

Opening doors for homeless people

Peter McVerry Trust

Frontline Staff Guidance for the Practical Management and Containment of COVID-19



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Purpose of PMVT Frontline Staff Guidance Document

Peter McVerry Trust is committed to ensuring that a comprehensive, concise document is readily available to staff, to allow staff to perform their duties in line with best practice. Peter McVerry Trust is committed to supporting staff to be competent and confident in delivery of such measures related to the management and containment of COVID-19.

The purpose of this guidance document is centred on delivering actions that will ensure that service delivery is maintained and the wellbeing of staff and participants is safeguarded during the unfolding COVID-19 situation.

The document provides clear guidance to frontline staff in order to ensure that all health and safety measures are upheld and adhered to in line with best practice, in line with the recommendations set out by the HSE and the Health Protection Surveillance Centre (HSPC).

These measures are designed to complement existing policies and procedures in place across PMVT services in relation to staff and participant safety, wellbeing and harm reduction.

The guidance should be read in conjunction with information already disseminated by PMVT to staff via direct email correspondence from the office of the CEO, email correspondence from the PMVT COVID-19 Task Force via <u>COVID-19Updates@pmvtrust.ie</u> and through the line management structure of PMVT.



What is COVID-19

COVID-19 is a new illness that can affect the lungs and airways. It is caused by a virus called coronavirus.

Symptoms of Coronavirus

It can take up to 14 days for symptoms of coronavirus to appear. The main symptoms to look out for are:

- <u>a cough</u>- this can be any kind of cough, not just dry
- shortness of breath
- breathing difficulties
- <u>fever (high temperature)</u>or chills

Other symptoms are fatigue, headaches, sore throat, aches and pains.

COVID-19 can also result in more severe illness including:

- Pneumonia
- Severe Acute Respiratory Syndrome
- Kidney Failure

Compare symptoms of coronavirus and flu

Symptoms	Coronavirus	Flu	Cold	
	Symptoms range from Abrupt onset of		Gradual onset of	
	mild to severe	symptoms	symptoms	
Fever or chills	Common	Common	Rare	
Cough	Common (usually dry)	Common (usually dry)	Mild	
Fatigue	Sometimes	Common	Sometimes	
Aches and pains	Sometimes	Common	Common	
Sore throat	Sometimes	Sometimes	Common	
Headaches	Sometimes	Common	Rare	
Shortness of breath	Sometimes	No	No	
Runny or Stuffy Nose	Rare	Sometimes	Common	
Diarrhoea	Rare	Sometimes in children	No	
Sneezing	No	No	Common	



Screening Questions

This screening process must be adhered to and implemented with all participants and staff whom have travelled/returned the countries listed below?

No.	Screening Questions	Countries Visited
Q 1.	Have you travelled from one of the affected countries in the past 14 days?	As of the 15 th of March 2020, affected countries are: China Italy Spain South Korea (Daegu, Cheongdo or Gyeongsan) Iran
Q 2.	Have you been in contact with someone with a confirmed case of COVID-19?	

Coronavirus COVID-19

If you have fever and/or cough you should stay at home regardless of your travel or contact history.

If you have returned from an area that is subject to travel restrictions due to COVID-19 you should restrict your movement for 14 days. Check the list of affected areas on www.dfa.le

All people are advised to:

- > Reduce social interactions
- > Keep a distance of 2m between you and other people
- > Do not shake hands or make close contact where possible

If you have symptoms visit $\textbf{hse.ie} \, \underline{\text{OR}}$ phone HSE Live $\textbf{1850} \, \textbf{24} \, \textbf{1850}$



Coronavirus COVID-19 Public Health Advice



Guiding Principles of PMVT COVID-19 Strategy

Maintaining service provision to PMVT participants

In line with its vision, mission and values Peter McVerry Trust is committed to ensuring the inclusion of its participant group in the life of Irish society and ensuring that the provision of services to this very vulnerable group is prioritised. Accordingly, the organisation will exercise all measures to ensure that there is continuity in service provision for its participant group throughout the period when COVID-19 presents a risk in Ireland.

Maintaining a calm, measured and professional response at all times

PMVT recognises that its response to COVID-19 needs to be calm, measured and professional at all times. Accordingly, the execution of its COVID-19 strategy will ensure that all appropriate steps are taken to respond to the current environment in a comprehensive manner while taking care to support staff and participants to treat the situation as serious.

• To this end, interventions will be professional and assertive and communication across the organisation will be clear and measured.

Ongoing Communication in relation to COVID-19 across the organisation

The situation in relation to COVID-19 is rapidly evolving and PMVT's strategy for the management and containment of COVID-19 will be kept under continued review by a PMVT COVID-19 Task Force that has been established in the organisation and is chaired by the CEO. The PMVT COVID-19 Task Force will oversee and direct organisational communication, internal and external, in respect of COVID-19. Initial meetings of the task force and team briefings from the CEO have been increasingly replaced by telephone calls, teleconferencing, videoconferencing, texts, emails etc. and email communication from the office of the CEO will be used to instruct and direct PMVT directors, heads of services, managers and team leaders as required. In addition to the above, the PMVT COVID-19 Task Force has created a dedicated email account (*PMVT COVID-19 Updates*) from which it is sending regular updates to staff.

- All staff are to take responsibility to read emails sent out by the CEO and the PMVT COVID-19 Task Force and implement guidance, training and procedures accordingly;
- All staff are to limit face-to-face contact to cases where it is essential and cannot be substituted with other means of communication such as phone-calls, video conferencing, texts emails etc.

Direct communication along line management structures will also form a feature of communication in respect of this issue in line with established PMVT practice.



Preparation, Education and Training of Staff and Participants

Educating and Training in Infection Prevention

COVID-19 is a new development within the health services and in turn new information is coming to light on a daily basis in respects symptoms, susceptibility and in turn vulnerabilities. Peter McVerry Trust aims to ensure that both staff and participants are fully informed and educated to a high standard in regards to any developments within the health sector based on recommendations from the HSE and the HSPC are made available to inform practice in frontline services on a day to day basis. Handwashing, respiratory etiquette, appropriate use of personal protective equipment, and staff and participant restrictions in respect of travel, social distancing and limited movement.

Education and Training of Staff

All managers and team leaders have received 'Train the Trainer' training in regards to appropriate hand hygiene and the safe removal of personal protective equipment. This measure was implemented at an early stage to proactively respond to the needs of both staff and participants in ensuring a collective effort is made to contain the spread of COVID-19.

Training and Resources

Each manager and team leader who attended the training holds the responsibility of ensuring that all colleagues in their clusters are in turn trained appropriately in hand hygiene and the safe removal of personal protective equipment. In tandem with the practical training carried out, PMVT developed a training resource which can be used



by all staff as a point of reference and an opportunity for refreshing information to maintain best practice. This resource is available on the PMVT Intranet and has also been circulated to all PMVT staff via email accompanied with further guidance poster on appropriate handwashing techniques as set out by the HSE. The videos are also being shown regularly on loops on TVs in public areas across PMVT services.



Communication and Resources

Daily communication is maintained with PMVT staff through PMVTs COVID-19 Task Force. This includes daily updates based on developments within the health service in regards to recommendations, updates and necessary precautions advised within the health sector and in turn to be appropriately rolled out within homeless services.

A comprehensive range of information posters and leaflets have been circulated across the organisation staff cohort that allows for up to date and accurate information. In recognition that PMVT has a diverse staff/participant population an array of multi-lingual posters and leaflets have been circulated. These posters are available in Albanian, Arabic, English, French, Georgian, Italian, Polish, Romanian, Spanish, Urdu and Yoruba.

Education and Training of Participants

PMVT has implemented a comprehensive strategy to ensure that all participants receive up to date and accurate education and training in line with HSE guidelines on measures to take to ensure infection containment.

Participant Awareness and Education

A comprehensive range of information posters and leaflets have been circulated across the organisation for distribution to all participants. These posters are available in the following languages:

- Albanian,
- Arabic,
- English,
- French,
- Georgian,
- Italian,
- Polish,
- Romanian,
- Spanish,
- Urdu and
- Yoruba.

PMVT communication strategy to all frontline staff has allowed staff to keep participants up to date with any changes or recommendations set out by the HSE, WHO and HSPC.



Participant Training

As mentioned above, all PMVT managers and team leaders attended training sessions in regards to Handwashing Techniques and this training has since been delivered to all participants within PMVT services with the intention of ensuring best practice and limiting the spread of COVID-19.

Although participant movement across PMVT services is being minimised, we still expect that new referrals will continued to be directed to homeless services for those who are vulnerable and rough sleeping. For this reason, as part of induction of new participants into PMVT services, the current induction process has been expanded to include education and training on hand washing and universal precautions, as above.

PMVT has also brought together a suite of HSE and World Health Organisation (WHO) education and training videos containing information on:

- How COVID-19 is spread, explanation of "close contact";
- How to wash your hands;
- Most times to wash hands;
- Prevention of illness to include colds, flus, COVID-19 and the Do's and Don'ts in respect of Respiratory Etiquette

Coronavirus COVID-19				Coronavirus Covid-19 Public Health Advice
► How COVID-19 (Coronavirus) Spreads				
Ireland is operating a containment strategy in line with WHO and ECDC advice	Ŀ	Ø	Rialtas na hÉi Government o	

Links to this information was also distributed to all PMVT keyworkers to forward on to all participants with this being followed up with a phone call to ensure all participants had watched, understood, and were clear in regards to the content of the video. This offered an opportunity for participants to raise any personal concerns as well allay fears through having an opportunity to ask questions.

Furthermore, all videos were uploaded onto memory sticks and made available to all residential and day services to ensure that footage was running on public TV screens across services on rotation every 15 minutes for participants.



Ensuring adequate stock of PPE and other related equipment and materials

Monitoring the unfolding situation in China and across Europe and forecasting the reporting of confirmed cases of COVID-19 in Ireland, PMVT took steps to secure PPE equipment and hygiene/cleaning products from multiple suppliers from early February. Pre-empting confirmed cases within Ireland allowed PMVT to assess, plan and implement the appropriate measures to cater for our participant group and the susceptibility of our more vulnerable participant group who may contract the virus.

Stock and Provision to PMVT Services

Peter McVerry Trust has a designated logistics team who are focused on the procurement, maintenance and replenishment of stock on a daily basis. All stock procured is centralised within the organisation to ensure all services are appropriately supplied and provisions available in light of stock balances needing to be adequately sustained.

A stock inventory is maintained on a daily basis for distribution to PMVT frontline services. Daily stock inventories are carried out with an emphasis on health and safety and that sufficient PPE equipment is available to frontline staff and participants to prevent restriction in service delivery.

Special efforts are being made to secure regular supplies of gloves, disposable aprons, masks, hand soap, antibacterial sprays, hand sanitiser and single use paper towels.

Given the challenges associated with securing stock on an ongoing basis, each PMVT service has also been asked to secure local stock supplies through staff members so as to maximise the organisation's capacity to maintain stocks from both central bulk suppliers and local suppliers.

This measure has also been rolled out throughout the housing services.



Implementation of Measures

Relationship - one of our best assets in supporting our participant group

One of our best assets in supporting our participants to protect themselves and others against COVID-19 and to adhere to self-isolation protocols is the established relationships we have developed with them over time. Staff should ensure that these relationships are sustained and developed throughout this rapidly developing situation so that we can work together in partnership with our participant group to achieve the outcomes that will benefit those most.

Staff should engage in professional and measured conversations with all participants to prepare them in advance for the need to be flexible and open to changing their practices and routines if required.

Where participants are finding it difficult to follow the required protocols regarding hand hygiene, respiratory etiquette, self-isolation etc., every professional measure should be exhausted to persuade, encourage and cajole them to do so. Where this is unsuccessful, direction should be sought from one's line manager in relation to next steps. Persistent non-compliance that puts others at risk may result in more robust interventions to protect others in the environment and may include the involvement of the Gardai in the interest of public safety.



Continued Supports and Awareness to Participants

All staff are to maintain vigilance and consistency in supporting participants to follow procedures put in place on hand washing and universal precautions

- Participants and Staff to wash hands on entry to service;
- To dry hands and dispose of paper towels in bins placed at the entry to each service;
- Avoid close contact i.e. shaking hands, hugging etc.
- Staff to maintain an ongoing awareness of symptoms and update management with any development / unset of symptoms within the participant group

Information Posters are on display across all PMVT services, such posters include multi-lingual posters. Educational video links have been circulated for all participants and videos are running on loop on communal TV monitors in all residential services.

- Staff to continue to signpost participants to relevant and reputable information sites for their own awareness
- To ensure posters and leaflets in services are visible and replace where damaged or removed
- To ensure all participants have watched video's whether on participant personal mobile or on service monitor
- To ensure participants are inducted and trained in
 - Awareness and education on COVID-19
 - Training on correct Hand Washing techniques
 - Training on respiratory etiquette
 - o Social Distancing
 - Recognising Symptoms
 - Assessing necessary health services
 - o Supporting participants to self-isolate where required



Ensuring that all physical environments are regularly and frequently disinfected

Ventilation

Where there is no mechanical ventilation system in place, services are to ensure good ventilation regularly throughout each day by opening windows and allowing free flowing air into the building;

Rostered Cleaning Duties

All PMVT services have implemented a frequent and regular cleaning roster to ensure that environments are disinfected on an ongoing basis. A template for ensuring these cleaning duties are properly conducted and recorded has been distributed to all services.

When an area within a service is to be decontaminated; wait for at least one hour before entering and carrying out cleaning.

Stock and Supplies

In addition to a comprehensive cleaning roster each service is to maintain a daily stock inventory of the following supplies:

- Hand Soap and Hand Sanitizer Soaps, Hand Gels;
- Cleaning Products Sprays Kitchen/Bathroom etc., Sterilising Fluid, Wipes, Disinfectant products;
- Personal Protective Equipment Gloves, Aprons, Overshoes, Goggles, Hazard Suites, Face masks;
- Cleaning Equipment Laundry Bags, Refuse Sacks, Single Use Paper Towels, Blue Roll;
- Keep emptied Cleaning Spray Bottles for reuse.
- PMVT services to review twice daily service stock and place orders for supplies in a timely manner so that supplies do not run out, especially throughout the evening and weekend periods.
- Supplies are to be co-ordinated through PMVT COVID-19 Task Force
- Each staff member has been asked to contribute towards replenishing stock by purchasing items to complement stock within service in which they are placed. Staff can do this by purchasing hygiene products when on route to work. All items purchased this way should be handed over to the line manager for storage in central stocks. Staff will need to provided receipts to be reimbursed through petty cash within the service.



Social distancing

Social distancing is important to help slow the spread of coronavirus. It does this by minimising contact between potentially infected individuals and healthy individuals. Social distancing is keeping a space of 2 metres (6.5 feet) between you and other people. Do not shake hands or make close contact if possible.

Identification of more vulnerable participants

PMVT are identifying participants who may be more vulnerable to COVID-19 due to underlying physical health conditions, or due to being immuno-compromised.

The following information continues to be both monitored and reviewed based on developments and / or changes to participants' physical health status or deterioration in same:

- A review of all participants with chronic or immuno-compromised health conditions;
- Ensuring that medical information is maintained and accurate accounts of GP's details, medication regimes, prescribing clinics and contact details are readily available;
- Ensuring all next of Kin information is accurate and maintained;
- Ensuring telephone numbers for all participants are accurate and updated.



Minimising the physical movement of participants across and within services to reduce the spread of infection

A number of measures have been put into effect to reduce the risk of the spread of infection resulting from the movement of participants across and within services:

- Suspension of internal participant transfers unless such transfer is necessary in response to COVID-19;
- To limit social gatherings in communal areas or communal spaces so as to encourage social distancing, in order to achieve this the following measures must be practiced within services:
- To stagger meal times and practice social distancing within services.
- Where possible, individually packed pre-prepared meals will be delivered to larger PMVT services which participants who are self-isolating will receive in their bedrooms along with disposable cutlery. Meal packaging and cutlery will be easily disposed of in general waste. Bins will be located at convenient points to avoid unnecessary travel through services to dispose containers/utensils.
- Participants are to access laundry facilities on an individual basis, gloves to be made available at entry point to laundry facilities to ensure full adherence to health, safety and containment measures. Gloves to be disposed of upon exit from laundry facilities.



Minimising the physical movement of staff across services to reduce the spread of infection

A number of measures have been put into effect to reduce the risk of the spread of infection resulting from the movement of staff across and within services.

- Where required, relief and agency staff to be used repeatedly in the same services;
- Communicate with all staff through email, intranet, and telephone communications etc. not to bring staffing together in groups.
- Ensure that where face-to-face interactions are essential, that these are time bound to 15 minutes.
- All housing services are to limit face to face contact, except for high need participants where such contact should be limited to what is essential. Key-working sessions should be brief and are to be carried out through the use of video calls where staff have the opportunity to engage meaningfully with a participants to ensure appropriate check-in and to carry out observations regarding any potential display of symptoms suggestive of COVID-19.
- A number of staff within the organisation carry out functions that require them to visit multiple services and locations across the organisation these include staff in our IT department, our logistics team, heads of services and managers who have responsibilities across multiple services, referrals & assessments service, accommodation finders and nursing staff, etc. These staff members are at greater risk of spreading infection and support visits to services should be minimised to what is absolutely essential. Where necessary these visits are to be planned in advance to minimize the length of time on-site and in contact with local staff / participants. The use of sanitizing hand gel and wipes etc will be mandatory both prior to and following any essential visits.
- The spread of infection is also a risk in relation to external contractors who provide services across multiple PMVT sites, such as maintenance contractors, food suppliers, cleaning staff, laundry staff, bio-hazard disposal, SafetyNet etc. many of whom provide services not only to PMVT but also to other providers in the sector. PMVT has put in place measures to minimise unnecessary presentation in services so that only essential external agencies access services and only when necessary.



If a PMVT staff member develops symptoms of COVID-19

If a PMVT staff member develops any symptoms of COVID-19 it is the staff member's responsibility to maintain and direct communication with their line manager. If they are feeling unwell they should contact their line manager by telephone in advance of physically presenting to work.

Staff who work in homeless services are considered to fall under the heading of health care workers. As of 14th March 2020, we have been advised that in order to ensure that any of these vital staff who require COVID19 testing to be in a position to return to work are being prioritised over other candidates for testing. A negative test will allow them to return to work quickly.

The following procedure describes how this will be done:

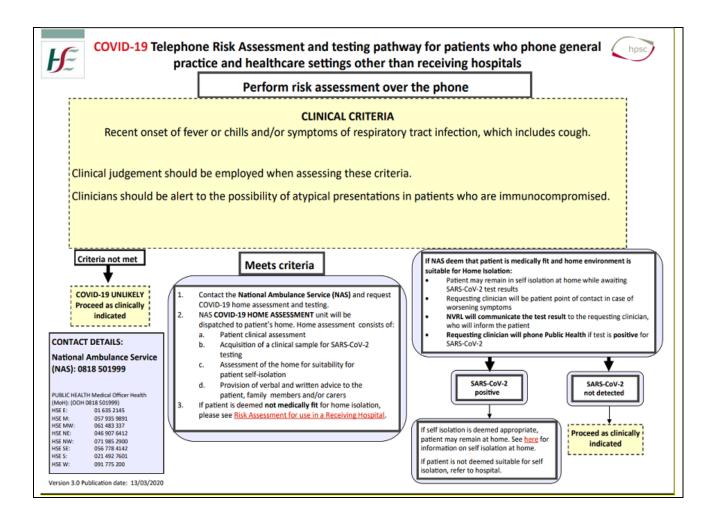
- 1. All HCW priority referrals must be authorised and referred by a Public Health Specialist.
- 2. The Public Health Specialist should email the request to neoc.covid19@hse.ie with "PH- URGENT HCW REFERRAL" in the subject line of the email.
- 3. The email should include HCW name address and mobile phone number
 - a. Requesting doctor name and mobile number the test result will go to this doctor from NVRL
- 4. The National Ambulance Service COVID19 desk will prioritise these tests- the quickest way to do so is to have the HCW attend a static testing point rather than wait for a home visit. HCWs should be told that they will likely have to travel to one of these points.

Any PMVT staff member who suspects they may have COVID-19 (see algorithm below), should consult with their line manager for direction on making contact with a Public Health Specialist.



What to do if there is a Suspected Case of COVID-19

Follow the algorithm below:





Self-isolation

Self-isolation means staying indoors and completely avoiding contact with other people. You will need to do this if you have symptoms of coronavirus. This is to stop other people from getting it.

You will need to self-isolate:

- if you have symptoms of coronavirus
- before you get tested for coronavirus
- while you wait for test results
- if you have had a positive test result for coronavirus

How to self-isolate

- If you develop symptoms you will need to self-isolate and phone your GP. Do not go to a GP surgery, pharmacy or hospital. The GP will assess you over the phone. If they think you need to be tested for coronavirus, they will arrange a test.
- You will need to self-isolate if you have coronavirus or have symptoms of coronavirus. This could be before you get tested for coronavirus, while you wait for test results or when a positive result is confirmed.
- Most people with coronavirus will only have mild symptoms and will get well within weeks. Even though the symptoms are mild, you can still spread the virus to others.
- If you have to self-isolate, stay indoors and avoid contact with other people.
- Only stop self-isolation when both of these apply to you:
 - > you have had no fever for 5 days
 - > it has been 14 days since you first developed symptoms

Do

- Stay at home, in a room with the window open.
- Keep away from others in your home as much as you can.
- Check your symptoms call a doctor if they get worse.
- Phone your doctor if you need to do not visit them.
- Cover your coughs and sneezes using a tissue clean your hands properly afterwards.
- Wash your hands properly and often.
- Use your own towel do not share a towel with others.
- Clean your room every day with a household cleaner or disinfectant.



Don't

- Do not go to work, school, religious services or public areas.
- Do not share your things.
- Do not use public transport or taxis.
- Do not invite visitors to your home.
- Keep away from older people, anyone with long-term medical conditions and pregnant women.
- PMVT staff will make necessary arrangements to drop off food or supplies to participants who are in self-isolation. Make sure you're not in the same room as them, when they do.

Laundry

Put your laundry in a plastic bag. Have someone collect it from your bedroom door. If possible, they should wear rubber gloves.

They should:

- wash the laundry at the highest temperature for the material, with a laundry detergent
- clean all surfaces and the area around the washing machine
- wash the rubber gloves while still wearing them
- wash their hands thoroughly with soap and water after removing the gloves
- If possible tumble dry and iron using a hot setting or steam iron.
- Do not take laundry to a launderette.

Managing rubbish

- Put all the waste that you have used, including tissues and masks, in a plastic rubbish bag.
- Tie the bag when it is about three-quarters full.
- Place the plastic bag in a second bin bag and tie the bag.
- Treat all cleaning waste in the same way.
- Do not put the rubbish bags out for collection for 72 hours.
- After that, the bags can be put out for collection in regular domestic waste.



Caring for someone else in self-isolation

You may be caring for someone who needs support while they are in self-isolation. If you are, follow the advice above.

You should also:

- stay away from them as much as possible (at least 1 metre) and avoid touching them use your phone to communicate
- wash your hands properly every time you have contact with the person
- if you have face masks, wear one and have them one when you have to be in the same room
- if you have to clean phlegm or spit from their face use a clean tissue, put it into a waste bag and wash your hands
- put them in a well-ventilated room alone
- limit their movement in the house
- get them to use a different toilet if possible
- limit the number of caregivers
- keep them away from older people, people with long-term conditions or pregnant women

If possible, only one person should look after the person self-isolating. Ideally, this would be someone who is in good health.

If you live with other people

- Stay in a room with a window you can open.
- If you can, use a toilet and bathroom that no one else in the house uses.
- If you have to share a bathroom with others, use the bathroom last and then clean it thoroughly.
- Do not share any items you've used with other people.

These include:

- > dishes
- drinking glasses
- ➤ cups
- eating utensils
- towels
- bedding



Meals

Food and drink will be brought to the isolation areas and reasons to leave those areas will identified and addressed to ensure that any such needs are met so as to avoid unnecessary movement within the environment.

- If possible, have someone leave your food on a tray at your bedroom door.
- When you have finished, leave everything on the tray at the door.
- This should be collected and put in a dishwasher and hands washed properly afterwards.
- If you don't have a dishwasher:
 - > wash in hot soapy water, wearing rubber gloves
 - leave to air dry
 - > wash the rubber gloves while you are still wearing them
 - remove gloves and wash your hands

Making provision for self-isolation, where necessary, in respect of participants across PMVT services

There are clearly challenges associated with self-isolation in congregated settings. Approximately 66% of all rooms in PMVT emergency accommodation services are either single or twin rooms and this will provide options for isolation. A full assessment has been carried out of all PMVT services and appropriate identification has been made of an area suitable for isolation. These designated areas include rooms, corridors, floors, and other areas within services.

Any room or area or indeed facility that is designated as an isolation area will be subject to rigorous, frequent and regular disinfection practices by PMVT staff and participants will also be required to take responsibility for following universal precautions and cleanliness and hygiene practices associated with minimising the risk of the spread of infection.



Ensuring those required to self-isolate have access to showering and toileting facilities

Showering facilities will be identified for those who are required to self-isolate and where possible these facilities should be accessible only to those who are required to self-isolate and kept locked at all other times. Where this is not possible, specific showers and toilets should be identified for the exclusive use of those in self-isolation and clearly designated as such. These should be ring-fenced for use at a specific time each day (preferably late afternoon or evening).

- Designated showers / toilets will be rigorously dis-infected at the end of this time period.
- All showering areas should be maintained without any hygiene products left in the shower that may subsequently be used by others.
- Showering areas should be well ventilated and the disinfecting process shall be undertaken approximately 30 minutes after its last use by those in self-isolation.
- The shower should remain locked during this time.
- Staff attending to those who are required to self-isolate should take additional precautions when delivering food and collecting used plates etc. by way of ensuring that they wear disposable gloves and disposable aprons.

Maintaining a register of those required to self-isolate

PMVT is maintaining a register of all participants who are required to self-isolate that will include their name, DOB, PASS ID, reason why they were required to self-isolate, the date that the period of self-isolation began and the date it is scheduled to end. The register will also include Next of Kin details, medical issues, medication etc. as set out on PMVT contact form.

In light of any participant or staff member receiving a confirmed diagnosis of COVID-19 or awaiting results, they will be contacted by their service manager and PMVT Head of Nursing and Addiction on a daily basis for both support and update regarding presentations.



The difference between self-quarantine and self-isolation

Self-quarantine means avoiding contact with other people and social situations as much as possible. You will need to do this if you are a close contact of a confirmed case of coronavirus and you are still well. Self-quarantine is to stop other people from getting coronavirus.

How to self-quarantine

- If you are well, but you have been in close contact with a case of coronavirus you will need to selfquarantine. You will also need to self-quarantine if you have returned from certain countries. This is to stop other people from getting coronavirus.
- Self-quarantine means avoiding contact with other people as much as possible by staying at home or in your hotel.
- You can still go outside for walks, runs or cycles on your own. But you should not spend time in close contact with other people.
- Other household members do not need to restrict their activities unless they are told to.

Don't

- Do not go to school, college or work.
- Do not use public transport.
- Do not go to meetings, social gatherings, group events or crowded places.
- Do not have visitors at your home.
- Do not go shopping where possible, order your groceries online or have some family or friends drop them off.
- Do not contact older people, people with chronic health problems and pregnant women.
- Do not travel outside or within Ireland.



Contact Tracing

Each service is to ensure that a clear record is kept of who accesses services and when, so that any contact tracing carried out by the HSE on the diagnosis of coronavirus is accessible to the HSE.

- All staff to be made aware and ensure that service sign in and sign out books are updated at each entry and departure.
- All staff returning from or planning on travelling to risk zones to inform line manager immediately.

Sustainment and Review

Systems and process in relation to PMVT's response to COVID-19 remain under continued review by the PMVT COVID-19 Task Force in consultation with the relevant public health authorities, the DRHE and the management, team leaders, staff and participants of PMVT.

The following practices as set out above will be sustained and reviewed until further notice:

- Rigorous monitoring of participant group for symptoms related to COVID-19
- Continued use of Screening Algorithm
- Keeping up-to-date with daily updates as set out by the HSE and HPSC
- Continued disinfection of PMVT environments
- Ensuring ongoing supply of Stock
- Ensuring continued training to all PMVT staff and participants
- Ongoing communication to all PMVT staff



Data Protection and COVID-19

Governments, as well as public, private, and voluntary organisations such as Peter McVerry Trust are taking necessary steps to contain the spread and mitigate the effects of COVID-19. Many of these steps involve the processing of personal data (such as name, address, workplace, travel details) of individuals, including in many cases sensitive, 'special category' personal data (such as data relating to health).

Data protection law does not stand in the way of the provision of healthcare and the management of public health issues;

Measures taken by PMVT in response to COVID-19 involving the use of personal data, including health data, are necessary and proportionate so as to ensure that the risk to life of PMVT participants and staff is minimised. Decisions in this regard are informed by the guidance and/or directions of public health authorities, or other relevant authorities and with regards to the following obligations.

Lawfulness

There are a number of legal bases for the processing of personal data under Article 6 GDPR, and conditions permitting the processing of Special Categories of personal data, such as health data, under Article 9 that are applicable in this context.

PMVT is acting on the guidance or directions of public health authorities, or other relevant authorities, Article 9(2)(i) GDPR and Section 53 of the Data Protection Act 2018 permit the processing of personal data, including health data, with suitable safeguards in place. Such safeguards include limitation on access to the data, strict time limits for erasure, and staff training to protect the data protection rights of individuals.

As employers PMVT have a legal obligation to protect its employees under the Safety, Health and Welfare at Work Act 2005 (as amended). This obligation together with Article 9(2)(b) GDPR provides a legal basis to process personal data, including health data, where it is deemed necessary and proportionate to do so. Any data that is processed is treated in a confidential manner i.e. any communications to staff about the possible presence of COVID-19 in the workplace will not generally identify any individual employees.

Vital Interest

It is permissible to process personal data to protect the vital interests of an individual data subject or other persons where necessary. A person's health data may be processed in this regard where they are physically or legally incapable of giving their consent. This will typically apply only in emergency situations, where no other legal basis can be identified.

All data processing activities remain underpinned PMVT Data Protection Policies and Procedures.



Key Online Information Sources

Coronavirus posters

COVID-19 poster (PDF, 760KB, 1 page)

Hand hygiene poster (PDF, 129KB, 1 page)

Health Protection Surveillance Centre (HPSC) guidance

Educational settings COVID-19 guidance

Employer guidance on COVID-19

COVID-19 guidance for other settings

Department of Health

Department of Health - Coronavirus COVID-19

Department of Foreign Affairs

Department of Foreign Affairs - Updated travel advice on Coronavirus (COVID-19)

World Health Organisation

WHO - Coronavirus Disease COVID-19 outbreak

European Centre for Disease Prevention and Control (ECDC)

ECDC - Coronavirus (COVID-19)