



SARSCoV2 (COVID-19)
ST HELENA ISLAND



LIVING WITH COVID

COVID-19 GUIDANCE BOOKLET

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INTRODUCTION

With effect from the 8 August, the Public Health (Prevention of Formidable Diseases) (Coronavirus No. 2) (Amendment) Regulations, 2022 will be repealed and visitors arriving at St Helena will not be required to quarantine. This means that it is very likely that once this happens, there will be community spread of the SARSCoV2 virus (**COVID-19**).

The information in this booklet explains how we will carry on working to keep people safe by:

- Ensuring everybody who is eligible, has the opportunity to become vaccinated.
- Supporting the Health and social care services.
- Providing advice and guidance about how you can take care of yourself and your family and friends during this period.

This booklet will also offer advice on how we can continue to go about our daily lives whilst living with COVID, how we can protect those within our community who are more at risk from developing complications if they contract the virus and how we can maintain our essential services particularly when there might be staff shortages as people contract the virus.

We all need to play our part in understanding where and when the risks of COVID-19 infection and transmission are likely to be higher, and what we can do to reduce these risks.

Following the health service guidance will help you to identify situations where there is a greater risk of catching or spreading COVID-19, and what steps you can take to stay safe and protect others. **Every positive action you take will help to reduce the spread of the virus.**

What is SARSCoV2 (COVID-19)?

Towards the end of 2019 in China a previously unknown virus spread from animals to humans (probably through livestock markets). This virus, later to be named Severe Acute Respiratory Syndrome Coronavirus 2 (SARSCoV2), spread rapidly round the world causing an illness named Coronavirus Infectious Disease 2019 (COVID-19). This illness caused severe lung problems in many of the people who caught it, and caused millions of deaths around the world in 2020-21. St Helena was one of the few places to remain isolated from SARS CoV2, and has fortunately been spared from the harm caused by COVID-19.

During the past two years there has been a huge shift in the way that SARS CoV2 affects people. The virus itself has changed to become much less harmful. This is normal as 'new' viruses adapt to humans: over time variants of the virus which do less damage to the host tend to replace the more harmful forms. The strain of the virus that we are seeing at the moment ('omicron') is much less likely to cause serious illness than earlier forms.

People have also now got much better immunity to the virus, partly through having been exposed to infection, and partly through immunisation (being vaccinated). Highly effective vaccines have been developed and rolled out rapidly around the world: St Helena has been particularly successful in getting people fully immunised, and as a result most of the population of the island is well protected. SARS CoV2 is not nearly as dangerous an infection as it used to be. Most vaccinated people who catch the virus now, only experience a very mild illness (and many may not have any symptoms at all). It is now extremely unusual for people with COVID to need to be admitted to hospital, and even those that do need to be admitted, usually make a full recovery.

When SARS CoV2 first became a major health problem in 2020, we were worried that people with other health problems (diabetes, heart disease, asthma, etc.) might be particularly at risk from severe illness if they caught the virus. We now know that if you have been vaccinated, and catch the omicron strain of the virus, these other illnesses make you no more at risk of severe COVID than anyone else. There are still a handful of rare illnesses (mainly those affecting the immune system) which may put people at increased risk of severe COVID, but for most, who were previously told they were more at risk than normal from COVID, this is no longer the case.

Having had limited access to and from the rest of the world for the last two years has allowed St Helena to prepare for the arrival of the infection, and given the virus time to become less dangerous. As a result, the harm caused by SARS CoV2 on the island should be far less than in most other parts of the world, as seen on the Falkland Islands, where there has been spread of COVID-19 however far less severe symptoms for most who have contracted the disease, and no need for hospitalisations.

Who is at risk from developing complications?

Once quarantine restrictions are removed, we will start to see SARS CoV2 within the community on St Helena. Although the omicron variant is much less harmful than previous strains of the virus it is highly infectious, and it is likely that most people on the Island will catch it at some point. The illness is usually so mild that many people will not even know that they have the virus. Others will just feel as though they have a cold, with perhaps a headache and muscle pain. We now know that even if you have other health conditions, SARS CoV2 is unlikely to make you seriously unwell.

During the early stages of the pandemic in 2020 you may have received a letter identifying you as someone who is 'clinically extremely vulnerable' or 'high-risk', and been advised to shield or take other specific precautions. We now know that most people with other health problems are not determined as 'clinically extremely vulnerable' or 'high-risk'.

There are a very small number of people who, in spite of vaccination, may be at higher risk of serious illness from COVID-19; this is usually due to a weakened immune system. The Health Service have already identified those people on St Helena who are in this group, and will be contacting them directly with specific advice and support. Unless you are contacted in this way, you should follow the same guidance as everyone else on staying safe and preventing the spread of COVID-19 on St Helena.

Everyone is strongly advised to get immunized against the virus, including pregnant women. If you have not yet received the vaccine, you are recommended to do so (unless you are one of the very rare people who has a true allergy to the vaccine). Having two doses of vaccine provides effective protection against serious illness; a third (booster) dose may provide additional protection. Some people may also be offered immunization against 'flu'; it is the start of the 'flu' season in South Africa, and we do not want to have this virus circulating on St Helena at the same time as SARS CoV2.

Below is a list of chronic illnesses that could continue to put people at risk of getting seriously ill from COVID-19, despite vaccination:

- Down's syndrome
- Certain types of cancer (such as a blood cancer like leukaemia or lymphoma)
- Sickle cell disease
- Certain conditions affecting your blood
- Chronic kidney disease (CKD) stage 4 or 5
- Severe liver disease
- Someone who has had an organ or bone marrow transplant
- Certain autoimmune or inflammatory conditions
- HIV or AIDS and have a weakened immune system
- A condition affecting your immune system
- A rare condition affecting the brain or nerves (multiple sclerosis, motor neurone disease, Huntington's disease or myasthenia gravis)
- A severe problem with the brain or nerves, such as cerebral palsy
- A severe or multiple learning disabilities
- A weakened immune system due to a medical treatment

How can I keep myself and others safe?

Once mandatory quarantine is lifted, we will start to see cases of COVID-19 within the community, which means there is a risk that you could catch or pass on the virus, even if you are fully vaccinated. This means it is important that you understand and consider the risks of catching or spreading COVID-19 in all situations in order to keep yourself and others safe.

While no situation is risk-free, there are easy and effective actions you can take to protect yourself and others around you. You can:

- wear a mask in public spaces

- continue to maintain good hygiene practices e.g. washing your hands regularly, sneezing into the crook of your arm etc.
- keep windows open when in a room with others
- stay at home if you have flu-like symptoms or test positive for COVID-19
- consider not attending events where you know there will be a lot of people if you are feeling unwell.

What do I need to know about mask wearing and other Personal Protective Equipment (PPE)?

It is important to understand the benefits and limitations of PPE in the context of omicron-variant SARS CoV2. This virus is highly infectious, and no PPE (except for powered respirator hood) will provide highly effective protection from infection. However simpler PPE such as masks may provide some partial protection, and reduce the speed of spread of an outbreak.

- Surgical face masks do little to prevent inhalation of aerosolised virus. They will reduce the risk of the wearer passing on virus to others if they are themselves infected. They also serve as a reminder to the wearer and others to observe hygiene and distancing precautions.
- Cloth masks serve a similar function to surgical face masks: multi-layer ones are probably similar in efficacy to surgical masks, while single layer cloth masks probably have little function other than psychological.
- Plastic visors prevent droplet spread, so reduce the risk of an infected wearer spreading virus if they cough or sneeze. They are also useful in protecting the wearer if they are in very close contact with a symptomatic infected person (e.g. a HCW who is face to face with a coughing patient); this is also true for protective eyewear. Visors additionally prevent people from accidentally touching their face/eyes, and may therefore have some role in reducing contact spread.
- Gloves will reduce the risk of contact spread if used appropriately.
- Regular hand washing (or alcohol gel) will reduce the risk of contact spread,
- Keeping a 2 metre distance from others may have some role in reducing airborne transmission of virus. The same is true of increased ventilation of indoor spaces.

Outside health care settings the wearing of facemasks is a matter of personal choice. People identified as being at increased clinical risk from COVID will be supplied with masks/visors if they wish to use these. Other members of the public can purchase or manufacture masks if they wish to do so.

What about vaccinations?

Vaccines are safe and effective, and getting yourself a full course of vaccination is the best way of protecting yourself and others against COVID-19.

The Health Services Directorate has been offering COVID-19 Vaccination Clinics in 2022 and will continue to do so. On St Helena we have a high rate of people who have been fully vaccinated with two doses of vaccine, plus a booster.

The vaccination percentages for St Helena (using the 2021 census population count) are shown below.

AZ Vaccination adult population – dose 1	98%
AZ Vaccination adult population – dose 2	97%
Pfizer – 12 - 17 - year olds dose 1	94%
Pfizer – 12 - year olds dose 2	80%
Pfizer – booster - 18 + years (adult)	83%
Pfizer – 5 -11 years children population – dose 1	76%

The administration of COVID-19 vaccines currently in stock will be prioritised to the following people via Vaccination Clinics before August 2022:

Group 1	Individuals who have not received a first or second dose of the COVID-19 vaccine Long-term care facility residents and staff, Prison residents and staff
Group 2	Individuals considered at increased risk (persons on this list will be contacted directly by Health staff)
Group 3	People aged 75 and older
Group 4	Remainder of the eligible population (Notification of these clinics will be given in due course. They will be arranged by age group: 65+. 55+. 45+, etc.)

The first two doses of the vaccine provide protection against severe illness from COVID-19, therefore it is a priority to ensure that any individuals who have previously opted not to be vaccinated, can now have the option to receive their first and second doses. Booster doses offer an added amount of protection to that of the first two doses, however these will only be rolled out once the Health Services Directorate is satisfied that they have reached those who are eligible and consenting to receive their first and second dose. The Health Services Directorate will continue to provide Booster doses to eligible individuals once more stocks of vaccine arrive on-island. Vaccination clinics, dates and times will be communicated via the local media in due course.

If you have not yet received two doses of a COVID-19 vaccine, we strongly recommend that you get vaccinated. Evidence indicates that two doses of a COVID-19 vaccine provides good protection against severe illness, including against the Omicron variant of the disease, but this protection declines slowly over time. Boosters also provide a high level of protection against Omicron, so you are advised to get a COVID-19 booster if you haven't done so yet.

While vaccines, particularly booster doses, provide a high level of protection against severe disease, hospitalisation and death, it is still possible to get COVID-19 and to pass it to others. **We all need to do what we can to reduce the spread of COVID-19 to protect others and to reduce the risk of new variants.**

What about meetings and gatherings?










When a person infected with COVID-19 coughs, talks, or breathes, they release droplets and aerosols which can be breathed in by another person. Meeting outdoors vastly reduces the risk of airborne transmission. However, if you are indoors, then you should ensure that you let fresh air inside to reduce the risk of catching or spreading COVID-19.

This is particularly important before, during, and after meeting with people you do not live with. The advice is to let fresh air in if you meet indoors – meeting outdoors is safer.

What do I do if I suspect I have COVID?

COVID-19 is a respiratory virus which spreads primarily through contact with an infected person, normally generated through coughs or sneezes or through droplets of saliva or discharge from the nose.

Infection with COVID-19 can cause mild symptoms similar to other flu-like viruses,

 FEVER	 NEW CONTINUOUS COUGH	 SHORTNESS OF BREATH
 SEVERE SORE THROAT	 LOSS OF TASTE/SMELL	 NAUSEA AND DIARRHOEA
 SEVERE MUSCLE PAINS	 HEADACHE	 UNEXPLAINED FATIGUE

If you become ill with any of these symptoms do not go to the General Hospital. Instead call the hospital dedicated COVID telephone number 2** where you will be triaged (assessed) and given advice on what to do. (The dedicated phone number will be communicated in due course)**

After you have been triaged and if it is thought that you require a medical review, you will be asked to come to the 'flu Pod at the General Hospital or Bradley's where you will be given a lateral flow test to check if you have COVID and you will be advised what to do.

If you are unwell and need urgent medical attention you will be isolated in a dedicated side room at the hospital, and a further test (a PCR test) will be given to assist in your diagnosis. If you need to be admitted you will be taken to Bradley's hospital.

If you do not require immediate medical attention, you will be asked to return home and will be assessed further within 24 hours by a healthcare professional and given advice on what to do.

If your symptoms are mild you will be advised to stay at home for a period of 5 days and then you can return to normal daily life.

What do I do if it is confirmed that I have COVID?

If you have COVID-19, you are advised to stay at home and avoid contact with other people.

You should:

- not attend work – if you can't work from home, please talk to your employer about your options,
- ask family, friends or neighbours to get food and other essentials for you
- not invite social visitors into your home,
- postpone all non-essential services and repairs that require a home visit

Most people will no longer be infectious after 5 days. If you are feeling well and you do not have a high temperature, the risk that you are still infectious is much lower and you can safely return to your normal routine.

What do I do if I have no option but to leave home?

The most effective way to avoid passing on COVID-19 infection is to stay at home and avoid contact with other people. However, we understand that in some cases this is not always possible, but you should still try to follow the guidance as closely as possible. If you have COVID-19 and you really need to leave your home while you are still infectious, you should take the following steps to reduce the chance of passing on the infection to others:

- Wear a well-fitting face covering made with multiple layers, or a surgical face mask
- Avoid close contact with anyone you know who is at higher risk of becoming severely unwell, especially those with a severely weakened immune system
- Avoid crowded places and using taxis
- Avoid large social gatherings and events, or anywhere poorly ventilated, crowded, or enclosed
- Limit close contact with other people outside your household as much as possible, meet outside and try and stay at least 2 metres apart from them
- Take any exercise outdoors in places where you will not have contact with others
- Be especially careful with your hand and respiratory hygiene.

Ultimately, we are all responsible for doing everything that we can to stop the spread of the disease – the best way to do this is to stay at home and away from other people. Staying at home until you feel better reduces the risk that you will pass on an illness to others in our community and will also help reduce the burden on our health services.

What else can I do to keep myself and others safe?

Wash your hands regularly and cover coughs and sneezes

During this time, you are advised to wash your hands with soap and water, or use hand sanitiser, regularly throughout the day. Regular hand washing is an effective way to reduce your risk of catching illnesses, including COVID-19. It is particularly important to wash your hands:

- after coughing, sneezing and blowing your nose
- before you eat or handle food
- after coming into contact with surfaces touched by many others, such as handles, handrails and light switches
- after coming into contact with shared areas such as kitchens and bathrooms • when you return home.

Avoid touching your eyes, nose and mouth. If you do need to touch your face, for example, to put on or take off a face covering, wash or sanitise your hands before and after. Coughing and sneezing increases the number of droplets released by a person, the distance they travel and the time they stay in the air. Covering coughs and sneezes will help reduce the spread of particles carrying COVID-19 and other viruses.