**Updated guidance for the COVID-19 form - Explaining the tabs within form and what should be recorded**

**If you have any questions, please contact:** **HMPPSCOVID19@justice.gov.uk**

**Overview tab**

* **Please fill in your establishment or site – this will link to the data tabs.**

**Prison**

|  |  |
| --- | --- |
| **Overview questions** | **Options** |
| What is the highest level of isolation occurring in your prison? | * Cell
* Wing
* Whole Prison
* None
 |
| Are you open to transfers in / new receptions? |  Not mandatory |
| Are you able to transfer out / release to court? |  Not mandatory |
| Are you able to still complete ROTLs/Mobility? |  Not mandatory |
| Are you still able to offer visits? |  Not mandatory |
| What is the impact on your regime and stability? | * Low: Planned normal regime will be delivered
* Medium: Staffing levels mean only essential services will be delivered
* High: Patrol state staffing levels, no delivery or partial delivery of core services
 |

**Probation**

|  |  |
| --- | --- |
| **Overview questions** | **Options**  |
| Has your service been impacted significantly by Covid-19? |  Not mandatory |
| Have you had to close any offices as a result of Covid-19?  |  Not mandatory |
| Are you still open to receiving clients? |  Not mandatory |
| Are you continuing to facilitate home visits?  |  Not mandatory |
| Have you had to enforce your exceptional delivery model in any areas of the probation system? | Not mandatory |

**EM/AP/PECS/HQ**

|  |  |
| --- | --- |
| **Overview questions** | **Options**  |
| Has your service been impacted significantly by Covid-19? |  Not mandatory |

**BASS**

|  |  |
| --- | --- |
| **Overview questions** | **Options**  |
| Are you still able to deliver your service despite the effects of Covid-19? |  Not mandatory |

**NOTE:**

**If following a positive LFD test result, the PCR result is negative please ensure that the LFD result is changed to a ‘false positive’. Also add a new entry for the negative PCR result.**

**Service User – Prison**

This should be used to record all prisoners known to have covid-19, with symptoms of covid-19, or that are being social shielded within a cohort.

**The case record should be updated with new information when it becomes available.** If a prisoner is being shielded or are newly received in a prison and start to show symptoms, please **update the record to Y under showing symptoms.**

The case record should be closed when the prisoner no longer has symptoms of covid-19 or the prisoner is no longer being shielded.

If a prisoner shows symptoms for a second time, please open a new case record.

**If a case record is opened mistakenly** remove **all** data from that row and add a comment in the ‘other notes’ column stating - “Opened incorrectly”.

For positive cases that have been open for over 10 days please add a comment in the ‘other notes’ column to confirm **long-COVID**.

For any **new positive cases going forward**, please add a comment in the ‘other notes’ column to advise if they are new receptions and located on the RCU or if they have contracted the virus whilst in the establishment.

This tab includes:

|  |  |  |  |
| --- | --- | --- | --- |
| **Column Name** | **Description** | **Dropdown** | **Mandatory?** |
| Date entry created | Entry date onto the spreadsheetdd/mm/yyyy |  | Yes |
| Location | Automatically populates with your establishment name. | Don't fill in. |  |
| Case open or closed | Case will be marked closed and row will grey out when column S is populated. | Don't fill in. |  |
| Case number | This will automatically be populated based on your establishment code to give a unique identifier to every case. | Don't fill in |  |
| Identifier (e.g. NOMIS ID) | NOMIS ID, admission number or unique identifier of individual being recorded. |  | Yes |
| Surname | Surname of individual, for ref only. |  | Yes |
| Cell/wing ref | Please state location e.g. Reverse Cohort Unit (RCU) / First Night Centre / main location etc.. |  | Yes |
| Cell Occupancy | From dropdown, select number of individuals occupying cell when isolation begins. | * Single
* Double
* Multiple
 | No |
| Age | Select the age band which the individual falls into from the dropdown. | * 0 - 9
* 10 - 19
* 20 - 29
* 30 - 39
* 40 - 49
* 50 - 59
* 60 - 69
* 70 - 79
* 80+
* Unknown
 | No |
| Any external movement in last 14 days? | Has the individual arrived at your establishment or had an external movement within the last 14 days? | * Y
* N
 | Yes |
| Date isolation started | Date when individual first went into isolation.dd/mm/yyyy |  | Yes |
| Why are they in the collection - Showing symptoms? | Is the individual showing any symptoms? If not, are they being shielded or have Covid-19 but no symptoms? | * Y
* N – being shielded
* N – has Covid-19 but no symptoms
* N – Other
 | Yes |
| Covid-19 test result | Please select the outcome of the Covid-19 test from the below dropdown. | * Positive
* Negative
* Not tested
* Decline to say (but has been tested)
* Awaiting results
* False positive
 | Yes |
| Covid-19 result date | Date that the Covid-19 test result was receiveddd/mm/yyyy |  | No |
| Date external hospitalisation | Date when individual was admitted to hospital because of symptoms related to Covid-19. |  | Yes |
| Number of days in isolation | . This calculates the number of days the individual has been in isolation without the case being closed. | Don't fill in |  |
| Date case closed | Date case was closed as the individual no longer meets the criteria to be included on the spreadsheet (see 'PLEASE READ' tab for more info).dd/mm/yyyy |  | Yes |
| Reason for closing case | Please select a reason from the dropdown for why the case has been closed. | * Isolation ended
* Released to probation
* Released to the community
* Transferred to new prison
* Exited the service
* Recalled to prison
* Fatality
* Other - please enter comment
 | No |
| Other notes | Add your own notes to this column. Please add any additional information relating to cases of serious illness (whether these result in hospitalisation or not)  |  | Complete when necessary / appropriate  |
| Date returned from hospital | Date when individual returned from hospital because of symptoms related to Covid-19.dd/mm/yyyy |  | Yes |

**Service user – Other: NPS / Approved Premises / Electronic Monitoring (EM) / Bail Accommodation and Support Services (BASS)**

This should be used to record all service users that have symptoms of covid-19 or are self-isolating due to contact with someone with covid-19 following the [current guidelines](https://www.nhs.uk/conditions/coronavirus-covid-19/self-isolation-advice/).

Do not include service users who are isolating due to being of [increased risk.](https://www.nhs.uk/conditions/coronavirus-covid-19/advice-for-people-at-high-risk/)

|  |  |  |  |
| --- | --- | --- | --- |
| **Column Name** | **Description** | **Dropdown** | **Mandatory?** |
| Date entry created | Entry date onto the spreadsheetdd/mm/yyyy |  | Yes |
| Location | Automatically populates with your establishment name. | Don't fill in. | Yes |
| Specific location | LDU cluster (NPS only), specific Approved Premises (AP only) or BASS region (BASS only) | Dropdowns of reporting unit – too large to outline in the guidance.  | Yes |
| Case open or closed | Case will be marked closed and row will grey out when column N is populated. | Don't fill in |  |
| Case number | This will automatically be populated based on your site code to give a unique identifier to every case. | Don't fill in. |  |
| Identifier (e.g. CRN) | CRN, subject number, person reference or unique identifier of individual being recorded. |  | Yes |
| Age | Select the age band which the individual falls into from the dropdown. | * 0 - 9
* 10 - 19
* 20 - 29
* 30 - 39
* 40 - 49
* 50 - 59
* 60 - 69
* 70 - 79
* 80+
* Unknown
 | Yes |
| Date isolation started | Date when individual first went into isolation.dd/mm/yyyy |  | Yes |
| Covid-19 test result | Please select the outcome of the Covid-19 test from the below dropdown. | * Positive
* Negative
* Not tested
* Decline to say (but has been tested)
* Awaiting results
* False positive
 | Yes |
| Covid-19 result date | Date that the Covid-19 test result was received.dd/mm/yyyy |  | Yes |
| Date hospitalisation | Date when individual was admitted to hospital because of symptoms related to Covid-19.dd/mm/yyyy |  | Yes |
| Number of days in isolation | This calculates the number of days the individual has been in isolation without the case being closed. | Don't fill in. |  |
| Date case closed | Date case was closed as the individual no longer meets the criteria to be included on the spreadsheet (see 'PLEASE READ' tab for more info).dd/mm/yyyy |  | Yes |
| Reason for closing case | Please select a reason from the dropdown for why the case has been closed. | * Isolation ended
* Released to probation
* Released to the community
* Transferred to new prison
* Exited the service
* Recalled to prison
* Fatality
* Other - please enter comment
 | Yes |
| Other notes | Add your own notes to this column. Please add any additional information relating to cases of serious illness (whether these result in hospitalisation or not) |  | Complete when necessary / appropriate |

**Staff**

This tab should be used to record **all members of staff that are not able to work at their usual place of work for Covid-19 related reasons and are unable to fulfil all of their usual duties from home.**

**Staff in scope:** Any directly or indirectly employed member of staff working on your site including partner agencies where the staff work on your site, e.g. Education, Healthcare, Through the Gate, Maintenance Services. Directly employed staff includes any staff employed by HMPPS or the company running the relevant site/office/establishment. Please report redeployed staff members within the return from the prison they have been allocated to.

The case record should be updated with new information when it becomes available.

The case record should be closed when the staff member is able to work at their usual place of work or they are able to fulfil all their usual duties.

If the staff member is unable to continue working after returning to their usual place of work or having been able to fulfil all of their duties, please open a new case record.

**If a case record is opened mistakenly** remove **all** data from that row and add a comment in the ‘other notes’ column stating - “Opened incorrectly”.

Some examples

* Anna has been told to self-isolate for 12 weeks as they are in a high-risk group. However, they are still able to do their usual job from home = **Don’t record.**
* Laura is unable to go to work because they have caring responsibilities. They can do some work from home, but are unable to do their normal hours = **Record**
* Luke develops symptoms so has to isolate for a week. While they can do some work from home, they can’t do home visits which are part of their job = **Record**.
* Arjun is social distancing by doing their normal job permanently from home. They can do all their usual duties = **Don’t record.**
* Melinda has been doing their usual work at home. However, they have become ill with Covid-19 symptoms and are unable to work = **Record when they become ill.**

To reduce the increasing burden on staff to report COVID-19 sickness absences and special leave, **from 20th April 2020 the COVID-19 staffing return replaced SOP reporting for COVID-19 related absences**. You will need to record:

* **Is the staff member working? (column V on the staff tab)**
* **No**: SOP COVID-19 sickness and special leave categories defined in the table below.

OR

* + **Yes**: please select appropriate option to provide further information as to why the staff member is working from home but is not able to work at their usual place of work and is unable to fulfil all of their usual duties from home.

To accurately capture the impact of COVID on staffing levels, **data for all mandatory fields must be provided**, this includes revising staff role details (columns H to J) for staff inputted on the return before 20th April 2020, where data does not match any of the revised categories, as well as **ensuring employee number is correct for directly employed staff.**

Should a site require a list of staff members and employee numbers to aid completion of employee numbers in the return, this can be requested from the COVID FMB.

As per the [**HR Supporting Attendance Version 6**](https://intranet.noms.gsi.gov.uk/covid-19-coronavirus/staff-and-managers2/absences) (effective from 12th April 2021), after an absence has reached 10 days it should stay on the daily reporting spreadsheet **and** have an absence opened on SOP under the symptom most presenting (unless there are exceptional reasons as outlined in the guidance as to why the absence should continue to be recorded as a COVID absence).

For positive cases that have been open for over 10 days, please add comments in the ‘other notes’ column to confirm **long-COVID** and confirm it is also recorded on SOP. Depending on whether the staff member can complete some work from home in these cases, either option ‘1. Showing symptoms’ or ‘1. Sickness Absence - Respiratory System Epidemic/Pandemic’ should be selected from column W.

**All other non-COVID related sickness and absence should continue to be recorded on SOP in the usual way**.

The fields for completion are outlined in the table below, along with the dropdown options.

|  |  |  |  |
| --- | --- | --- | --- |
| **Column name** | **Description** | **Options for dropdown** | **Mandatory?** |
| Date entry created | Entry date onto the spreadsheetdd/mm/yyyy |  | Yes |
| Location | Automatically populates with your site/establishment name. | Don't fill in. |  |
| Specific location | LDU cluster (NPS only), specific Approved Premises (AP only), BASS region (BASS only) or PECS region (PECS only) |  | Yes |
| Case open or closed | Case will be marked closed and row will grey out when column T is populated. | Don't fill in. |  |
| Case number | This will automatically be populated based on your site/establishment code to give a unique identifier to every case. | Don't fill in. |  |
| Identifier (e.g. employee number) | Employee number or another unique identifier of individual being recorded.This line will only be used to check for duplication for non-directly employed staff |  | Yes: Please fill this in so the individual can be found in SOP. A list of employee ID’s for directly employed staff can be requested. |
| Detail on staff role | Select the type of staff from the dropdown. | * Prison\_staff
* Probation\_staff\_NPS
* EM\_Staff
* AP\_Staff
* PECS\_Staff
* HQ\_Staff
* Volunteer
 | Yes |
| Select detail on the staff role from the dropdown. | Prison\_staff:* Directly
* Non-Directly

Probation\_staff\_NPS:* NPS\_Approved\_Premises
* NPS\_Complaints
* NPS\_Courts
* NPS\_Criminal\_Justice\_Learners
* NPS\_Critical\_Operations\_Support\_Unit
* NPS\_Divisional\_Support
* NPS\_Enforcement
* NPS\_HQ
* NPS\_Management\_Structures
* NPS\_Multi\_Agency
* NPS\_Offender\_Management
* NPS\_Other\_Interventions
* NPS\_Private\_Prison
* NPS\_Programmes
* NPS\_Public\_Prison
* NPS\_SFO
* NPS\_Training
* NPS\_Victims
* NPS\_YOS
* EM\_Staff
* AP\_Staff
* PECS\_Staff
* HQ\_Staff

EM\_Staff* Field service
* Monitoring
* Support

AP\_Staff* NPS Band 2 residential workers
* NPS Band 2 case administrator
* NPS Band 3 PSO
* NPS Band 3 Finance Officer
* NPS Band 4 probation officer
* NPS Band 5 SPO AP MANAGER
* NPS Band 6 Area Manager
* Band C Head of public protection
* Other

PECS\_Staff* Prisoner Custody Officer
* Deputy Court Custody Manager
* Court Custody manager
* Other

HQ\_Staff* HQ Band 1
* HQ Band 2
* HQ Band 3
* HQ Band 4
* HQ Band 5
* HQ Band 6
* HQ Band 7
* HQ Band 8
* HQ Band 9
* HQ Band 10
* HQ Band 11
* SCS
* Other
 | Yes |
| Select additional detail on the staff role from the dropdown.NPS and Prison staff only. | Prison Staff - Directly * Prison\_OSG
* Prison\_Band 3 to 5 Prison Officer
* Prison\_Operational Manager
* Prison\_Non-operational manager
* Prison\_Governor
* Prison\_Instructor
* Prison\_Catering
* Prison\_Admin
* Prison\_Psychologist
* Other

Prison Staff – Non-directly * Through the Gate
* Healthcare
* Education
* Canteen
* Catering
* Maintenance
* Other support services

NPS (all options):* Band 1
* Band 2
* Band 3 Other
* Band 3 PSO
* Band 4 Other
* Band 4 Qualified Probation Officer
* Band 5 Other
* Band 5 SPO
* Band 6
* Band A
* Band B
* Band C
* Band D
* Other/Unknown
 | Yes |
| Does this member of staff work across multiple sites? | * Y
* N
 | No |
| Optional column for your own notes about the specific staff role. |  | No |
| Age | Select the age band which the individual falls into from the dropdown. | * 0 - 9
* 10 - 19
* 20 - 29
* 30 - 39
* 40 - 49
* 50 - 59
* 60 - 69
* 70 - 79
* 80+
* Unknown
 | No |
| Date isolation started | Date when individual first went into isolation.dd/mm/yyyy |  | Yes |
| Covid-19 test result | Please select the outcome of the Covid-19 test. | * Positive
* Negative
* Not tested
* Decline to say (but has been tested)
* Awaiting results
* False positive
 | Yes |
| Covid-19 result date | Date that the Covid-19 test result was received.dd/mm/yyyy |  | No |
| Date hospitalisation | Date when individual was admitted to hospital because of symptoms related to Covid-19.dd/mm/yyyy |  | Yes |
| Number of days in isolation | This calculates the number of days the individual has been in isolation without the case being closed. | Don’t fill in |  |
| Working days lost | When filling this in take into account shift pattern and part-time work. |  | No |
| Date case closed | Date case was closed as the individual no longer meets the criteria to be included on the spreadsheet (see 'PLEASE READ' tab for more info).dd/mm/yyyy |  | Yes |
| Other notes | Add your own notes to this column. Please add any additional information relating to cases of serious illness (whether these result in hospitalisation or not). |  | Complete when necessary / appropriate |
| Is the staff member working? | Is this person working from home despite being in isolation? | * Y
* N
 | Yes |
| Additional information(more detail is available below) | Y* 1. Showing symptoms
* 2a. Vulnerable/vulnerable person within household
* 2b. Other cases of self-isolation/ quarantine following official health advice
* 3a. Caring responsibilities short-term (e.g. dependent in household has symptoms)
* 3b. Caring responsibilities long-term (e.g. young child where previous childcare is no longer available)
* 4. Other COVID Reasons

N* 1. Sickness Absence - Respiratory System Epidemic/Pandemic
* 2. Paid Special Leave - Epidemic/Pandemic - Self Isolation or Quarantine on Official Health Advice
* 3. Paid Special Leave - Epidemic/Pandemic - Other reasons
* 4. Paid Special Leave - Epidemic/Pandemic - Caring Responsibility
 | Yes- mandatory for official Cabinet Office reporting on covid-19 related absences and to support HMPPS workforce modelling |

**Is the staff member still working from home? - Exceptional Delivery Model (EDM) Workforce Reporting Categories**

The EDM Workforce Reporting Categories column is used for internal workforce reporting and planning. The high-level category data requested informs a more accurate reflection of the current and future workforce capacity by capturing the primary reason that staff are self-isolating or in quarantine.

When the member of staff is working from home:

**1. Showing symptoms**

Member of staff is working but is self-Isolating due to showing symptoms of COVID-19.

**2a. Vulnerable/vulnerable person within household**

Member of staff is working but is self-isolating/in quarantine on the grounds of specific and official health advise that they are classified as a vulnerable person and/or have a vulnerable person within their household.

**2b. Other cases of self-isolation/ quarantine following official health advice**

Member of staff is working but is self-isolating/in quarantine on the grounds of other specific and official health advice. For example, quarantined, in self-isolation, or in family isolation for COVID-19 or suspected COVID-19.

**3a. Caring responsibilities short-term (e.g. dependent in household has symptoms)**

Member of staff is working but have short term caring responsibilities related to COVID-19 or a suspected COVID-19 outbreak.

For probation staff travelling outside the householder to deliver probation services, this primarily relates to staff who are not symptomatic but are self-isolating/ in quarantine on the grounds of specific and official health advice, and as a result are taking on short term caring responsibilities.

For staff able to work from home this primarily relates to staff with short term caring responsibilities when household dependents develop COVID-19 or suspected COVID-19 symptoms.

**3b. Caring responsibilities long-term (e.g. young child where previous childcare is no longer available)**

Member of staff is working but have long term caring responsibilities related to COVID-19 or a suspected COVID-19 outbreak. This should include staff who are required to work from home because of non-vulnerable dependents. For example: a young child below nursery/ school age where previous childcare is no longer possible. This does not include those staff who are able to work from home working and have school age children in their household.

**4. Other COVID Reasons**

Member of staff is working from home for other COVID-19 related issues/ disruption. This includes if a key worker is required to work from home due to lack of education provision.

 **Is the staff member not working? - Absence categories as per official Cabinet Office guidance**

|  |  |  |
| --- | --- | --- |
| **Dropdown menu option** | **Dropdown menu option - new absence category** | **Guidance** |
| **Sickness**  | **Respiratory System - Epidemic/Pandemic** | You are absent or not working because you are ill with symptoms of COVID-19.The [NHS online](https://www.nhs.uk/conditions/coronavirus-covid-19/) list of symptoms are:* A cough
* A high temperature
* Shortness of breath

Please note: Staff will not be required to obtain/produce a medical certificate to confirm they have COVID-19. |
| **Special Leave With Pay** | **Epidemic/Pandemic - Self Isolation or Quarantine on Official Health Advice** | You are not ill but absent or not working on the grounds of specific and official health advice. For example, you are quarantined, in self-isolation, or in family isolation for COVID-19 or suspected COVID-19.Please note: Staff will not be required to obtain/produce a medical certificate to confirm they have COVID-19. |
| **Special Leave With Pay** | **Epidemic/Pandemic - Caring Responsibility** | You are not ill but absent or not working because of caring responsibilities related to COVID-19 or a suspected COVID-19 outbreak. |
| **Special Leave With Pay** | **Epidemic/Pandemic - Other reasons** | You are not ill but absent or not working because of other COVID-19-related issues/ disruption. |

**COVID-19 Daily Data Category Guidance Summary On-a-Page**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Scenarios** | **Guidance Notes**  | **Is the staff member working?** | **SOP Absence Category**  | **EDM Workforce Reporting Category**  |
| *External absence reporting through Cabinet Office*  | *Internal Workforce Planning through Probation Gold*  |
| **Member of staff has COVID-19 Symptoms**  | The NHS online list of symptoms are: a cough, a high temperature and shortness of breath\* | No | 1. SICKNESS ABSENCE - Respiratory System Epidemic/Pandemic | N/A - Not Working |
| Yes | N/A - Not Absent  | 1. Showing symptoms |
| **Member of staff is self-isolating on the grounds of official advise** | Staff are not ill but absent/ working from home on the grounds of specific and official health advice. For example, quarantined, in self-isolation, or in family isolation for COVID-19 or suspected COVID-19\*. | No | 2. PAID SPECIAL LEAVE - Epidemic/Pandemic - Self Isolation or Quarantine on Official Health Advice | N/A - Not Working |
| Yes | N/A - Not Absent  | 2a. Vulnerable/ vulnerable person within household  |
| 2b. Other cases where following official health advice |
| **Member of Staff has caring responsibilities**  | Staff are not ill but absent/ working from home because of caring responsibilities related to COVID-19 or a suspected COVID-19 outbreak.  | No | 4. PAID SPECIAL LEAVE - Epidemic/Pandemic - Caring Responsibility | N/A - Not Working |
| Yes | N/A - Not Absent  | 3a. Caring responsibilities short-term |
| 3b. Caring responsibilities long-term |
| **Member of staff is not working for another COVID related reason** | Staff are not ill but absent/working from home because of other COVID-19-related issues/ disruption.  | No | 3. Epidemic/Pandemic - Other reasons | N/A - Not Working |
| Yes | N/A - Not Absent  | 4. Other COVID Reasons |
| \*Please note: staff will not be required to obtain/produce a medical certificate to confirm they have COVID-19 |