8. All services need to be preparing for, or undertaking, a pre-agreed capacity expansion process and may need to consider the implementation of mutual aid arrangements or the reduction of non-urgent work.
9. **The decision to activate capacity expansion plans is likely to be made at a local level, as not all parts of the UK will be affected at the same time or to the same extent.**
10. In a pandemic of moderate service impact, suspension of non-urgent clinical care and non-clinical activities, with other measures such as telephone consultations may free up additional capacity.
11. Close working between primary care, social care, the voluntary sector and secondary services will support the majority of patients requiring home care. However, pressure on individual practices may be heavy and single-handed or smaller practices are likely to experience disproportionate difficulties caused by increasing demand and reduced staffing levels.

12. Pre-planned buddying arrangements between practices, pharmacists, funeral directors, shops and care homes may assist in maintaining continuity.

Social services

13. Social care services, including those providing care home placements, may come under strain, particularly at the height of the pandemic,
14. Some carers will have to undertake tasks they have never done before and which, under normal circumstances, they might be unwilling to carry out. They may need increased support including information or training on new tasks, items of equipment to help them manage, and help to check that 'fixed' equipment is correctly installed.
- 15. Need for Central Co-ordinating Point of Requests for Help a) by phone b) by email: in and out of office hours**
16. Communication channels – frequency of updates

Care Homes and Care Agencies

- 17. Care homes plans will need to include:**
- a. • **protocols concerning whether people with influenza should be admitted to hospital during the pandemic;**
 - b. • communication to staff, residents and visitors about infection control requirements;
 - c. • arrangements for minimising the risk of transmission and infection during the pandemic by isolation or cohort-grouping of infected clients;
 - d. • information on provision of face masks to care staff according to national guidance on their use, and
 - e. • procedures for managing additional deaths, including storage of bodies if necessary.
- 18. Care homes within the same local area should consider collaboration and mutual support, eg by forming 'clusters', to enable each to be aware of:**
- 19. Need for video links between care homes and agencies to avoid visits from doctors**

Increased Capacity In Ludlow Hospital

20. Identifying potential extra bed capacity in hospital
21. maximising the use of stockpiled equipment;
22. • broadening the training of staff who could support these beds to increase available staff numbers;
23. Stretton Ward has piped oxygen supply and The League had in the past supplied the hospital with sufficient beds (40) according to the League of friends.

Practices to move to TELEPHONE TRIAGE FIRST SERVICE with video consultations available.

Example of changes WE HAVE ALREADY IMPLEMENTED IN PORTCULLIS PRACTICE to booking appointments systems and use of Video Consultations should be rolled out in Portcullis this week.

IMPORTANT UPDATE - APPOINTMENT SYSTEM CHANGES DUE TO CORONAVIRUS (COVID-19) PANDEMIC-Portcullis Surgery

We have taken the decision to change our appointment system and how we make appointments. This is to ensure we continue to look after our patients in the safest possible way. We are following advice from NHS England, Public Health England and the Health Secretary.

From Monday 16th March we have now suspended and changed how we make appointments for future bookings to ensure we are prepared and you are protected.

You will now ALWAYS be called by a clinician BEFORE your appointment is booked at the surgery.

Please do not come to the surgery to make an appointment, INSTEAD call or email us as explained below:

WHAT IF I ALREADY HAVE AN APPOINTMENT?

If you already have an appointment booked with us - don't worry, the appointment has not been cancelled but you may receive a call to see if your problem can be dealt with over the phone. If you need to be seen following the phone call the clinician will arrange an appointment.

WHAT IF I AM FEELING ILL AND THINK I HAVE CORONAVIRUS COVID-19?

If you are worried you may have Coronavirus (COVID-19) then you should cancel your appointment with us by phone (do not come into the surgery) and call 111 for advice and help. There are now testing facilities for COVID-19 in Shropshire that can be accessed via 111. Staff at 111/Shropdoc have been specifically trained to manage COVID-19 and should be your first port of call.

Symptoms of Coronavirus commonly include fever, a persistent cough, shortness of breath, as well as other flu-like symptoms.

In accordance with the Prime Minister and Chief Medical Officer's speech on Wednesday, 12 March, anyone with a new persistent cough and/or high temperature is now advised to self-isolate for seven days.

IF YOU ARE FEELING ILL AND ALREADY HAVE AN APPOINTMENT:

If you already have an appointment booked with us - don't worry, the appointment has not been cancelled but you may receive a call to see if your problem can be

dealt with over the phone. If you need to be seen following the phone call the clinician will arrange an appointment. If you come to the surgery please do not be alarmed if the doctor or nurse seeing you is wearing a mask, gloves or taking other precautions.

IF YOU FEEL ILL AND NEED AN URGENT APPOINTMENT BUT DON'T YET HAVE ONE:

If you think your problem is urgent and you need to be seen, please call the surgery as you normally would. The practice is OPEN and you will be seen you as soon as possible.

WHAT IF I HAVE AN APPOINTMENT BUT WANT TO AVOID COMING TO THE SURGERY?

If you have a routine appointment and are feeling well, but wish to avoid coming into the surgery (which we recommend) please:

Cancel the appointment online

Call the surgery and ask them to book you a telephone appointment instead.

Email the surgery (portcullis.surgery@nhs.uk) with the subject heading "PLEASE EMAIL ME WITH ADVICE".

Please include your name, date of birth and the first line of your address. Then ask for your appointment to be cancelled, detailing your problem, so we can answer you either by return email or a telephone call. If you have a rash, for example, you can send us an email with a photo of the rash, including some information, and we can respond with advice.

HOW DO I MAKE A NEW APPOINTMENT OR GET HELP FROM THE SURGERY NOW?

If you think your problem is urgent and you need to be seen, please call the surgery as you normally would. The practice is OPEN and you will be seen as soon as possible.

For non-urgent medical matters we are still able to care for you. However, we need to do things slightly differently to protect you from Coronavirus. For all of the services listed below please email or call the surgery – WE ARE OPEN AND HERE TO HELP:

Telephone and face-to-face appointments

Email advice

Counselling or care-coordinator appointments

Appointments for blood tests, any other tests, dressings, wound care, smears, family planning, vaccinations or other routine procedures

Any medical and medication advice or queries.

ALL YOU NEED TO DO IS:

Call the surgery on 01584 872939, but emailing might be quicker and easier at busy times

Email the surgery (portcullis.surgery@nhs.net) with your request in the subject heading or, for example, include:

PLEASE BOOK ME AN APPOINTMENT FOR A BLOOD TEST OR TEST

PLEASE BOOK ME A FACE-TO-FACE APPOINTMENT

Please include your name, date of birth and the first line of your address

Please give some detail about why you need the test, appointment, dressing etc. as this will really help us direct you to the best available clinician. You will then be called back either by a receptionist or a clinician to book the appointment or discuss your appointment

Please attach photographs if helpful i.e. of rashes etc.

VIDEO CONSULTATIONS:

We will soon be sending details of how you can book a video consultation with a doctor or nurse.

If this is something you would like to do please email portcullis.surgery@nhs.net with the subject heading "PLEASE ADD ME TO EMAIL LIST FOR SETTING UP VIDEO CONSULTATIONS". Please include your name, date of birth and the first line of your address. We will be sending out detailed information about this very soon.

https://phw.nhs.wales/topics/latest-information-on-novel-coronavirus-covid-19/self-isolation-advice/?fbclid=IwAR2bFjQpqrGhrC25yeY9jic5iNq7hJnY_OZhE_clHqC-T4scB8tewjkDMiY

Advice about self-isolation-Wales PHE

While you are staying at home, make sure you do the following things:

Stay at home

You should remain in your home. Do not go to work, school, or public areas, and do not use public transport or taxis. You cannot go for a walk.

You will need to ask friends or relatives if you require help with buying groceries, other shopping or picking up medication. Alternatively, you can order medication by phone or online. You can also order your shopping online. Make sure you tell delivery drivers to leave items outside for collection if you order online. The delivery driver should not come into your home.

At home, try as best you can to separate yourself from the people you live with

You should aim to stay in a well-ventilated room with a window that can be opened. Try to keep the window open as much as possible to enable ventilation and air flow as this will help to keep clean air moving through your room.

Try to separate yourself from other people in your home and keep the door closed. If you cannot stay in a separate room aim to keep 2 metres (3 steps) away from the other people in your house. We understand that this can be particularly difficult for parents of small children, people with other caring responsibilities or those living in studio apartments, for example.

Further advice can be found below. Try to keep yourself separated from other people as much as possible, and make sure everyone regularly follows the steps in this document (washing your hands, not touching your face, cleaning surfaces etc.).

Use your own toothbrushes, eating and drinking utensils (including cups and glasses in the bathroom and bedroom), dishes, drinks, towels, washcloths or bedlinen.

If you have your own garden it is fine to use it as long as you keep two metres away from other members of your household. If possible they should use the outside area separately.

Use of shared spaces if you live with others

Minimise the time you spend in shared spaces such as kitchens, bathrooms and sitting areas as much as possible and keep shared spaces well ventilated.

Aim to keep 2 metres (3 steps) away from people you live with and sleep in a different bed where possible. If you can use a separate bathroom from the rest of the household. Make sure you use separate towels from other people in your house, both for drying yourself after bathing or showering and for hand hygiene purposes. Ask your family or the people you live with to remember to use their own towels.

If you do share toilet and bathroom, it is important that you clean them after you have used them every time (e.g. wiping surfaces you have come in contact with). Another tip is to consider drawing up a rota for bathing, with you using the facilities last, before thoroughly cleaning the bath, sink and toilet yourself.

If you share a kitchen with others, avoid using it whilst others are present. Take your meals back to your room to eat. If you have one, use a dishwasher to clean and dry your used crockery and cutlery. If this is not possible, wash them using your usual washing up liquid and warm water and dry them thoroughly, remembering to use a separate tea towel.

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 household should regularly wash their hands, avoid touching their face and clean frequently touched surfaces.

What if I am living alone with my children?

Keep following this advice to the best of your ability however we are aware that not all these measures will be possible.

What we have seen so far is that children with COVID-19 appear to be less severely affected. It is nevertheless important to do your best to follow this guidance.

If your child develops symptoms, they need to stay at home for 7 days from the onset of their symptoms.

What if I live with an older, vulnerable or pregnant person?

If you provide care to an elderly, vulnerable or pregnant person keep following this advice to the best of your ability.

However, we are aware that not all these measures will be possible.

What if I am breastfeeding while infected?

There is currently no clinical evidence to suggest that the virus can be transmitted through breast milk. Infection can be spread to the baby in the same way as to anyone in close contact with you. We believe that the benefits of breastfeeding outweigh any potential risks of transmission of the virus through breastmilk or by being in close contact, however this will be an individual decision and can be discussed with your midwife, health visitor or GP by telephone.

If you wish to breastfeed, you should take precautions to limit potential spread of COVID-19 to the baby:

- Wash your hands before touching the baby, breast pump or bottles;
- Avoid coughing or sneezing on the baby while feeding at the breast;
- If you use a breast pump, clean it as recommended by the manufacturer after each use;
- Consider asking someone who is well to feed your expressed breast milk to the baby

If you are feeding with formula or expressed milk, you should sterilise the equipment carefully before each use. You should not share bottles or a breast pump with someone else.

You can find more information at the [Royal College of Obstetricians and Gynaecologists website](#).

Cleaning and disposal of waste

When cleaning you should use your usual household products, like detergents and bleach as these will be very effective at getting rid of the virus on surfaces. Clean frequently touched surfaces.

Personal waste (e.g. used tissues) and disposable cleaning cloths can be stored securely within disposable rubbish bags. These bags should be placed into another bag, tied securely and kept separate from other waste within your own room. This should be put aside for at least 72 hours before being put in your usual external household waste bin.

Other household waste can be disposed of as normal.

Laundry

Do not shake dirty laundry; this minimises the possibility of dispersing virus through the air.

Wash items as appropriate in accordance with the manufacturer's instructions.. Dirty laundry that has been in contact with an ill person can be washed with other people's items.

If you do not have a washing machine you can then take your laundry to a launderette after your isolation period has ended.

If you do not have a washing machine wait a further 72 hours after your 7 day isolation period has ended when you can then take your laundry to a public laundromat.

What you can do to help yourself get better

Drink water to keep yourself hydrated; you should drink enough during the day so your urine (pee) is a pale clear colour. You can use over the counter medications, such as paracetamol, to help with some of your symptoms. Use these according to the instructions on the packet/label and do not exceed the recommended dose.

If you need to seek medical advice

Seek prompt medical attention if your illness is worsening. If it's not an emergency, contact [NHS Direct Wales](#) online. If you have no internet access, you should call NHS 111. If it is an emergency and you need to call an ambulance, dial 999 and inform the call handler or operator that you have coronavirus (COVID-19).

All routine medical and dental appointments should usually be cancelled whilst you are sick and staying at home. If you are concerned or have been asked to attend in person within the period you are home isolating, discuss this with your medical contact first (e.g. your GP, local hospital or outpatient service), using the number they have provided. If your concerns

are related to COVID-19 contact [NHS Direct Wales](#) online. If you have no internet access, you should call NHS 111.

Wash your hands often

Cleaning your hands frequently throughout the day by washing with soap and water for 20 seconds or using hand sanitiser will help protect you and the people you live with. This step is one of the most effective ways of reducing the risk of infection to you and to other people.

Cover your coughs and sneezes

Cover your mouth and nose with disposable tissues when you cough or sneeze.

If you have a carer they should take care to use disposable tissues to wipe away any mucus or phlegm after you have sneezed or coughed.

Dispose of tissues into a disposable rubbish bag and immediately wash your hands with soap and water or use a hand sanitiser.

Facemasks

We do not recommend the use of facemasks as an effective means of preventing the spread of infection. Facemasks play an important role in clinical settings, such as hospitals, but there's very little evidence of benefit from their use outside of these settings. However if you receive external care you may be asked to wear a mask to minimise the risk to your carer.

Do not have visitors in your home

Do not invite or allow social visitors, such as friends and family, to enter your home. If you want to speak to someone who is not a member of your household, use the phone or social media.

If you have pets in the household

At present, there is no evidence that companion animals/pets such as dogs and cats can be infected with coronavirus (COVID-19).

Looking after your wellbeing whilst staying at home

We know that staying at home for a prolonged period of time can be difficult, frustrating and lonely for some people and that you may feel low. It's important to remember to take care of your mind as well as your body and to get support if and when you need it. Stay in touch with family and friends over the phone or on social media. There are also sources of support and information that can help.

[Every Mind Matters](#)

Think about things you can do during your time at home. People who have successfully completed a period of staying at home have kept themselves busy with activities such as cooking, reading, online learning and watching films. If you feel well enough you can take part in light exercise within your home or garden.

Ending self-isolation

You should remain at home until 7 days after the onset of your symptoms. After 7 days, if you feel better and no longer have a high temperature, you can return to your normal routine. If you have not had any signs of improvement and have not already sought medical advice, you should contact [NHS Direct Wales](#) online. If you have no internet access, you should call NHS 111.

Cough may persist for several weeks in some people, despite the coronavirus infection having cleared. A persistent cough alone does not mean you must continue to self-isolate for more than 7 days.

Guidelines

GOVERNMENT GUIDELINES

A number of guidelines have recently come out that are fairly vague but worth reading.

<https://www.gov.uk/government/collections/coronavirus-covid-19-list-of-guidance?fbclid=IwAR2gM9vJuxqADUsxci4KgB1NrcsipE8PlvmXfDck2fs9kdb5xCnI7hFlxaM>

Guidance for non-clinical settings

1. COVID-19: stay at home guidance

o 12 March 2020

o Guidance

2. COVID-19: decontamination in non-healthcare settings

o 26 February 2020

o Guidance

3. COVID-19: guidance for staff in the transport sector

o 2 March 2020

o Guidance

4. COVID-19: guidance for educational settings

o 12 March 2020

o Guidance

5. COVID-19: guidance for employees, employers and businesses

o 10 March 2020

- Guidance
- 6. COVID-19: residential care, supported living and home care guidance

Guidance for health professionals

1. COVID-19: background information

- 14 March 2020

- Guidance
- 2. COVID-19: investigation and initial clinical management of possible cases

- 13 March 2020

- Guidance
- 3. COVID-19: infection prevention and control

- 13 March 2020

- Guidance
- 4. COVID-19: guidance for primary care

- 25 February 2020

- Guidance
- 5. COVID-19: guidance for first responders

- 27 February 2020

- Guidance
- 6. COVID-19: guidance for Ambulance Trusts

- 13 March 2020

- Guidance
- 7. COVID-19: guidance for sampling and for diagnostic laboratories

- 12 March 2020

- Guidance
- 8. COVID-19: guidance for healthcare providers who have diagnosed a case within their facility

HELLO! If you are self-isolating, I can help.

My name is

.....

I live locally at

.....

My phone number is

.....

If you are self-isolating due to COVID-19 I can help with:

Picking up shopping

Posting mail

A friendly phone call

Urgent supplies

Just call or text me and I'll do my best to help you (for free!)

Coronavirus is contagious. Please take every precaution to ensure you are spreading only kindness. Avoid physical contact (2m distance). Wash your hands regularly. Items should be left on your doorstep.

#ViralKindness