



Guidance for disabled people with NPA, other user agreements and their assistants

COVID-19 preventive measures entering into force on
5 and 7 October 2020

Hand washing – hand hygiene

Repeat each step of the hand washing procedure at least five times



1 Rub hands palm to palm



2 Rub right palm over left dorsum and vice versa



3 Rub thoroughly between all fingers



4 Rub fingertips and fingernails of both hands together thoroughly



5 Rub thumb of each hand thoroughly



6 Rub each palm thoroughly

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1. Abbreviations

Abbreviation	Meaning
112	Emergency telephone number – coordinated emergency call centre for all of Iceland
1700	On-call medical service for the whole of Iceland – 24 hours a day
Avd-RLS	Civil Protection Department of the National Commissioner of the Icelandic Police
COVID-19	Infection of the respiratory tract caused by the new coronavirus
FRN	Ministry of Social Affairs
HRN	Ministry of Health
NPA	User-driven personal assistance
SVL	Chief Epidemiologist
WHO	World Health Organisation

2. Notice of the Ministry of Health

It is important to follow the decisions of the Ministry of Health on the maximum number of people in an enclosed space at any one time in order to comply with restrictions on gatherings and the rules on social distancing. These rules are laid down by means of a Notice issued by the Ministry of Health on their website: www.hrn.is.

You can find the Notice in force from 5 October 2020 [here](#) and the Notice regarding more stringent measures in the Greater Reykjavík area in force from 7 October 2020 [here](#).

3. Guidance for putting together an action plan

It is important for NPA users and those with other types of user agreements to be prepared should they or somebody in their group of assistants have a suspected case of COVID-19.

When there is considered to be a risk of COVID-19 infection, the user and their assistant must:

1. be familiar with the symptoms of COVID-19 infection and the virus' mode of transmission and read the instructions on approved procedures. Further information is available on the websites of the [Directorate of Health](#), the [Ministry of Social Affairs](#), the [Icelandic Association of Local Authorities](#) and the [NPA Centre](#);
2. the main symptoms of COVID-19 are: coughing, fever, common cold symptoms, bone and muscle pain, tiredness and sometimes a sore throat. Alterations to or loss of taste and smell have been reported;
3. be prepared to take great pains to ensure hygiene, bolster infection protection and apply basic infection prevention measures;
4. be prepared to deal with COVID-19-related projects;
5. be prepared to and provide assistance in restricting access to users' homes and prevent unnecessary comings and goings in order to prevent infection;
6. know how to put on and take off protective clothing;
7. be familiar with the [videos](#) produced by the Chief Epidemiologist on the website of the Directorate of Health on infection protection, hand-washing and the use of protective equipment;

8. inform the social services contact person of the relevant municipality and, where appropriate, the relevant administrators and support supervisors in the event of a suspected COVID-19 infection.

Keep the following in a safe place in your home:

- Hand sanitiser
- Paper tissues
- Disposable gloves
- Protective masks
- Plastic bags
- Disinfectant solution for cleaning surfaces, e.g. sanitiser or Virkon
- Virkon tablets and instructions

You can find instructions on using protective masks [here](#) and a video giving guidance using protective masks [here](#).

It is important to be prepared and put together your own action plan, and talk to your assistants about what to do if somebody falls ill and you need to go into quarantine or isolation. These instructions can be useful in helping you put together your own action plan.

You should:

- make a list of the most important numbers to have handy;
- always have a stock of hygiene products, disinfectants, hand sanitiser, soap, paper tissues, disposable gloves, protective masks, etc.;
- lay down procedures for assistants covering infection protection, hygiene and comings and goings in your home:
 - hand-washing
 - cleaning of living quarters and contact surfaces
 - general hygiene
- lay down procedures for visits, number of visitors and trips outside of the home;
- put together a plan for what to do if you or somebody in your group of assistants has a suspected or confirmed case of COVID-19;
- think about how to respond to an emergency situation, e.g. if you lose a large part of your assistant team to quarantine or isolation;
- decide who should take on the role of supervisor if illness prevents you from doing so;
- talk to your assistants about what to do and how to do it if you or somebody in your group of assistants is infected;
- make a list of people who may be able to serve as back-up:
 - make a list of people who have worked with you before, contact them and ask whether they may possibly be able to step in in an emergency
 - check whether family members or friends may be able to step in and help if needed
- be familiar with the procedure for getting help from the welfare services back-up team;
- lay down procedures for collecting food, medicines and other things you would need at home in the event of a COVID-19 infection;
- have a print-out of the necessary instructions and, where appropriate, go through them with your assistants.

4. COVID-19 infection prevention measures

It is important to take great pains to ensure hygiene, bolster infection protection and apply basic infection prevention measures.

You should follow rules on social distancing as laid down in the Notice of the Ministry of Health in force at any given time. This can be found on the Ministry of Health website: www.hrn.is.

Basic infection prevention measures

Basic infection prevention measures include:

- General hand-cleaning, i.e. hand-washing and/or use of hand sanitiser. Wash your hands thoroughly for at least 20 seconds when you arrive at work and before and after meals and visits to the toilet.
- **Easy access to hand-washing facilities and hand sanitiser.**
- **Easy access to disposable protective gloves. Use hand sanitiser after using gloves.**
- **Easy access to protective masks. Use hand sanitiser after using gloves.**
- Assistants should use protective equipment if there is the slightest suspicion of infection in the home.
- Disposable equipment is placed in a closed bag, which may then be thrown away with general rubbish.
- Report immediately any symptoms you begin to experience. This applies to both users and assistants.

Administrators of NPA / user agreements (whether an independent party or the user him/herself) are asked to ensure that assistants have access to cleaning products, disposable gloves, protective masks and other protective equipment which are important to have to hand in order to apply basic infection prevention measures.

Protective equipment

In the event of a suspected infection, the administrator/user can order **protective equipment from Directorate of Health stock** by sending an e-mail to hlifdarbunadur@landlaeknir.is on weekdays or, in an emergency, by calling 845-7290.

Such equipment includes:

- Disposable gloves in sizes M and L
- Disposable protective gowns
- Face shields or protective goggles
- FFP2 viral masks

Use of protective masks

Observe the rules laid down in the Notice of the Ministry of Health in force at any given time. This can be found on the Ministry of Health website: www.hrn.is.

The purpose of protective masks is to capture respiratory droplets exhaled by the user to ensure that they are not dispersed into the environment. As a result, used protective masks are extremely contaminated with microbes that are commonly found in the mouth. Therefore, the most stringent hygiene measures must be observed in the use of masks. Masks should be touched as little as possible

and must be changed if damp or damaged in any way. Hands must always be washed or sanitised after touching used protective masks.

In situations where a distance of 1–2 metres cannot be kept, protective masks covering the mouth and nose must be used. Protective masks do not replace the rule to keep a distance of 1–2 metres. Nor does it replace the need for general infection prevention measures, i.e. hand-washing, general hygiene and extra cleaning of contact surfaces. Where assistants are unable to keep a distance of 1–2 metres while carrying out their duties, they must wear a face mask.

Administrators are responsible for keeping assistants informed, providing them with guidance, teaching them how to use protective masks and familiarising them with the instructions for using other protective equipment.

- The general rule is to keep a distance of 1–2 metres between people who are not close family or friends. This is the best way to prevent infection, together with thorough hand-washing and sanitising hands and surfaces in rooms used by many people.
- When providing care makes it impossible to keep a distance of 1–2 metres, a protective mask must be worn.
- If the person receiving assistance is in a risk group for serious infection (i.e. owing to age, disability or illness), the assistant should wear a thicker FFP2 mask, while the user should wear a thinner surgical mask.

You can find instructions on using protective masks [here](#) and a video giving guidance using protective masks [here](#).

Persons at risk of serious COVID-19 infection

Specific instructions apply to persons at risk of serious COVID-19 infection. These can be found [here](#).

It is important to have a GP or specialist assess whether the person in question is at risk of serious infection.

5. In the event of suspected COVID-19 infection

1. Contact a healthcare centre or call 1700 and seek the assistance of the doctor on call. When requesting a test, indicate that you belong to a vulnerable group. If the matter is urgent, call 112.
2. Collect COVID-19 infection prevention equipment.
3. Separate the ill person from others as soon as possible.
4. Keep contact with and access to the ill person to a minimum.
5. Use disposable gloves and protective masks.
6. Gloves should be removed as soon as the task is completed and hands should be sanitised. Hands must always be washed or sanitised after touching used protective masks.
7. If any other protective equipment (i.e. disposable gowns or plastic aprons) is available and used, it should be worn in accordance with the instructions given by the SVL.
8. If an infectious agent enters the environment (bodily fluids), wipe it up with a disposable wipe, clean the surface with soapy water and then wipe it over with disinfectant (e.g. sanitiser or Virkon).
9. Used protective equipment and other waste generated while caring for the ill person (e.g. used vomit bags, dirty wipes) are placed in a closed bag that can be thrown away with general rubbish.

10. Contaminated clothing is placed in a closed bag and can be washed in the usual way in a washing machine.
11. Inform relatives, where appropriate.
12. The assistants who cared for the person in question must change into clean work clothes after they have finished their work. Dirty work clothes can be washed in a washing machine (a 60°C wash kills the virus).

6. Healthcare services for COVID-19 infections

The COVID-19 outpatient ward at Landspítali University Hospital handles patients who are ill at home in isolation. A group of doctors and nurses provide advice and telephone monitoring for people diagnosed with COVID-19 who are isolating at home. The aim of this service is provide patients with the best possible service at the appropriate level, by providing specialised distance healthcare, advice and support in order to avoid hospitalisation. In this way, patients' safety is ensured while increasing the amount of time that they may remain at home.

When a patient tests positive for the virus, they receive a phone call from Landspítali University Hospital. The first phone call is from a doctor, who goes over their medical history and any possible underlying issues. The doctor assesses the current situation and symptoms. This first phone call gives the patient an immediate preliminary risk assessment. Subsequently, monitoring is performed by nurses from the outpatient ward, in consultation with doctors. The patient's state of health is regularly monitored, and an assessment is made as to whether or not they require a home visit or need to come in the outpatient ward for a more formal assessment and check-up involving blood tests and x-rays. Patients are received in the outpatient ward by a specialised team of nurses and doctors.

7. The user is in quarantine or isolation

Quarantine is used when a person has potentially been infected but displays no symptoms and has not been tested.

Those who have been diagnosed with COVID-19 go into **isolation**. The decision on whether a given person should go into quarantine or isolation is taken by the authorities, who issue instructions on a case-by-case basis.

Users in COVID-19 [quarantine](#) or [isolation](#) still need assistance with the necessary tasks of daily life – as well as the healthcare required by their condition. The following instructions should be followed, and further advice and guidance is available from healthcare professionals, as required.

It is best for the same assistants to provide home assistance to users in quarantine or isolation to keep to a minimum the number of people who could be exposed if the user develops the virus.

The table below gives an overview of quarantine and isolation in terms of differences in infection protection and restrictions on contacts with others. You can find more information in the instructions for [quarantine](#) or [home isolation](#).

QUARANTINE	ISOLATION
<p>The user must remain at home as much as possible and meet only their assistants. They should not receive visits from family or friends.</p>	<p>The user must remain at home in isolation and meet only their assistants. They should not receive visits from family or friends.</p>
<p>Assistants should wear protective equipment when in close contact with a user in quarantine – disposable gloves, protective masks, protective gowns or plastic aprons.</p> <p>Both the assistant and user should wash their hands afterwards.</p>	<p>Assistants caring for users in isolation must wear protective equipment – disposable gloves, protective gowns or plastic aprons, a face shield or protective goggles and fine-particle masks.</p> <p>The patient should wear a fine-particle mask if they are able to.</p>
<p>Assistants shall take general infection prevention precautions: Wash and sanitise hands before and after assisting the user and observe general hygiene. Use a protective mask if it is not possible to keep a distance of 1–2 metres. If protective equipment is used, it should be worn in accordance with the instructions given by the SVL.</p>	<p>Put on protective equipment in a specific place in the user’s home where the utmost infection protection measures are observed.</p> <p>Protective equipment should be worn in accordance with the instructions given by the SVL.</p> <p>We recommend watching this instruction video on how to put on and take off protective clothing.</p>
<p>Avoid contact with body fluids (e.g. mucus from the airways, vomit, faeces).</p>	<p>Sanitise hands before putting on protective equipment. Put on protective equipment in the following order: FFP2 fine-particle mask, protective goggles, gown, gloves. Change gloves if they get dirty and as required. Remove protective equipment in the following order: gloves, gown, mask, goggles. Sanitise your hands between each step.</p>
<p>Used protective equipment and other items (e.g. used vomit bags, dirty wipes) are placed in a closed bag that can be thrown away with general rubbish. Wash, dry and sanitise hands.</p>	
<p>Keep an eye on whether the user develops symptoms which could indicate infection, e.g. fever.</p> <p>If their health declines, call 1700 and report it.</p>	<p>Monitor the user’s health by taking their temperature daily.</p> <p>Assist in providing information over the phone as part of healthcare workers’ daily monitoring.</p> <p>If their health declines, contact the COVID-19 outpatient ward and report it.</p>
<p>Regularly clean the user’s entire home thoroughly with soap, water and disinfectant surface cleaner.</p>	
<p>If an infectious agent enters the environment (bodily fluids), wipe it up with a disposable wipe, clean the surface with soapy water and then wipe it over with disinfectant.</p>	<p>Areas where the ill person has been should be cleaned very carefully, and the utmost infection protection measures should be observed as described in Section 7.</p>

8. Cleaning areas where an ill person has been

Cleaning begins as soon as the ill person leaves a given area. Area should be [cleaned according to the instructions given by the SVL](#). Employees must have completed appropriate training in putting on and removing protective equipment, as well as appropriate handling/disposal. It is not known how long the coronavirus can live in the environment (hours or days). It depends, amongst other things, on surface area, humidity and temperature.

Individual infection prevention measures for those cleaning areas after a COVID-19 infection

- a. Basic infection prevention measures should be applied for cleaning due to a suspected COVID-19 infection.
- b. The following protective equipment must be used for cleaning:
 - i. Disposable gloves (two pairs)
 - ii. Disposable protective gown
 - iii. Viral mask and face shield if there is a risk of contaminated material reaching the face.
- c. Once cleaning is complete, used protective equipment must be placed in a closed plastic bag that can be thrown away with general rubbish.
- d. Once gloves have been placed in a closed bag (which may then be thrown away with general rubbish), wash and sanitise hands.
- e. Once work is complete, put on clean work clothes. Dirty clothes can be washed in a washing machine.

Cleaning areas suspected of being contaminated

- a. The area in which the ill person has been and its immediate surroundings must be cleaned.
- b. Pressurised air (e.g. high-pressure pumps) may not be used on surface, as this can disperse contaminants into the atmosphere.
- c. Contaminated areas are demarcated, and other persons are diverted from them.
- d. Have rubbish bags at the ready.
- e. Use approved detergents and disinfectants (e.g. sanitiser or 1% Virkon). Use the correct concentration.
- f. Use paper wipes to clean up visible contaminants. Replace gloves if they come into contact with contaminated material.
- g. First, wash the area with soapy water, then dry and wipe over with disinfectant (e.g. sanitiser or 1% Virkon).
- h. Begin by cleaning at the top and work your way down. Start by spreading a soap solution over the area using a paper wipe or spray bottle. When the entire area has been covered with soap solution, use paper wipes to clean up and place the wipes in a closed bag, which may be thrown out with general rubbish. Then cover the whole area with paper towels and wet the towels with sanitiser or 1% Virkon. Wait for as long as recommended by the manufacturer and then remove the paper towels and place them in a closed bag, which may be thrown out with general rubbish. Finally, rinse the area with hot water (60°C) and dry.

- i. Paper and other disposable items from the area where the ill person has been are also thrown in a bag that may be thrown out with general rubbish.
- j. Between each area, change washcloths and place them, once cleaning is completed, in a bag that can go into general laundry.
- k. In areas used by the ill person, the following should be carefully cleaned:
 - Door handles and locking devices.
 - Taps and sinks.
 - Walls adjacent to the bed, toilet and sink.
 - The toilet and its surroundings.
- l. Once the work is complete, place protective equipment and gloves in a bag and throw it out with general rubbish.

9. Quarantine for assistants

The Tracing Team informs assistants of whether or not they need to go into quarantine.

According to the [instructions issued by the Chief Epidemiologist](#), assistants must quarantine for 14 days if they:

1. declare that they have been in direct contact with a person infected with COVID-19 or in contact with contagious material or in close proximity of less than one metre without protective clothing for more than 15 min. Those living in the same household as an ill person must go into quarantine;
2. have cleaned a potentially contaminated area without protective clothing.

Co-workers of a person going into quarantine should observe their own infection prevention measures but are not required to go into quarantine, unless the above also applies to them.

The Tracing Team sends assistants in quarantine for a test on the seventh day in order to release them from quarantine. **It should be borne in mind that, even if quarantine is shortened to seven days, assistants should also continue to wear a mask for a further seven days and pay particular attention to personal infection prevention.** Assistants who have shortened their quarantine should not care for individuals who are particularly vulnerable to COVID-19 infection.

Registering assistants in quarantine

Assistants must be registered as being in quarantine in order to be able to issue a certificate. They can either register themselves or be registered by their healthcare centre or the Department of Civil Protection's Tracing Team.

- Persons **with electronic ID** can register themselves as being in quarantine at heilsuvera.is (only for quarantine order by the authorities, not for self-imposed quarantine).
- Persons without electronic ID register themselves as being in quarantine at their healthcare centre.
- Once registration is complete, a quarantine certificate can be retrieved from www.heilsuvera.is using electronic ID.

- Those who do not have electronic ID but need a quarantine certificate should request one by e-mail to mottaka@landlaeknir.is with **Quarantine certificate** in the subject line. They will then receive their certificate by e-mail.

Assistants' right to payments during quarantine

The Icelandic Parliament has passed Act No. 24/2020 on temporary payments to persons in quarantine. The aim is to support employers and employees in quarantine to enable them to adhere to the quarantine instructions issued by the health authorities without worrying about their income.

Those who may be entitled to payments under this Act are:

- Employers who have paid their quarantined employees wages between 1 February 2020 and 31 December 2021.
- Employees who have been in quarantine during the same period but not received wages from their employer.
- Self-employed individuals in quarantine during the same period.

The Directorate of Labour is responsible for implementing this Act. Information on [quarantine payments as instructed by the health authorities](#) can be found on the Directorate of Labour website. You can also find details information on conditions, the application procedure, available amounts, quarantine payments and the rights of guardians of children in quarantine in on their [FAQ](#) page.

NPA assistants who are in mandatory quarantine are entitled to wage payments, and contracted assistants may also be entitled if they have paid social security contributions and withholding tax on calculated remuneration for at least three of the four months preceding the application date or in a regular manner.

The user/supervisor registers assistants' shifts in the usual way but indicates them specifically with 'quarantine'.

How to apply for payments

Applications are made on the Directorate of Labour website. You can find more information on quarantine payments [here](#).

The **NPA administrator** may submit payments applications to the Directorate of Labour via the 'My pages' section for [employers](#) on the Directorate of Labour website. The administrator registers the assistant for whom payments are requested and the days on which they were entirely or partially unable to perform their duties owing to being in mandatory quarantine. One application can be made including all assistants who commenced quarantine in the same month. If there are two or more months in which a quarantine commenced, a separate application must be made for each month. Any supporting documentation requested by the Directorate of Labour must be submitted. Half and/or whole days can be selected.

Assistants who are contractors apply via the 'My pages' sections for [job seekers](#). The application must indicate that the applicant is self-employed. You should select the month in which quarantine commenced and specify the number of days that you were unable to work owing to being in quarantine.

Quarantine derogation – B quarantine

In special circumstances, where other means are not possible, specialised staff who are in quarantine and who provide key services (e.g. caring for disabled people who are also in quarantine) may be allowed to return to work under certain conditions. This quarantine is known as ‘B quarantine’ to distinguish it from the general quarantine.

As well as continuing to perform duties that others are not able to perform, assistants in B quarantine must observe general quarantine outside of working hours, i.e. meet as few people as possible and follow the Chief Epidemiologist’s instructions on protective equipment, etc. issued with the derogation approval. This is a special measure, in light of a very demanding environment in unprecedented circumstances.

Conditions for B Quarantine:

- a. The work performed by the assistant in question must be necessary to ensure the user’s safety, and there must be nobody else with the appropriate experience and background in the welfare service back-up team available.
- b. The assistant and user/employer must be in agreement as regards applying for a derogation. The assistant may withdraw the application if a derogation is applied for without their consent.
- c. The assistant must be symptom-free. Derogated assistants must monitor their own health closely and may not report for work if they display symptoms consistent with COVID-19.
- d. Assistants must leave work immediately if symptoms appear, in consultation with the user.

Derogations must be applied for from the Chief Epidemiologist. An [application form](#) is available on the Directorate of Health website. Breaches of the quarantine rules laid down by the Chief Epidemiologist are governed by the Health Security and Communicable Diseases Act (Act No. 19/1997).

10. Illness of assistants caused by COVID-19

Assistants’ entitlement to wages during absences due to illness is governed by collective wage agreements.

Illness of assistants caused by COVID-19 is classed as ‘absence’ within the meaning of Article 20 of [Regulation No. 1250/2018 on user-driven personal assistance](#), as amended. Administrators may apply for a contribution from the municipality in question to help cover the extra expenditure incurred as a result of replacing staff absent due to COVID-19. The municipality finalises the application and submits it to the Municipal Equalisation Fund for processing.

NPA agreements stipulate that the municipality, the user and the administrator should work together to respond to changes in user circumstances, with regard to their service needs. Quarantine and isolation are classed as changed circumstances of this type. As soon as is possible, a communication framework should be urgently set up between the municipality, the user and the administrator in light of the changed circumstances, e.g. as regards staff matters. This applies also to other user agreements.

Even if circumstances change as stipulated by the contract, the administrator retains the responsibility of the employer towards assistants and must discharge its obligations in accordance with current laws and collective wage agreements.

If many assistants are ill with COVID-19, it is possible to turn to the contact person at the municipality if the user does not have their own back-up who can assist in such circumstances.

1. The municipality contact person requests assistance from the welfare service back-up team.
2. The user/administrator contacts the contact person in their municipality, who receives a list of names from the welfare service back-up team.
3. The user/administrator is sent a list of names of some of the back-up persons registered.
4. The user/administrators select back-up persons and contact them. Those persons are interviewed and an employment contract is drawn up and an agreement reached.
5. The user/administrator informs the municipality contact person of who has been hired from the welfare service back-up team.

11. Local contact persons

- **Reykjavík:** Arne Friðrik Karlsson arne.fridrik.karlsson@reykjavik.is
- **Kópavogur:** Guðlaug Ósk Gísladóttir gudlaugo@kopavogur.is
- **Akureyri:** Karólína Gunnarsdóttir karolina@akureyri.is
- **Hafnarfjörður:** Sjöfn Guðmundsdóttir sjofng@hafnarfjordur.is
- **Garðabær:** Pála Marie Einarsdóttir palaei@gardabaer.is
- **Mosfellsbær:** Sigurbjörg Fjölнисdóttir sigurbjorgf@mos.is
- **North-West:** Gréta Sjöfn Guðmundsdóttir gretasjofn@skagafjordur.is
- **Snæfellsnes Social and School Services:** Sveinn Þór Elinbergsson sveinn@fssf.is
- **Akraneskaupstaður:** Svala Hreinsdóttir svala.hreinsdottir@akranes.is
- **Dalvíkurbyggð:** Þórhalla Fr. Karlsdóttir tota@dalvikurbyggd.is
- **West Fjords Association for Disabled People:** Sif Huld Albertsdóttir bsvest@bsvest.is
- **Bergrisinn, South Iceland Service Area:** Íris Ellertsdóttir iris.ellertsdottir@arborg.is and Arna Ír Gunnarsdóttir arna@arnesthing.is

12. First steps out of preventive quarantine: from emergency alert level to danger alert level

- We must always take into account the situation around us and the number of infections.
- When the number of infections increases, many people go into ‘preventive quarantine’ and stay mostly at home.
- When the number of infections fall again and the Civil Protection Department drops the alert level from ‘emergency’ to ‘danger’, it is important to take our first steps out of preventive quarantine.
- We should do this cautiously, maintaining and relaxing our quarantine in line with falling numbers of infections when the situation changes again.
- It is important to observe infection prevention measures, i.e. frequent and thorough hand-washing, keeping a distance of 1–2 metres as much as possible, avoiding crowds and using face

masks as instructed. Such measures may be more even more relevant to those emerging from protective quarantine. Keeping a distance of two metres gives better protection than a distance of one metre.

- When circumstances allow us to take our first steps out of preventive quarantine, disabled people are encouraged to continue taking precautions, avoiding crowds and not coming into contact with people with symptoms but also to consider relaxing their own restrictions on meeting other people.
- We should take account of our health and underlying risk factors when assessing what first steps to take back into the outside world after having been at home in preventive quarantine.
- See the [guidelines for persons at risk of serious infection](#).
- Those in risk groups should also continue to be cautious, but without avoiding people altogether. It is advisable to move forward slowly and monitor how things develop in the outside world.
- Those who regularly come in contact with people in risk groups should follow the same rules and urged to keep away if they have symptoms consistent with COVID-19.
- It is sensible to avoid crowded places for the time being and find places where it is possible to keep a distance of two metres when dealing with other people.
- It is possible to attend small gatherings provided that hygiene is observed and two-metre social distancing ensured.
- When you need to avail yourself of services where the staff are in close contact with many people every day, e.g. hairdressers or physiotherapists, it is best to go at the quietest time of day.
- It is important to attend properly to mental and physical health.

13. Visits and visitors

You should refer to the notice and instructions in force at any given time.

At the Civil Protection Department's 'emergency alert level':

When the number of infections is increasing, it is important to limit close contacts to a specific number of people in order to avoid infection.

Visits to persons at risk of serious COVID-19 infection should be limited.

It is important to show the utmost caution, follow general basic rules on hand-washing and infection prevention and keep a distance of 1–2 metres from visitors as much as possible. Keeping a distance of two metres gives better protection than a distance of one metre.

Taking the first steps out of preventive quarantine – the Civil Protection Department's 'danger alert level':

- Adjust the number of visits and visitors to the circumstances, bearing in mind that visitors can bring infection into your home.
- The number of confirmed infections in the municipality should always be borne in mind.
- Consider the circumstances in your home and how many people you are able to receive while keeping a distance of 1–2 metres.
- You could begin with one or two close relatives or friends per week, avoid physical contact and keep a distance of 1–2 metres.

Advice for avoiding infection

1. Visitors should wash and sanitise their hands upon arrival and when leaving.
2. They should avoid direct contact with residents as much as possible.
3. Visitors should keep a distance of 1–2 metres from other people as far as possible.

14. Further information

Other services

Despite the third wave of COVID-19, municipalities will continue to operate the services for which they are responsible as best they can. Municipal services for disabled people are governed by special instructions for welfare services, which can be found [here](#).

The *Rakning C-19* app

Disabled people and other citizens are encouraged to download the Civil Protection Department's tracing app and to encourage friends, relatives and visitors to do the same. The app can be found [here](#) at www.covid.is.

Information pages

At www.covid.is, you can find answers to many questions under [FAQs](#). Select 'All questions'. There is also information on **mental health** in COVID-19 times, where you can find support and advice. This can be found under [Our wellbeing on www.covid.is](#). At www.covid.is, you can also find advice on [avoiding infection](#).

You can find information on accessible walking paths and outdoor activities [here](#).

You can also find useful information at the following addresses:

- www.landlaeknir.is
- www.samband.is
- www.felagsmalaraduneyti.is
- www.npa.is
- www.covid.is

15. Checklist

- **Hand-washing** – soap and water or hand sanitiser
- **Distance** – two metres minimum
- **Positivity** – avoid negative thoughts
- **Sleep** – get enough sleep
- **Diet** – healthy and varied
- **Home delivery** – food and services if possible, support if needed
- **Daylight** – enjoy daylight
- **Exercise** – indoors or outdoors
- **Social network** – communicate with family and friends, use your phone and social media
- **Medicines** – take all medicines as prescribed by your doctor
- **Healthcare centres / On-call doctors** – contact if needed (new symptoms, changes in underlying illnesses, possible infection, etc.)

16. Community pledge



The poster features a white background with an orange border. On the left, there are three vertical orange bars of decreasing height and a blue play button icon. The text 'covid.is' is in blue. The main title 'Community pledge' is in large blue font, followed by the subtitle '- in our hands'. A paragraph of text explains the purpose of the pledge. A list of 13 items follows, each preceded by a blue play button icon. At the bottom, there are two logos: the Icelandic Public Health Authority logo and the Directorate of Health logo.

covid.is

Community pledge

- in our hands

Let's make a pledge to keep up the good work. A pledge that will be valid throughout spring and summer and one that we will all observe.

We pledge to:

- ▶ Wash our hands regularly
- ▶ Sanitize our hands
- ▶ Remember to keep a distance of 2 metres / 6 feet
- ▶ Sanitize common surfaces
- ▶ Keep protecting at-risk groups
- ▶ Call the clinic if we experience symptoms
- ▶ Keep screening for COVID-19
- ▶ Observe quarantine rules
- ▶ Observe isolation rules
- ▶ Keep providing great services
- ▶ Provide trustworthy information
- ▶ Be understanding, mindful, and supportive of each other

Civil defense is still in our hands.



**Embætti
landlæknis**
Directorate of Health