

**Coronavirus information exchange for GWSF members**

Update 3, 18/3/20

General HA plans for dealing with CV are probably looking quite similar now, so in this and future updates we’ll move to focusing mainly on specific issues that members have raised.

**Emergency repairs**

GWSF received this really helpful email from a HA director yesterday:

My neighbour is a consultant at Wishaw General and is involved in the management of coronavirus patients at the hospital.  I asked his advice on what we need do if we have to send one of our employees in to a property to do an emergency repair where one of the householders has the virus.  His advice is as follows:-

'The person with the virus should have not have occupied the room where the repair is to be carried out for at least half an hour before the arrival of the contractor (which isn’t really possible in an emergency repair).  The person should not come into contact with the contractor – so the person should leave the door unlocked and the contractor enter and shout to confirm his arrival, and the person should remain in a separate room until the contractor leaves, if that is not possible, the person should stay a minimum of 2m from the contractor.  The contractor should wear a FFP3 mask, disposable gloves, disposable overall and overshoe covers (all of which should be disposed of safely after they leave the premises).

Re the contractor, it is preferable that they be under 45 years of age.  They must not have any underlying health issues, like high blood pressure, cardiac issues, or respiratory problems – and must not go in if they have asthma.  [We may not be compliant with the below 45 (which is taken because the mortality rate increases for over 45s) but it is more important that the contractor is fit and healthy rather than being less than 45.]

If the above is adhered to, there is low risk to the contractor.  There is also no need for any contractor who has done such repairs to self-isolate; they should only self-isolate if they show symptoms (which is the same for us all).'

I have found it difficult to get guidance on this so I have had to turn to someone who is not in the H&S profession but faces coronavirus on an hourly basis.  That may be of some help to some.

Another member reports: ‘Procuring masks is a problem, NHS not being helpful last week. We have housing alarm first responder staff. **Any possible supply sources for masks would be greatly appreciated**’.

**Preparing for schools closing**

From one HA: ‘One thing we are planning for however if school closure and we are in discussion with staff around the impact that might have one their working day.  We have pretty much ripped up the Flexi/Core hours policy for the time being, and will be working with staff on working round their availability, particularly when schools close – for example, we may have an employee who can work on a Saturday and Sunday, instead of the usual core hours.  For me, flexibility is key to getting us through this!  We have also prepared a remote working matrix for each job role, this allows me to understand the limitations on each post if we need to move to a fully remote working arrangement.’

**Managing the shift towards home working**

From one HA’s internal staff update 17/3/20: ‘The office is going to remain open for now as a workplace, but we are now going to **require** some home/remote working across the staff team.  This will help ensure that at any given point the larger part of the staff team is working remotely rather than from the office.  We are going to start this today and roll it out over the next couple of days to make sure everyone can get access.  By Friday we are aiming to have identified the ”shift pattern” to best rotate staff between home and office working.’

Another example from this morning (18/3): ‘We are going to be discussing the potential closure of our office this afternoon. This will include discussion of whether we have a skeleton staff in the office or not. The Board meeting we were scheduled to hold this evening (that the report was written for) has been cancelled due to government advice on social distancing. We are hoping to rearrange the meeting for next Wednesday remotely, either by video conference or telephone conference.’

**Housing homeless households**

Things are very fluid around this issue at present, but just to highlight that one of our members (in Glasgow) has advised that if they have a void which can’t be re-let in the usual way, they’ll see if the council can use it as leased temporary accommodation, given the crisis any council will be facing if normal Section 5 lets aren’t possible. It’s probable that a lot of co-ordination would be needed, mainly on the council’s part, to ensure gas supply/account issues are dealt with and at least minimal furniture and white goods provided, but the intentions are obviously good here.

Needless to say, any such decisions are for individual HAs to make in conjunction with their local authority. We’ll aim to provide updates on this as and when things develop.

**Example of HA Business Continuity Plan**

We know other HAs will have similar plans, but thanks to Southside HA for sharing this one.

**Southside Housing Association Coronavirus Business Continuity Plan**

**Updated March 17 2020**

The following sets the measures the Association has put or is putting in place to respond to the disruption or threat of disruption from the current pandemic. The Associations aim is to try and minimise disruption to customers and to maintain key services i.e. all safety services, urgent and emergency repairs, welfare rights advice, etc.

1. **Risks of service disruption – SHA Staff**

Reducing the risk of illness amongst staff by

* + - Promoting increased awareness of personal cleaning regimes and circulating the most current advice and information from Scottish Government, UK Government, NHS Scotland and partner organisations e.g. EVH.
		- Following the most current government and NHS advice and carrying out proportionate risk assessment of practises.
		- Identifying staff with specific health or other vulnerabilities and developing individual action plans for these staff,
		- Reducing workplace risks by supplying sanitisers units, paper tissues, disinfectant wipes, enhanced office cleaning, upgrading dishwashers, etc.,
		- Removing workplace risks such as provision of open food, catering, etc.,
		- Promoting opportunities for home or remote working and reducing travel to work risks.

**If we have significant illness and absence amongst SHA staff**

* We will continue to prioritise service delivery but we may need to concentrate on critical services e.g. emergency repairs, resident safety, etc.,
* We will shut sub-offices and concentrate resources at our main office, (Update – with effect from 17th March 2020 the Association’s office on Shields Road will be shut)
* We may need to re-allocate staff to business critical roles and reduce the levels of service,
* We will close the offices to the public and concentrate on communication through phone, email and social media. (Update – with effect from 17th March 2020 all offices are closed to the public).
* We will rely on home working and ensure staff have software and hardware support to work remotely. (Update – we expect to have all staff working remotely from 20th March 2020)
1. **Risks of Service Disruption –SHA Suppliers/Contractors**

We will minimise the risk of service disruption by

* + Seeking business continuity plans from all key suppliers/contractors, and sharing SHA’s business continuity plans
	+ Working with suppliers/contractors to prioritise services i.e. emergency repairs, tenant safety services etc.,
	+ Working with contractors/suppliers to identify risks to their workforces from customers who are infected and/or self-isolating,
	+ Maintaining real time communication with contractors/suppliers, even if offices are shut, through enhanced provision for remote working. (Normal phone contact will be maintained from 17th March despite the shift to remote working.)
	+ Maintaining a staff presence at our main office to support contractors with access to keys, common areas etc.
	+ Maintain a Finance function throughout the crisis to ensure payments to suppliers are processed timeously.
1. **Risks of Service Disruption – SHA Customers**

We will minimise the risk of service disruption from illness in the community by

* + Communicating directly with customers about any changes to working arrangements i.e. limitations to and/or prioritisation of services, changes to office access arrangements etc.
	+ Maintaining key services throughout the crisis.
	+ Asking customers to help us manage the risks by early advice on cases of illness or self- isolation to allow us to prepare contractors and SHA staff,
	+ Identification of vulnerability or isolation amongst customers
	+ Working with statutory and voluntary sector partners, suppliers and contractors to ensure support and services are continued to be delivered to those in greatest need.

**Last Updated – 2.00pm, 17th March 2020**