

# POLICY INTERIM ARRANGEMENTS - Coronavirus (COVID-19)



Blood and Transplant

## Policy amendments agreed in Partnership

During the Covid-19 crisis we have prioritised our work and adapted our approach to enable us to prioritise business critical work and help support our front-line services. We have therefore agreed in partnership with our National trade union Officers from Unison, Unite, RCN, GMB & BMA to amend policies as necessary to enable alternative working procedures to help us all during the COVID-19 crisis. The amendments will then be taken down once Business as Usual is able to be resumed. Details are as below:

Policy	Relevant section & amendment agreed	Effective date	Agreement date	Review date/Take down date
<b>Leavers Policy</b>	<p>Additional process to meet NHS England and NHS Improvement guidance should NHSBT sadly experience death in service for colleagues. Updated the Death in Service Checklist to implement the following requirement within 24 hours of death:</p> <ul style="list-style-type: none"><li>• Any colleague death in an inpatient setting (irrespective of employer): to be reported by the organisation where the death occurred</li><li>• Any colleague death not in an inpatient setting: to be reported by their employing organisation</li></ul>	April 2020		

We will also provide the opportunity for the next of kin to give their consent to disclosing their details with the DHSC and ourselves to authorise communication with them. Once permission has been received, employers need to email the details to [covidnotify@dhsc.gov.uk](mailto:covidnotify@dhsc.gov.uk)

Process / Action

Email the following details to [england.HCWnotification@nhs.net](mailto:england.HCWnotification@nhs.net).

Field	Comments
Job Role / Title	From the patient record or ESR
Role of staff member	<ul style="list-style-type: none"> <li>• Directly patient-facing (e.g. nurses, doctors, allied health professionals, porters, etc.)</li> <li>• Non-patient facing but potentially at higher risk of exposure (e.g. domestic and laboratory staff)</li> <li>• Non-clinical (e.g. clerical, administrative, information technology, secretarial etc.)</li> </ul>
Date of Death	From the patient record or ESR
Employer	From the patient record or ESR
Place of Death	e.g. hospital / town
Gender	From the patient record or ESR
Age	From the patient record or ESR
Ethnicity	From the patient record or ESR
COVID-19 confirmed or suspected?	If test results not yet received but the patient had COVID-19 symptoms, please do not delay the notification but enter 'suspected'

For the purposes of this process, the following staff groups are in-scope:

- a) Health Care Workers who die in their employing NHS trust or NHS organisation including Community, Mental Health, Ambulance Services and Ministry of Justice establishment. A Health Care Worker is considered to be an individual who delivers health care services either directly or indirectly.
- b) Subcontracted staff working in Health Care Worker roles in their host organisation
- c) Volunteers working under a permissive contracted arrangement in an NHS organisation who were working during the COVID-19 phase.
- d) Health Care workers who die in another NHS trust but were declared as a Health Care Worker

	e) Health Care Workers in the four pillars of primary care including clinical and administrative staff f) Employees of NHS England and NHS Improvement, Public Health England, NHS Blood & Transplant, Health Education England, other ALBs and Executive Agencies, CCGs and CSUs.			
--	---	--	--	--