



## Contact tracing checklist for care settings when a staff member or resident/tenant/client is COVID-19 positive

### Key actions

- All cases (confirmed or not) should immediately self-isolate for at least 10 days
- For every confirmed case – resident/tenant/client or staff – the care setting must carry out contact tracing
- The care setting should tell people who they identify as close contacts within their setting to self-isolate

### Areas of consideration

**A person who has symptoms or tests positive is termed a “case”.**  
**A “confirmed case” is one who tests positive (LFD or PCR)**

**It is the responsibility of the care setting to identify close contacts of every case within that care setting and instruct them to self-isolate (where relevant).** Contacts of staff or residents members outside of the care setting e.g. household or social contacts are identified and advised by the National Test and Trace system (NTAT).

Before asking each case about their close contacts, you should tell the case that the information provided will be kept in strict confidence. What is told will only be used to support the public health and care setting response to coronavirus.

**Day 0 is the date that symptoms started (or if no symptoms, then the date of test).**

**The INFECTIOUS PERIOD is from 2 days before day 0, up to and including 10 days afterwards (extended to 14 days for all residents and for staff who are hospitalised).**

**Cases should self-isolate for the entire infectious period i.e. at least 10 days (14 days if hospitalized).** Cases can stop self-isolation if either i) they do not have any symptoms or ii) if they just have a cough or changes to sense of smell or taste – these can last weeks after the infection has gone

**Contact tracing is necessary for every confirmed case** (by LFD or PCR test). All cases and their close contacts should self-isolate for 10 days, unless they are exempt and only after mitigations for staff (see below).

All close contacts are advised to get a PCR test. If they are not exempt from self-isolation, they must still complete their 10-day self-isolation period, even if they get a negative test result. This is because they may be incubating the virus, but it cannot yet be detected by a test, so they could unknowingly spread the virus if they leave the house

**If a close contact develops symptoms, then they should get tested** - staff through the online portal [Coronavirus \(COVID-19\): getting tested](#) or dial 119, residents through the Health Protection Team 0300 303 8162

### Exemptions from self-isolation for staff who are contacts of a confirmed case

See [COVID-19: management of staff and exposed patients or residents in health and social care settings](#)

Identifying contacts of cases can sometimes be challenging, the Health Protection Team are available to discuss any aspects of this process.

Remember that if you have two or more cases, then you may have an outbreak and you should contact the Health Protection Team 0300 303 8162 or [swhpt@phe.gov.uk](mailto:swhpt@phe.gov.uk)



#### Who are the close contacts of a staff case?

If social distancing was maintained (as defined below in the definition of a close contact) and/or PPE was worn appropriately WITHIN THE CARE SETTING, staff will not be considered as a contact for the purposes of contact tracing and isolation as long as staff have been supplied with the correct PPE, are trained and are adhering to the correct use of PPE (donning and doffing).

- Each case should be sensitively questioned by a member of the management team as to whether there were any breaches in the use of their PPE during their infectious period.
- Specifically ask about car shares, kitchens, meal areas, staff rooms, other communal areas, break times, smoking shelters, shared kettles, crockery etc
- See PHE/DHSC guidance [COVID-19: how to work safely in domiciliary care in England](#); [COVID-19: guidance for supported living](#)

The use of face masks and other forms of PPE does not exclude somebody from being considered a close contact unless they are providing direct care to patients or residents in a health or care setting e.g. in a vehicle, or in a staffroom, or smoking outside during breaks. Here, the likelihood of a breach in infection control or social distancing is much higher. Therefore, a cautious approach should be taken to exclude staff contacts from work in these scenarios.

#### Definition of a close contact:

- Have had face-to-face contact with a case less than 1 metre away e.g. talking, being coughed on
- Have been within one metre of a case for one minute or longer without face to face contact
- Have been within 2 metres of a case for more than 15 minutes (either as a one-off or added up together over one day)
- Have travelled in the same vehicle as a case

The manager's priority is to seek people who are close contacts within that setting and instruct them to self-isolate, in order to help prevent the spread of the virus within the care setting.

NHS T&T have responsibility for tracing and informing close contacts outside of that care setting.

#### Exemptions from self-isolation for residents/clients/tenants and visitors who are close contacts of a confirmed case

Residents/Clients/Tenants will not need to self-isolate if any of the following apply:

- They are fully vaccinated – this means 14 days have passed since the final dose of a COVID-19 vaccine given by the NHS
- They are not able to get vaccinated for medical reasons

Even if they do not have symptoms, they should still:

- get a [PCR test on GOV.UK](#) to check if you have COVID-19
- follow advice on [how to avoid catching and spreading COVID-19](#)
- consider limiting contact with [people who are at higher risk from COVID-19](#)



### Who are the close contacts of a resident/client/tenant case?

The following definitions should be used to identify close contacts of a resident case

- Live in the same unit/floor as a confirmed or possible case (e.g. share the same communal areas) **or**
- Have had face-to-face contact with a case less than 1 metre away e.g. talking, being coughed on
- Have been within one metre of a case for one minute or longer without face to face contact
- Have been within 2 metres of a case for more than 15 minutes (either as a one-off or added up together over one day)
- A staff contact would only need to self-isolate where/when there has been a breach in PPE or when the contact has occurred outside of that care setting (when the likelihood of a breach in IPC is much higher).

Unless they are exempt, close contacts should be isolated (or residents cohorted, if isolation not possible) with other similarly exposed residents who do not have COVID-19 symptoms **until 10 days after last exposure**.

If contacts develop symptoms they should get a [PCR test on GOV.UK](#) or dial 119

The manager's priority is to seek people who are close contacts within that setting and instruct them to self-isolate, in order to help prevent the spread of the virus within the care setting.

The T&T Complex Settings Helpline (set up Sept 21) traces close contacts of residents outside of that care setting Tel: 020 37436715

### Key Guidance to consider

- PHE [Stay at home: guidance for households with possible or confirmed coronavirus \(COVID-19\) infection](#)
- PHE [Guidance for contacts of people with confirmed coronavirus \(COVID-19\) infection who do not live with the person](#)
- PHE/DHSC [COVID-19: guidance for supported living](#)
- PHE [COVID-19: how to work safely in domiciliary care in England;](#)
- DHSC [NHS Test and Trace: how it works](#)
- DHSC [NHS Test and Trace in the workplace](#)
- PHE guidance [COVID-19: management of staff and exposed patients or residents in health and social care settings](#) which includes a section on [Risk assessment for staff exposures in the workplace](#)
- DHSC [Claiming financial support under the Test and Trace Support Payment scheme](#)

### Looking after your mental health while self-isolating

If the staff member is self-isolating or social distancing because of coronavirus (COVID-19), it is important they look after their mental health. The following links provide tips and advice to help.

<https://www.nhs.uk/oneyou/every-mind-matters/coronavirus-covid-19-staying-at-home-tips/>

<https://www.mentalhealthatwork.org.uk/toolkit/coronavirus-and-isolation-supporting-yourself-and-your-colleagues/>

<https://www.mind.org.uk/information-support/coronavirus/coronavirus-and-your-wellbeing/>

<https://youngminds.org.uk/blog/looking-after-your-mental-health-while-self-isolating/>



For use by care setting as needed

Name of case:

Place of work (staff member) or location (resident):

Role within care setting:

Day 0 ie. date of symptom onset/positive test result if asymptomatic (dd/mm/yy):

Date of return to work for staff or end of self-isolation for resident (if well) i.e. Day 11 (dd/mm/yy):

Name of Contact	Date of first vaccination	Date of second vaccination	Date of exposure	Brief detail of exposure	Date contact has been told to self-isolate and by whom	Date of expected return to normal activities/workplace.