

# National Joint Council for local government services

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**To: Chief Executives in England, Wales and N Ireland  
(additional copy for HR Director)  
Members of the National Joint Council**

14 April 2021

Dear Chief Executive,

## COVID-19: general update #3

Please continue to visit the LGA's [Coronavirus: information for councils](#) webpage for all up to date advice.

All information contained in this circular is correct at time of publication but all links to external websites should be checked regularly as official advice is likely to be updated as the situation continues to develop.

All previous NJC circulars providing advice and guidance relating to the pandemic are [online](#).

### [Clinically Extremely Vulnerable \(CEV\)](#)

The government has announced that [CEV people will no longer need to shield after 31 March](#).

From 1 April, and until social distancing rules are eased more widely, CEV people should continue to keep the number of social interactions they have to a minimum and reduce the amount of time they spend in settings where they are unable to maintain social distancing. [The letter sent to those who were shielding](#) up to 31 March notes that no vaccine is 100 per cent effective and even with both doses, there is no absolute guarantee that a CEV person will not become ill from COVID-19.

The government continues to instruct that everyone who can work at home should continue to do so but those that cannot, including CEV employees and those that live with them, can attend a risk assessed [COVID-secure workplace, including schools](#), with social distancing measures in place. Employers will, however, have the discretion to maintain home working arrangements as an option for CEV employees to work safely.

The government advises that employers should carry out a risk assessment of the workplace in line with [HSE guidance](#) and other relevant guidance for the setting, and consult with employees or trade unions and then share the results of the risk assessment with employees through their website.

Separate workplaces should be risk assessed accordingly, eg. offices, vehicles, depots, call centres, schools etc each of which may present their own particular challenges and may require specific COVID-related risks to be addressed.

Employers may wish to refer to the [guidance produced by NHS Employers](#) which sets out how to enhance existing risk assessments particularly for at-risk and vulnerable groups within the workforce. It includes workers returning to work, and existing employees who are potentially more at risk due to their race and ethnicity, age, weight, underlying health condition, disability, or pregnancy.

Consideration should also be given to requests from employees to be based at a site other than their usual workplace.

There will be circumstances in which outbreaks of COVID in specific geographic areas will require local restrictions that may include the reintroduction of shielding. Employers will need to follow local instructions and guidance as such instances occur.

If employees were previously in the shielded categories, it should be made clear what steps are being taken to protect them, for example discussing an option to reassign them to tasks where stringent social distancing guidelines can be followed if that cannot be assured in their normal role.

### **Clinically Vulnerable (CV)**

Some people, including those aged 70 and over, those with certain underlying conditions and pregnant women, are clinically vulnerable, meaning they may be at higher risk of severe illness from coronavirus. As restrictions continue to be eased, employers should update risk assessments and should ensure all measures are taken, to minimise the risk of transmission. Home working will also continue to be an important option to consider as part of the risk assessment process for this group of employees.

### **Local authority meetings**

All NJC advice relating to ensuring a COVID-secure workplace, applies equally to circumstances in which any employee (regardless of seniority) is asked to attend meetings in person with elected members as a result of the [government's decision to not allow meetings to continue to be held online](#).

### **Sickness absence**

An employee who self-certifies, or produces a sick note, for any COVID related sickness absence (including an adverse reaction to a vaccination) should receive pay and leave in accordance with their length of service so that the usual provisions of the sickness scheme apply.

For absences identified by a medical professional as, or pertaining to, 'long COVID', employers are reminded of the provisions in the Green Book Part 2 Para 10.3. Namely, that discretion can be exercised locally in extending the period of sick pay in exceptional circumstances, which include helping an employee to avoid incurring financial hardship. If this provision is invoked, it is important that a consistent approach is taken across the organisation to all similar types of absence and circumstances.

Should sickness absence continue, or be expected to continue, for such a period of time that the employee's return to work is unlikely within a reasonable period, employers should adopt the same practice as they would for any other long-term illness. This should include regular contact with the employee and involving Occupational Health and trade union representatives at the appropriate time.

The unequal impact of COVID on different risk groups means that employers will need to ensure their practices comply with their equalities duties. Appropriate actions may include temporary redeployment or reasonable adjustments.

## Self Isolation

If an employee is fit for work but 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.

## Vaccinations

The NJC urges all employees who are called forward to be inoculated to ensure that they take up the opportunity as soon as possible. Employers are asked to ensure that every possible effort is made in providing employees with reasonable time off in order for them to receive their jab. This guidance applies equally to when subsequent doses of vaccination will need to be administered.

## Testing in schools for pupils with additional health care needs

There is potential for school support staff to be involved in the provision of mass testing. It should be noted that the [NJC's model role profiles for school support staff](#) other than those for Additional Support Needs Teaching Assistants, do not include duties carried out by individual members of staff relating to supporting pupils with health care needs.

This is in line with the Department for Education Guidance: [Supporting pupils at school with medical conditions](#) which provides:

*"Any member of school staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so. Although administering medicines is not part of teachers' professional duties, they should take into account the needs of pupils with medical conditions that they teach. School staff should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions. Any member of school staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help"*

The NJC recognises that many of these duties are carried out on a voluntary basis in different ways. Therefore, if this duty becomes a requirement of the job, as part of an agreement between employers and unions, it should be set out in the job description as an additional duty allowing it to be accounted for in any necessary adjusted evaluation of the role (and therefore in remuneration as appropriate).

Yours sincerely,

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