



ALDHAM PARISH COUNCIL

High Consequence Infectious Disease Policy

This policy was adopted by Aldham Parish Council under delegated authority on 19th March 2020,

1. Introduction

- 1.1. Aldham Parish Council actively seeks to protect the Councillors, Volunteers and Staff working for and on behalf of the council and its activities. As such and following any current Public Health England (PHE) and government guidelines, the following policy applies to any High Consequence Infectious Disease (HCID) as defined by PHE.
- 1.2. This policy sets out the general principles and approach that the Parish Council will follow in respect of and HCID outbreak in the United Kingdom with an imminent threat of infection in the Parish of Aldham.

2. Scope of the policy

- 2.1. The main areas of concern for Aldham Parish Council with respect to HCIDs are:
 - Remaining an effective council.
 - Safety & Health of Councillors, Contractors, Staff, Volunteers and Members of Public.

3. Activation of the policy

- 3.1. This policy is considered to be activated, when
 - There is an active outbreak of a HCID in the United Kingdom with an imminent threat of infection in the Parish of Aldham **and**
 - At least 3 councillors have requested its activation to the Chairman, and subsequently notified the clerk, or the Chairman plus 2 councillors have requested its activation to the Clerk, or its activation is resolved in a meeting of the Aldham Parish Council.

OR

- The government of the United Kingdom suspends all public meetings.

4. Deactivation of the policy

- 4.1. This policy is considered to be deactivated, when
 - When the imminent threat of infection in the Parish of Aldham has passed **and**
 - A minimum of 4 councillors have requested public meetings be recommended **and**
 - The government of the United Kingdom as reinstated all public meetings.

5. Definition of High Consequence Infectious Disease

- 5.1. A HCID is defined as
 - acute infectious disease
 - typically has a high case-fatality rate
 - may not have effective prophylaxis or treatment
 - often difficult to recognise and detect rapidly



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- ability to spread in the community and within healthcare settings
- requires an enhanced individual, population and system response to ensure it is managed effectively, efficiently and safely

Please see Appendix 1 attached. At any such time as a new disease is classified as a HCID, it shall be treated as if it were in the list and this policy shall apply.

6. Matters relating to staff

- 6.1. Aldham Parish Council has no official offices, as such the employee, the Clerk, works from home. The public may only visit the Clerk by appointment. During any active outbreak of a HCID in the UK, no appointments will be permitted. The Clerk will not come into contact with the public during working hours, at their 1st normal place of work.
- 6.2. The village hall, or any other public location used for Parish Council meetings is the 2nd normal place of work for the Clerk. This is dealt with in Section 7.
- 6.3. In the event of a HCID outbreak the National Joint Council for local government services (NJC) will issue guidance for employers, which the council will follow. A summary of the most recent guidance during the COVID-19 outbreak of 2020 is detailed below:
 - 6.3.1. Employees who are sick or unfit for work need to focus on their recovery.
 - 6.3.2. As per Part 2 Para 10.9 of the 'Green Book', if an employee is fit for work but decides, or is instructed, to self-isolate, their absence should not be recorded as sickness absence. We would expect all options for home or remote working to be explored with the employee. As they are 'well' at this stage they should stay on normal full pay for the duration of the self-isolation period until such time as they are confirmed to have contracted any such HCID, at which point they transfer to sickness absence leave and the usual provisions of the sickness scheme will apply.
 - 6.3.3. In circumstances where an employee decides to self-isolate without instruction from the authorities it is not unreasonable for the employer to ask for some evidence such as an email from a holiday operator that shows the dates of the holiday, the resort location and flight details. However, it will probably not be possible in all cases for an employee to produce any evidence, so employers will need to use their discretion when trying to establish the facts behind the employee's decision to self-isolate.
 - 6.3.4. If an employee is caring for someone who has or may have coronavirus, this period of absence should also be regarded as self-isolation. Given the employee may then have been in direct contact with the virus we would expect only working from home arrangements to be then considered for the duration of the incubation period. Employers should keep in touch to support employees.
 - 6.3.5. Following any school closures, employers should be fully supportive of employees with childcare responsibilities and consider flexible working arrangements, including adapting working patterns to care for children or dependants or taking time off, whether this is special leave, annual leave or flexible working.



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7. Public Meetings

- 7.1. It is a requirement of the Local Government Act 1972, that council business shall be conducted at public meetings of the council and any committees.
- 7.2. Councillors and other Volunteers can choose to not attend public meetings. As an officer of the council, the Clerk cannot choose to not attend meetings.
- 7.3. Due to the nature of local government and considering the Councillors and Members of Public whom attend meetings, there is high percentage of attendees whom would be considered “high risk” with respect to all of the HCIDs listed. As such, to protect the health of all attendees, public meetings are suspended during the active period of this policy.

8. Delegated Authority

- 8.1. To allow the council to operate on a minimum requirement basis, the following items are delegated to the Clerk for the duration of the activation of this policy.
 - 8.1.1. Planning applications, after consultation with a minimum of 4 councillors, a summary response will be circulated to all councillors for comment prior to submission to Colchester Borough Council by the Clerk.
 - 8.1.2. Finance
 - 8.1.2.1. all standard recurring payments listed as line items on the budget will be paid by the Clerk and designated authoriser at the appropriate time to prevent any late charges, such as salaries, printing costs, dog waste, licences and IT services etc.
 - 8.1.2.2. All payments will be formally authorised by the full council at the next full council meeting.
 - 8.1.2.3. Where this policy is activated over the end of the financial year, the Clerk/RFO will prepare the end of year accounts in accordance with normal procedures. The accounts will be signed by the RFO, Clerk and Chairman as applicable for submission to the internal auditors.
 - 8.1.3. Responses to other communications. The Clerk will circulate at the earliest opportunity, any communication from any 3rd Parties, which would normally be presented at a meeting for consideration by the council. The clerk will circulate the summary response to the full council prior to responding to the 3rd Party.
 - 8.1.4. In accordance with LGA 1972, where this policy is activated during a meeting of the council the meeting will be adjourned. Using the delegated authority as detailed in 8.1.1 to 8.1.3, the Clerk will endeavour to close out as much of the remaining agenda, the results of which will be reported to the council after the adjournment when the rest of the agenda is considered.

9. Review of the policy

- 9.1. This policy was approved by the Parish Council under delegated authority on 19th March 2020 and will be reviewed every 5 years.



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Appendix 1 - Current List of HCID as defined by www.gov.uk on 11th March 2020

Contact HCID	Airborne HCID
Argentine haemorrhagic fever (Junin virus)	Andes virus infection (hantavirus)
Bolivian haemorrhagic fever (Machupo virus)	Avian influenza A H7N9 and H5N1
Crimean Congo haemorrhagic fever (CCHF)	Avian influenza A H5N6 and H7N7
Ebola virus disease (EVD)	Middle East respiratory syndrome (MERS)
Lassa fever	Monkeypox
Lujo virus disease	Nipah virus infection
Marburg virus disease (MVD)	Pneumonic plague (Yersinia pestis)
Severe fever with thrombocytopenia syndrome (SFTS)	Severe acute respiratory syndrome (SARS)*
	Coronavirus disease (COVID-19)