

FRAMEWORK FOR THE MANAGEMENT OF NOTIFIABLE COMMUNICABLE DISEASES AND OTHER WIDESPREAD INFECTIONS

Introduction

1. This framework aims to provide a framework for the cohesive and sensitive handling of all issues relating to the outbreak of a notifiable communicable disease as determined by Public Health England (PHE) or other widespread infection affecting the University.
2. By law, certain diseases are “notifiable” because of the potential for the transmission of serious disease to others, and a full list can be found in Appendix D.
3. This framework outlines both how the University will support its staff and students but also the supportive role we play to the local health services in the discharge of their responsibilities.
4. All staff and students are expected to take responsibility for the health and safety of themselves and for other persons who may be affected by their acts or omissions and to follow the University’s instructions on Health and Safety. This is consistent with [Individuals’ H&S Roles and Responsibilities](#) which applies to all staff and students.
5. This document is not intended to act as a guide to a diagnosis or necessary periods of exclusion – such decisions should only be made by an appropriately qualified medical health practitioner. This framework sets out the actions to be taken by University staff managing an incidence of disease such as meningitis.
6. This framework may also need to be read in conjunction with the University’s Business Continuity procedures and its Emergency Communications Plan relating to major incidents occurring within the University community.
7. The action that will be taken by the University in the event of a pandemic is set out in appendix E.
8. Following the guidelines and processes in this framework at what can be a difficult time, minimises the distress of those involved and helps the key staff involved understand and feel supported in delivering their responsibilities.

The University’s Duty

9. The University’s policy in respect of communicable diseases is to respond promptly in an

appropriate, effective and efficient way which at all times keeps sensitivities and the need to support staff and the student body at the forefront of our minds. Whilst every communicable disease is different, many such as meningitis or SARS (Severe Acute Respiratory Syndrome), whilst being infrequent, can have potentially serious consequences.

10. The University sees its duty as being prepared to help the authorities:
- Minimise the number of incidents
 - Reduce the severity of their impact
 - Minimise spread
 - Support the individual, staff and student body

Scope and Responsibilities

11. Occurrences and outbreaks of notifiable diseases and other widespread infections are most prevalent and likely in the student community due in part to the close proximity of living and working together. However, the scope of this framework applies to all staff employed by the University of Suffolk and students of the University.

12. Responsibility for managing outbreaks of diseases within the University of Suffolk partner institutions rests with the respective College Principal, Chief Executive Officer or equivalent who will ensure the Vice-Chancellor and Academic Registrar are informed of the situation immediately it is notified.

13. The organisation Public Health England (PHE) has overall responsibility for the management of suspected or confirmed cases of infectious diseases; the local branch of this organisation is the PHE East of England Health Protection Team. When students or staff fall ill, the University will only be contacted if it is required to take action.

14. Depending on the circumstances, responding to a communicable disease could involve colleagues from across every department within the University. It is the responsibility therefore of all members of staff to familiarise themselves with its scope and procedures and identify the individuals who have roles to play in responding to communicable diseases. See Appendix C for an outline of the responsibilities for key members of staff.

Definitions

15. Communicable Disease:

Any disease that is transmissible by infection or contagion directly or through the agency of a vector. A disease with significant public health implications, typically a highly infectious disease,

for which the diagnosing clinician has a statutory responsibility to notify e.g. the local consultant in Communicable Diseases (CCDC).

16. Outbreak:

An outbreak or incident may be defined as:

- An incident in which two or more people experiencing similar illness are linked in time or place
- A greater than expected rate of infection compared with the usual background rate for the place and time where the outbreak has occurred

Communicable (Infectious) Diseases

17. These are caused by organisms such as bacteria, viruses, fungi and parasites.

18. Infectious diseases are transmitted by various routes and have varying degrees of infectivity.

19. Immunisation programmes are available for many diseases, acting as a preventative measure. However, there are some diseases for which there are no vaccinations and others where there are gaps in the vaccination programmes, for a variety of reasons that leave groups of people vulnerable.

20. Meningitis ACWY vaccine was made available to young people and new university students in the UK in 2015. It provides good protection against serious infections caused by four different meningococcal groups the A, C, W and Y including meningitis and septicaemia. All students enrolling at the University of Suffolk are encouraged to request this vaccination from their local GP surgery prior to starting their course and moving into residences. If they have not done this at the start of their course they are encouraged to register with a GP locally to receive this vaccine as early as possible.

Further information is available at: <https://www.gov.uk/government/organisations/public-health-england>

Measles, Mumps and Rubella

21. There have been documented outbreaks, particularly of mumps in universities, particularly in students who have not been previously immunised for measles, mumps and rubella.

22. Information on the NHS Choices website recommends the receipt of 2 doses of MMR vaccine within the childhood vaccination schedule. If students coming to University have not had

both of these doses of vaccine, it is recommended that they see their GP surgery to receive this vaccination. It can be administered at the same time as Meningitis ACWY.

23. It is better to be immunised **before** arrival (because of the risk of transmission during events at the start of term) but it is also possible to have the vaccine later.

Notifiable Communicable Diseases

24. Under the Public Health (Control of Disease) Act 1984 and the Health Protection (Notification) Regulations 2010, responsibility for notifying the diagnosis or suspected diagnosis of a notifiable communicable disease rests with the medical practitioner attending the patient and making the diagnosis. The medical practitioner will notify the PHE East of England Health Protection Team.

25. Once the PHE East of England Health Protection Team have confirmed a 'case' they will take a decision on the approach to be taken in regard to 'contacts'. In many cases 'at risk' contacts are defined by PHE as those who have had 'close contact' with an infected individual i.e. family members, close friends, partners or co-habitees, but this assessment will be made by the East of England Health Protection Team.

26. If the PHE East of England Health Protection Team determines that members of the University community can be classified as 'close contacts' they will notify the University and provide advice and guidance on what action, if any, to take.

27. PHE East of England Health Protection Team in consultation with PHE will assume full control over the medical aspects of managing cases of notifiable disease and its consequences. This is a statutory obligation and the actions of the University will be as directed by the PHE East of England Health Protection Team.

Protocol

28. There are a number of ways the University might become aware of a student or member of staff suffering from a communicable disease. The needs and requirements will differ depending on the individual student or staff member and the disease with which they have been diagnosed; as such the University needs to respond in a different way to every incident of a communicable disease.

29. Where a doctor diagnoses or suspects an infectious or communicable (notifiable) disease they are legally responsible for notifying PHE East of England Health Protection Team or if the

case relates to food poisoning, to the local Environmental Health Officer (EHO). A full list of notifiable diseases is shown in Appendix D.

30. PHE East of England Health Protection Team should then contact the University to ensure that the appropriate care, including follow up contact is delivered to any staff or students and any infectious disease is properly managed. This can include a request from East of England HPT in the conducting of a risk assessment to establish the potential for infection transmission on University premises e.g. in a case of TB, the lecture room used and student groups associated with the index case, proximity and interface etc. This would help to inform the level of follow up needed for contacts.

31. If a member of staff or student has any concern about the management of a particular illness, or it becomes known that a member of staff or student within the University is suffering from (suspected or diagnosed) any of the diseases outlined in Appendix D the key actions in Appendix B must be followed.

Confidentiality

32. The University is bound by an individuals' right to confidentiality concerning any medical condition. Staff will be sensitive to this and to an individual's right to privacy. The number of people who are made aware of a person's medical condition will be limited to those who need to know in order to ensure the proper care of the individual and appropriate management of the situation.

The University's Response

33. Following confirmation or a strong probability that a University of Suffolk student or staff member has a communicable disease, the Academic Registrar (Students) and/or the Director of People and Organisational Development (Staff) alongside the Health & Safety team have responsibility for ensuring that the University's response is effectively coordinated, keeping key members of staff informed as appropriate.

34. Where the risks escalate with the danger of an outbreak occurring involving more than one or two students/staff, the Academic Registrar or Director of People and Organisational Development will call a meeting of the Serious Incident Group (SIG) to manage the University's response. In some instances, this group may have to consider the death of a student from the disease under consideration and in which case, the meeting of the SIG will need to take account of both this framework and the University's Death of a Student Procedure.

35. The membership of the SIG will vary according to the circumstances, but its core

membership is likely to be selected from:

- Chief Operating Officer
- Academic Registrar
- Director of People and Organisational Development
- Director of External Relations
- Director or Head of Estates
- Deputy Academic Registrar (Registry Services)
- Head of Student Services
- Health and Safety Manager
- Dean or Associate Dean of School
- SU Representative

36. The issues to be considered by the SIG in managing the University's operational response to a communicable disease or widespread infection will vary according to the circumstances, but are likely to include:

- **Identification of suspected cases**

The SIG will ensure that all students and staff have clear instructions on how to seek medical attention if they feel ill and have the symptoms of the disease concerned. If approached by an ill student, staff are expected to follow the procedures outlined in this framework.

- **Supporting containment**

The University will support the PHE in containing the disease through the work of the SIG. The Academic Registrar (for students) or the Director of People and Organisational Development (for staff) supported by the Health and Safety Manager are expected to provide information to PHE as a matter of urgency when requested.

- **Managing Stakeholders**

The SIG will monitor and contribute to internal and external communication plans. It is the responsibility of staff to communicate the information provided by the SIG, treating any requests to do so as a matter of priority.

- **Raising awareness**

The SIG will ensure that all students and staff have access to clear and unambiguous information on how to recognise the signs and symptoms of the disease which has broken out. Information will be disseminated through the University's website, MySuffolk, social media channels and direct emails as appropriate. General information on the University's response to communicable

diseases will be included in induction material provided to students when they begin their course of study and this includes how to seek medical attention immediately if they begin to display any symptoms and reference to the Meningitis ACWY vaccine.

- **Business Continuity**

The SIG will consider issues of business continuity including, as appropriate, maintaining services to students through a serious incident and reviewing the short and medium-term impact of any disruption to University business.

Disease Management – Exclusions from University premises or student accommodation

37. Exclusion of staff or students with certain infectious diseases may sometimes be necessary. A qualified medical practitioner or hospital will advise the key institutional contact on this matter (the Academic Registrar in the case of students and the Director of People and Organisational Development for staff). In some instances, a note from the person's medical practitioner should be presented indicating that the member of staff or student is no longer infectious or never were infectious (false alarm) and is fit to return to studies/accommodation/work/other University duties. In some cases, it may be necessary to inform the management of third party student accommodation, so that they can take appropriate action as advised by health professionals.

Disease Management – Reducing the risk of contracting and transmitting disease

38. Students or members of staff intending to travel abroad, whether or not on University business, are advised to check the following travel health website for general information regarding overseas travel and health issues <http://www.fitfortravel.nhs.uk/home.aspx>.

It is also recommended that students or members of staff:

- a) arrange a travel health appointment with their GP surgery or travel health clinic 6-8 weeks prior to travel;
- b) take the precautions and/or preventative measures that are advised or required;
- c) take medical advice on return to the UK in respect of any medical condition contracted whilst abroad, or caught from someone who has travelled but is in the UK ensuring the doctor is fully informed; and
- d) check the Department of Health website www.gov.uk for the latest travel advice.

APPENDIX A: Meningitis

Managing Meningitis

Meningitis remains one of the major infectious and notifiable diseases that affect University communities.

What is Meningitis?

Meningitis can be caused by viruses or bacteria. Viral meningitis is usually mild, occurring mainly in children. It is a rare complication of common infections. As a result, viral meningitis is not a separate infectious disease.

Bacterial meningitis is a potentially fatal bacterial infection that causes inflammation of the lining of the brain and spinal cord. The common ones in this country are meningococcus groups B and C. There is now an effective vaccine against the C strain, which is available to all babies and teenagers. Note that this provides no protection against the B strains of the infection. Many people (10-15% of the population) carry meningococcal bacteria at the back of the throat without any ill effects. In rare cases, meningococci overcome the body's natural defences and causes serious disease including meningitis (infection of the lining of the brain) and septicaemia (infection of the bloodstream). From 2015, PHE are also urging young people starting University to get a vaccine known as Meningitis ACWY against meningitis W which protects against the A, C, W and Y strains of the disease.

Risk of Infection

Meningococcal carriage rates in the 15-19 year old age group are 25% higher than in the rest of the population. The risk of meningococcal infection is higher among first year undergraduate students, particularly those in residential accommodation, because of exposure to meningococcal strains which they have not encountered before.

It is very unusual for more than one case of meningitis, suspected or confirmed, to arise at one time and only those who are very close contacts of the affected person are at any increased risk of developing the disease. Close contacts are those who, in the seven days before the person became ill:

- Have spent at least one night in the same house
- Have been a kissing contact with saliva exchange

Awareness Raising

Information about meningitis and the availability of the vaccine against meningitis ACWY is available to students in the student area of MySuffolk, to applicants in the Applicant area, and is included within Induction for new students.

Case Definitions

Health professionals distinguish between confirmed cases of meningitis (those with a clinical diagnosis), probable cases (where a clinician considers meningitis is the most likely diagnosis), and possible cases (where the clinician considers meningitis is one of a range of diagnoses).

In the event of a probable case of meningitis, the University has three priorities:

- To work with PHE East of England Health Protection Team to prevent the spread of the infection;
- To support students, their families and friends, and staff during a potentially difficult time; and
- To maintain the University's reputation through effective communication.

Two or more confirmed cases of Meningitis

PHE East of England Health Protection Team will take the lead responsibility for managing the outbreak. The University's SIG will be convened to manage the situation. Specific issues which the SIG may have to consider include:

- Internal communications strategies
- Public relation strategies
- Establishment of a telephone helpline
- Student and Staff welfare and counselling.

APPENDIX B: Key actions in cases of suspected, possible, probable or confirmed communicable diseases (including meningitis)

Note: In addition to the following, the action plan in Appendix E (Pandemic Guidelines) also offers useful guidance on issues to be considered in all circumstances.

Action	Lead Responsibility
Strongly encourage anyone showing symptoms of infectious diseases (including suspected cases of meningitis) to visit or ring their GP immediately or telephone the NHS 111 service. (This service should be used if someone needs urgent medical assistance but it is not a life threatening situation.)	All staff and any student becoming aware
Report the matter to the Health & Safety Manager and the Academic Registrar. Out of hours' telephone details are held with the Security team. Any member of staff being made aware of a case of a communicable disease shall confirm source and gather all possible information on the patient.	Member of staff hearing about the case
Notify PHE East of England Health Protection Team to seek and receive direction and advice on actions to be taken in respect of the University community ¹ .	Health & Safety Manager with the Academic Registrar (Students) / Director of People and Organisational Development (Staff)

¹ GPs, qualified medical practitioners and hospitals are responsible for notifying PHE East of England Health Protection Team of notifiable diseases. However, the University of Suffolk will seek to contact PHE East of England Health Protection Team in order to open channels of communication.

<p>Meeting of SIG (key staff) to be convened including: Chief Operating Officer, Director of People and Organisational Development; Academic Registrar; Health and Safety Manager; Head of Student Services; Director of Estates; relevant local manager(s); Director of External Relations / press officer.</p> <p>A HPT representative may be invited to attend.</p>	<p>Academic Registrar (Student) or Director of People and Organisational Development (Staff) will communicate the advice from PHE East of England Health Protection Team to key staff and keep the Vice-Chancellor aware of the situation.</p>
<p>Identification of close contacts – it is for PHE East of England Health Protection Team to determine if this is necessary. The University will assist with this process if so guided.</p>	<p>PHE East of England Health Protection Team</p>
<p>Inform Deputy Vice-Chancellor and other Executive members</p>	<p>Director of People and Organisational Development/Academic Registrar (through the SIG)</p>
<p>Liaise with University of Suffolk Students' Union</p>	<p>Academic Registrar / Head of Student Services</p>
<p>Liaise with accommodation managers</p>	<p>Director of Estates / Academic Registrar / Head of Student Services</p>
<p>Prepare information for students and staff (to be authorised by the SIG/PHE East of England Health Protection Team)</p>	<p>Academic Registrar, Director of External Relations and the Health & Safety Manager (sample letters attached at Appendix G)</p>
<p>Prepare information for publication on MySuffolk (to be authorised by Director of People and Organisational Development and Academic Registrar through the SIG)</p>	<p>Director of External Relations supported by the Head of Student Services and Health & Safety Manager in consultation with SIG.</p>

<p>Prepare press statement <i>cc SIG and Business Continuity Group</i></p>	<p>Director of External Relations or nominee press officer, in consultation with PHE East of England Health Protection Team Media Team. No other person(s) are authorised.</p>
<p>Key members of staff to meet with affected staff and students to provide advice and support as required.</p>	<p>The relevant Dean of School, Head of Student Services and Health & Safety Manager.</p>

APPENDIX C: Summary of key roles and responsibilities

Role	Responsibilities
PHE East of England Health Protection Team	<ul style="list-style-type: none"> • To confirm diagnosis of the disease and to inform/update and advise the University as necessary. • To provide advice, support or direct management of the incident in collaboration with the University of Suffolk Executive, Academic Registrar and Director of People and Organisational Development.
Environmental Health Officer	<ul style="list-style-type: none"> • To provide advice, support or direct management during a case of food poisoning in collaboration with the University of Suffolk Executive, Academic Registrar and Director of People and Organisational Development.
Director of People and Organisational Development	<ul style="list-style-type: none"> • To provide a link with Heads of Departments/Schools, Executive Team, Joint Trade Unions and the Business Continuity Group. • To provide staff contact details and advise and support staff as necessary. • To assist in the identification of close staff contacts to the patient(s).
Academic Registrar	<ul style="list-style-type: none"> • To co-ordinate the response and instigate a meeting of the Serious Incident Group (SIG) if necessary. • To act as the University contact point for communications with PHE East of England Health Protection Team. • To provide support and assist PHE East of England Health Protection Team in disseminating advice and information to students (and staff) as required.
Senior Leadership Team	<ul style="list-style-type: none"> • To disseminate institutional information to their School/Directorate as informed by the SIG • To ensure that institutional decisions regarding the event are adhered to within their School/Directorate appraising the SIG specifically of decisions taken locally within the context of the School/Directorate • To implement their business continuity plan as required by the

	Executive and the SIG
Head of Student Services	<ul style="list-style-type: none"> • To initiate responses regarding chaplaincy, counselling and pastoral care and wellbeing services as required • Liaise with the Students' Union • If necessary, set up a helpline for students and parents
Deputy Academic Registrar (Registry Services)	<ul style="list-style-type: none"> • To contact next of kin when requested to do so by PHE East of England Health Protection Team, and to liaise with the relatives of the patient(s) • To provide student contact details as required • To liaise with the department(s) of students affected
Students' Union Representative	<ul style="list-style-type: none"> • To assist with dissemination of information to students.
Director of Estates / Health & Safety Manager	<ul style="list-style-type: none"> • To ensure that cleaning protocols are in place and that relevant staff are deployed to provide extra cleaning services if necessary. • To brief and equip staff to take protective measures. • To assist third party accommodation managers in the identification of close contacts of the patient and facilitate appropriate action as advised by PHE East of England Health Protection Team.
Health and Safety Team	<ul style="list-style-type: none"> • To assist in providing advice, information and support to staff as required. • Advising managers and staff on protective measures • In collaboration with PHE East of England Health Protection Team advise the University Executive through the SIG • Alert the Academic Registrar/Director of People and Organisational Development on any suspected, possible, probable or confirmed cases.

APPENDIX D: Notifiable diseases

The University of Suffolk will confirm with the PHE East of England Health Protection Team, that notification has been made, if it becomes aware of a confirmed diagnosis of any of the following diseases in a member of staff or student.

Notifiable diseases under the Health Protection (Notification) Regulations 2010:

- Acute encephalitis
- Acute meningitis
- Acute poliomyelitis
- Acute infectious hepatitis
- Anthrax
- Botulism
- Brucellosis
- Cholera
- Diphtheria
- Ebola Virus
- Enteric fever (typhoid or paratyphoid fever)
- Food poisoning
- Haemolytic uraemic syndrome (HUS)
- Infectious bloody diarrhoea
- Invasive group A streptococcal disease
- Legionnaires' Disease
- Leprosy
- Malaria
- Measles
- Meningococcal septicaemia
- Mumps
- Plague
- Rabies
- Rubella
- Severe Acute Respiratory (SARS)
- Scarlet fever
- Smallpox
- Tetanus
- Tuberculosis
- Typhus
- Viral haemorrhagic fever (VHF)
- Whooping cough
- Yellow fever

In the event of a pandemic of an infectious disease not listed above (such as coronavirus Covid-19), staff and students will be required to notify the University if they are being tested for an infection and the results of any such test.

APPENDIX E: Pandemic Guidelines and Action Plan

Introduction

The following guidelines and action plan are designed to enable the University to respond quickly and cope effectively in the event of a pandemic and should be applied in conjunction with the advice earlier within this Framework, the University's Business Continuity procedures and its Emergency Communications Plan. The objective is to co-ordinate the responses of all departments within the University in the event of a pandemic, and to ensure business critical functions are reinstated as soon as possible, while full restoration of all services is planned and implemented on a concurrent basis.

As a public health issue, the primary source of information on the pandemic will be Public Health England (PHE), and as such additional specific action may be taken in accordance with advice and guidance issued by PHE. The University of Suffolk will also take guidance from the PHE East of England Health Protection Team.

Current advice states that people should try to continue their everyday activities as normally as possible during a pandemic, whilst taking personal responsibility for reducing their risk to exposure to the disease and social responsibility to lessen the spread.

If a pandemic is imminent, the University will take the following actions:

- Remind staff and students about reducing the spread of infection and aspects of personal hygiene
- Prepare people to identify symptoms of the disease
- Ensure all contact details are up to date (staff and students)
- Agree a plan for communicating with local media and local schools
- Remind senior managers to report staff absences, including time off for short term care of family members and dependents
- Consider what reasonable steps the University can take to reduce risks to staff and students from infection whilst the campus is open, which may include:
 - Poster campaign advising coughing/sneezing etiquette, handwashing, disposal of tissues, etc.
 - Review of cleaning contracts and arrangements.

The decision to implement the action plan will be made by the Vice-Chancellor in liaison with the Executive, Academic Registrar and Director of People and Organisational Development.

Pandemic Risk Management

The most evident risk to be managed is the control of the spread of the disease amongst University students and staff, but there are several other consequential risks that need to be considered and managed, for example:

- Fuel shortages affecting travel to/from the University, deliveries to the University or waste collection from campus
- Failure in electricity, gas and/or water supply or communication links
- Inability of health services to deal with other non-priority illnesses or accidents, potentially affecting persons with other medical conditions
- Unauthorised absence from the University through fear of infection
- Unauthorised absence from the University through the need to care for family or friends infected
- Persons attending the University when knowingly or unknowingly infected
- Damage to reputation through the adverse publicity if the University is perceived as a source of an outbreak or for spreading the disease
- Loss of income if the University is unable to operate, courses are cancelled, staff or students leave or do not achieve, or if recruitment of students has to be deferred
- Critical systems failure if contractors are infected or refuse to attend campus
- Public disorder.

Managing the spread of disease

In accordance with guidance from PHE, the University will attempt to slow down the spread of the disease and reduce the number of people who may be infected using the following measures:

- Communication – regular communication with staff and students through all available channels
- Enhanced hygiene – including dissemination of good practice
- Staff and resource planning
- Quarantine/reduced contact.

Making the decision to stay open or to close

The Vice-Chancellor, in conjunction with the Executive and SLT will be responsible for decisions regarding keeping the University open, reducing operations or for agreeing closure, taking into account advice and guidance from PHE. The decision will be made in consultation with the Executive where possible, and the Chair of the Board will be notified of the proposed action.

When making a decision to close or reduce operations, the following will be considered:

- Closure status of local schools and colleges
- Minimum levels of staffing required to operate effectively
- Essential staff required to maintain operations.
- Lines of authority – determining who will take responsibility if the Vice-Chancellor and members of the Executive are ill
- The need to notify insurers
- Contact with unions and staff associations to agree plans and arrangements, including flexible working practices
- Ensuring suitably qualified staff are available to maintain operations
- Ensuring the most effective use of available delivery resources
- Prioritisation of provision for those due to undertake exams and assessments
- Consolidation of small groups and classes
- Rescheduling non-urgent provision
- Preparing contingency plans using study centres, coursework etc.
- Use of supply/agency staff (including lecturers)
- Availability of facilities staff/key holders to open/close buildings
- Maintenance of heating/building services if Estates and IT Services staff are absent
- The need for increased cleaning/infection control services
- Continued provision of catering services
- Continued provision of other services in respect of infection control/risks, e.g. first aid/fire and other emergency evacuation procedures
- Special additional considerations for staff and students with disabilities or learning difficulties
- Liaison with providers of accredited student accommodation
- Regular liaison with partner institutions.

Planning to close

When making the decision to close (noting that this may also be guided/determined by advice from PHE), the key issues to be considered are:

- Extent of closure (full or partial) and duration
- Number of students affected
- Message to be sent to accredited accommodation
- Communication with partner institutions.

If closure is necessary, the University will consider the options available for maintaining some level of services. This will include:

- Distance/open learning
- Use of MySuffolk and Brightspace
- Setting assignments and coursework.

Whilst wishing to continue to provide a service to students, advice to staff and students should recognise that learning may not happen as effectively whilst students or lecturers are ill.

How and when to re-open

If a pandemic occurs, there are likely to be several waves, possibly several months apart, which may lead to a risk of re-infection.

The decision to re-open will be taken by the Vice-Chancellor in consultation with the Executive and SLT. The decision to re-open will be based on advice on the phase of the pandemic from PHE and advice on pre-opening cleaning/preparations.

Once made, the decision to re-open will be communicated as widely as possible, including via the University's website, MySuffolk, email and other local media.

Responsibilities

All staff and students are expected to take responsibility for the health and safety of themselves and other persons who may be affected by their acts or omissions on campus and to follow the University's instructions on Health and Safety (see [Individuals' H&S Roles and Responsibilities](#)). This will include the instructions regarding actions to be taken in the event of a pandemic.

All staff have a responsibility, so far as is possible, to maintain contact with their line manager during the pandemic. All staff that deliver curriculum requiring students to use shared resources or involving significant hygiene considerations have a responsibility to ensure the good hygiene practices are followed at all times.

All students have a responsibility to check MySuffolk for the latest information about actions taken at the University regarding any possible pandemic. Students must also let the University know if they have a confirmed case by telephoning the Infozone.

The Infozone is responsible for notifying the Health and Safety Officer of any confirmed cases so that any potential outbreak can be tracked and the information used to plan the actions to be taken locally.

The Vice-Chancellor and Executive will be the ultimate decision-makers for the University during a pandemic and will liaise with the SLT and, where possible, notify the Board before taking a decision to close the campus.

The local management teams will be responsible for the continuing operation of their areas of responsibility so far as is practical and as directed by the Executive, including staff and student absence monitoring and reporting, staff rostering, arranging staff cover and the preparation and delivery of essential remote access learning materials.

Action Plan

The action plan is divided into the following phases, for which different strategies may apply:

- Early warning phase – steps taken when warning of the potential occurrence of a pandemic is received (World Health Organisation (WHO) levels 3-5)
- Trigger phase – the assessment, reporting and decision-making required in order to minimise risk and to maximise the effectiveness of the University's response to a pandemic. The University will enter this phase following confirmation of a pandemic (WHO level 6). Advice from PHE will be sought and followed, and as a result this phase of the action plan may be changed and revised at short notice.
- Control phase – steps taken to prevent the spread of the disease within the environment that the University is able to influence. Advice from PHE will be sought and followed, and as a result this phase of the action plan may be changed and revised at short notice.
- Recovery phase – steps taken in order to return to partial or full operations at the earliest safe time once the pandemic has been prevented from spreading. It is possible that some parts of the University may be in recovery phase whilst other parts are still in the control phase. It is also likely that until the all clear is given some actions in the control phase will continue during the recovery phase.
- Review phase – debriefing, analysis and evaluation of the plan after the pandemic.

Note: The action plan in Appendix B also offers useful guidance.

Action
Early Warning Phase
Prepare staff and students to identify symptoms of disease
Communicate contingency plan to the Vice-Chancellor, Executive, Board, Deans and Senior Managers
Prepare to communicate importance of hygiene measures to all staff and students through MySuffolk, and NHS posters displayed on campus regarding washing hands, coughs and sneezes.
Check that cleaning routines are fully completed, toilets etc. are continually provided with consumables, litter is collected and disposed of.
Obtain sufficient stocks of essential relevant cleaning materials likely to meet the demands of enhanced hygiene measures for the duration of the pandemic, including antibacterial wipes for communal telephones, keyboards, etc.
Upgrade the cleaning products to include antibacterial products in addition to standard materials.
Infozone/Reception team to be updated about key communication messages.
Managers to review their local business continuity plans.
Trigger phase
Communicate to all students via MySuffolk that the University is now in this phase and that students should report as absent if they suspect that they are suffering from symptoms of the disease. Key messages to be compiled and placed on MySuffolk.
Monitor and share communication regarding sickness absence levels between Human Resources and Executive
Monitor and share communication with Executive from relevant external bodies concerning action to be taken.
Communicate revised teaching and learning arrangements to students as a result of staff and resource planning via MySuffolk.
Check for each session that shared resources (e.g. PCs, telephones) are cleaned before and after use and hygiene practices are followed. This cleaning may have to be undertaken by users whether they are students or staff.
Issue essential cleaning materials to staff on request for their use to supplement normal University cleaning routines or to cover for cleaning staff absence.
Draw up staff rotas for the next four weeks to maintain essential services during the pandemic. If possible, split staffing into shifts to minimise the risk that all staff may be quarantined.

Encourage working from home if practical. Consider implications of unfamiliar tasks and lone working. Provide appropriate training to those covering roles and carry out risk assessments for these tasks. Consider implications on working hours and aim to maintain priorities, e.g. student doing or shortly doing exams.
Obtain essential stocks (such as catering supplies) to maintain essential services during the pandemic. Cautious use of supplies is to be carried out.
Make allowances for possible postage delays and notify by phone/email anyone who needs to know there may be a delay in outgoing post. Make additional use of BACS, credit cards, etc. for urgent payments.
Prepare teaching and learning materials for the next four weeks and wherever possible use Brightspace. Look at alternative teaching methods, handouts, increase remote access for computer services, increase provision for home working.
Cancel all group meetings for next four weeks.
Cancel all trips, residential visits, etc. for next four weeks due to staff shortage, lack of students, travel restrictions, avoidance or large gatherings, transport disruptions.
Consider support staff involved in personal care with students.
Liaise with work experience providers, give specific instructions to students where necessary, take advice from placement provider, students not to attend if risk too high. May prevent sending students into placement due to illness of if there are health concerns at the placement.
Check and if uncertain that adequate protective measures exist, cancel all offsite learning arrangements for the next four weeks.
Cancel all non-essential visitor invitations to campus including theatre productions, open events and enrolment for the next four weeks.
Control Phase
Communicate to all staff, students, clients and employers that the University is now in this phase and that students must report as absent if they suspect that they are suffering from symptoms of the disease or that they have been in contact with someone with the disease or symptoms of the disease.
Inform relevant external bodies, partner institutions etc. that the University is not in this phase.
Vice-Chancellor may decide to close all or part of the campus, based on events or external advice, in which case this decision will be communicated to all staff, students and contractors by email, the website, MySuffolk, phone and (for complete closure) on local radio stations.
There may be enforced closure of the University by government authorities, possibly for several weeks or months. Vice-Chancellor and Executive will maintain any permitted cover on site, facilitate home working, look at alternative teaching methods with IT Services to work with staff with regard to remote access and consider licensing implications.

Should there be a death of a member of staff, student or family member, be aware of emotional stress of bereavement. The University will be as sympathetic and helpful as possible, flexibly covering staff affected, help with arrangements as requested. University checklist to be followed.
Review Building Management System (BMS) protocols.
Provide effective hand wash and antibacterial hand rub in toilets, kitchen areas, building entrances.
Open rooms in good time and stagger visits to cafes etc, to prevent queues forming.
Students should report any disregard of hygiene measures immediately to staff. Staff to report via the FM Helpdesk.
Staff should treat any disregard of hygiene measures as a disciplinary issue that can lead to immediate suspension or expulsion.
Staff and students should clean essential facilities daily that have not been cleaned due to shortage of University cleaning staff, using cleaning materials supplied.
Clean shared telephones before use.
Reduce close contact socialising opportunities, e.g. closure of staff/student cafes.
Reorganise classroom layouts to give as far as possible space between individuals and not directly facing others.
Staff to be encouraged to work from home where possible.
Do not share tables in classrooms, workrooms, cafes or social areas.
In the event of staff shortages, staffing and work activity should be prioritised having regard to either curriculum needs or to maintaining essential and hygiene measures. Ensure staff are aware of specific contingency plans for exams.
If the availability of staff or resources becomes so constrained that essential services may not be able to continue for your area of responsibility, inform your manager. The Vice-Chancellor will then decide whether to close this activity.
If you suspect that someone in your (class)room is suffering from the disease, take all practical steps to isolate that person as soon as possible. However, remember others in the room may have been contaminated and so they must be encouraged to remain together and not come into contact with further persons. Notify your manager preferably by phone or email (bear in mind that you may be contaminated).
Recovery Phase
The collection of external information, staff and resource planning actions that will have continued throughout the above phase (irrespective of whether or not the University has been closed) will inform the decision to move to a recovery phase for all or part of the campus.

<p>Following closure of all or part of the campus, the decision to move to the recovery phase will be communicated to all staff, students and contractors by the Vice-Chancellor via email, website, MySuffolk or phone. If all of the campus has been closed, re-opening will be announced on local radio, in addition to the above communication channels. Relevant external bodies will most likely be involved in this decision, however they will be informed by phone or email.</p>
<p>Until such time as the Vice-Chancellor announces an all clear, the actions above that apply in the control phase to hygiene objectives must continue as appropriate. The decision to announce an all clear will be informed by external information and the return of all attendance levels of students and staff to normal. At this point the actions listed can be discounted.</p>
<p>All staff to consider and advise line managers of any requirement for extended working in order to catch up with essential teaching time, examinations, or administrative activities that have been deferred or delayed as a result of absence or closure.</p>
<p>Vice-Chancellor to consider how such lost time can best be recovered and advise senior managers who will implement. This may include revised timetabling, extending working hours, weekend working, or extending the semester.</p>
<p>Review Phase</p>
<p>Following the all clear announcement senior managers will evaluate the operation of the plan informed by feedback from staff, students, contractors and external bodies. The plan and similar contingency plans will be revised in the light of the evaluation.</p>

APPENDIX F: Useful contacts

Internal University Contacts:	
Academic Registrar, University of Suffolk	Email: academicregistrar@uos.ac.uk Tel: 01473 338659
Director of People and Organisational Development, University of Suffolk	Email: hr-enquiries@uos.ac.uk Tel: 01473 338326
Health & Safety Team, University of Suffolk	Email: healthandsafety@uos.ac.uk Tel: 01473 338438
Security Team, University of Suffolk (<i>Out of hours</i>)	Email: uossecurity@uos.ac.uk Tel: 01473 338000
External Contacts:	
Suspected or diagnosed communicable (infectious) disease, as listed in Appendix D or any other disease, if concerned.	Public Health England HPT (Norfolk) Thetford Healthy Living Centre Croxtan Road Thetford IP24 1JD OR Public Health England HPT (Essex) Second Floor Goodman House Station Approach Harlow, Essex CM20 2ET Tel: 0300 3038537 Generic Email: EastofEnglandHPT@phe.gov.uk

	NHS Email: phe.EoEHPT@nhs.net
Ipswich Hospital	www.ipswichhospital.nhs.uk Tel: 01473 712233
Meningitis Trust	www.meningitisnow.org Tel: 0808 80 10 388
NHS Direct	www.nhsdirect.nhs.uk Tel: 111
NHS Choices	www.nhs.uk/pages/home.aspx
Public Health England	https://www.gov.uk/government/organisations/public-health-england
World Health Organisation	http://www.who.int/en/
NICE (National Institute for Health and Care Excellence)	https://www.nice.org.uk

APPENDIX G: Draft Letters

Draft letter – possible case of meningitis

Dear [insert name of student],

You may have heard that a member of the University of Suffolk community has been taken into hospital with suspected meningitis. The diagnosis has not been confirmed. My reason for writing to you is to provide you with accurate information, so that you will not be alarmed by any rumours or stories that may circulate.

Public Health England East of England Health Protection Team are responsible for managing suspected and confirmed cases of meningitis. Their advice at this time is:

- You are at no greater risk of getting meningitis than if this incident had not occurred.
- You do not need antibiotics nor do you need to see your GP for a check-up.
- If you become unwell, you should handle this as you would normally.

Some further information about meningitis is available on MySuffolk. Please use the following link to access the relevant page: <https://mysuffolk.uos.ac.uk/health-and-safety-0>. Any further information about this incident will be posted on MySuffolk.

If you would like to speak to me directly about the contents of this letter my telephone number is 01473 338659 or you can email academicregistrar@uos.ac.uk. In addition, the Students' Union are available to offer advice and support and can be contacted on 01473 338155.

Draft letter – probable or confirmed case of meningitis

Dear [insert name of student],

You may have heard that a member of the University of Suffolk community has been taken into hospital with what has turned out to be meningitis. My reason for writing to you is to provide you with accurate information, so that you will not be alarmed by any rumours or stories that may circulate.

Public Health England East of England Health Protection Team is responsible for managing suspected and confirmed cases of meningitis. Their advice is:

- Close contacts of the individual have been identified and are receiving the appropriate advice and treatment.
- If you are not a close contact, you are at no greater risk of getting meningitis than if this incident had not occurred.
- If you are not a close contact, you do not need antibiotics nor do you need to see your GP for a check-up.
- If you become unwell, you should handle this as you would normally.

Some further information about meningitis is enclosed. Any further information about this incident will be posted on MySuffolk [insert link]. You may also like to know that Meningitis Now operates a 24-hour helpline (telephone 0800 028 18 28); and you can visit their website at www.meningitisnow.org. Similarly, the Meningitis Research Foundation also operates a 24-hour helpline telephone 080 8800 3344; their website can be found at www.meningitis.org.

If you would like to speak to me directly about the contents of this letter my telephone number is 01473 338659 or you can email academicregistrar@uos.ac.uk. In addition, the Students' Union are available to offer advice and support and can be contacted on 01473 338155.

Draft letter – probable or confirmed case; close contacts

Dear [insert name of student]

The University has been informed by the Public Health England East of England Health Protection Team of a suspected case of meningitis. My reason for writing to you is to provide you with accurate information, so that you will not be alarmed by any rumours or stories that may circulate.

It is very unusual for more than one case of meningitis, suspected or confirmed, to arise at one time and only those who are very close contacts of the affected person are at any increased risk of developing the disease. Close contacts are those who, in the seven days before the person became ill:

- Have spent at least one night in the same house
- Have been in kissing contact with saliva exchange

University staff and students who meet these criteria have been contacted and given appropriate advice and treatment to further reduce the small risk of their becoming ill.

If you are not a close contact, you are unlikely to be at risk of developing the disease. However, it is sensible for you to be aware of the signs and symptoms and the enclosed 'Frequently Asked Questions' includes this information.

Further information is available from the following 24-hour helplines:

Meningitis Now	www.meningitisnow.org	Tel: 0800 028 18 28
The Meningitis Research Foundation	www.meningitis.org	Tel: 080 8800 3344
NHS 111 Service	www.nhs.uk/111	Tel: 111