



**TV Production Guidance:  
Managing the risk of Coronavirus (COVID-19) in production making  
(Version 7 – 8 September 2021)**

**Status**

This latest version of the guidance has been produced as a result of the UK removing a number of government restrictions and as the risk from COVID-19 moves into a more dynamic phase. **As at the date of this document, England has moved to Step 4 of the Roadmap.**

This guidance updates and replaces Version 6 which was published in January 2021, at a time when the UK was in lockdown measures.

The industry is mindful that as specific government restrictions fall away, production companies will need to continue to approach COVID-19 risks in the same way as any other health and safety risk, in order to determine which measures are required to meet safety and health duties in the production environment.

Production companies will need to continue to monitor and adhere to the latest Government advice on COVID-19. These guidelines are based on the practical application, within a TV production setting, of the latest government guidance alongside health and safety law in the UK.

Whilst this guidance makes note, where known, of variances of approach within the four nations, those operating in Scotland, Wales, Northern Ireland, the Channel Islands and the Isle of Man should check any local restrictions. The health and safety regulators within each nation will consider government guidance in connection with the management of workplace risks in the enforcement of relevant health and safety regulations. Similarly, productions working outside the UK should take careful note of the rules that apply in the jurisdiction in which they are operating.

For production in Scotland, this guidance document should be read in conjunction with Scottish Government guidance on wider public health and fair work principles. Further information can be found [here](#)<sup>1</sup>.

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<sup>1</sup> <https://www.gov.scot/publications/coronavirus-covid-19-general-guidance-for-safer-workplaces/pages/overview/>

## Purpose

This document is intended as a high-level framework to provide guidance and support for the effective assessment and management of **COVID-19 risk in TV production**. This should be read in conjunction with government safer working [guidance](#), that has been updated for Step 4 of the Roadmap (from 19 July), about management of COVID-19 risks in workplaces, and the [HSE guidance](#).

Note. The Government guidance on social distancing no longer applies generally but whilst contact tracing remains in place, productions may still stipulate social distancing as a control measure to ensure business continuity and reduce the risk of COVID-19 spread in the workplace.

At the date of publication, the majority of specific legal Coronavirus restrictions in England have been removed by the government but the position varies across the four nations. Businesses should therefore carefully review legal requirements as restrictions applicable in the nations where they are. Further information can be found at [the government's Coronavirus Legislation pages](#).

Production companies are required under health and safety law to carry out health and safety risk assessments about material health and safety risks and this document is therefore aimed to help production companies to identify what measures might be considered to be 'reasonably practicable' in the context of the COVID-19 risk.<sup>2</sup> This guidance document is aimed to help production companies comply with health and safety requirements in COVID-19 including interpretation of non-industry specific government guidance. Production companies may choose to go further to protect their staff and contributors, and their business output if they wish.

## Approach

### Government approach

The Government's [roadmap for emerging from lockdown](#) in England set out the intended easing of restrictions over time and it has now published the [Covid-19 Summer Response](#) which updates on the approach around restrictions.

The dates, measures and degree of detail for the relaxation of public health measures differ between [England](#), [Scotland](#), [Wales](#) and [Northern Ireland](#) but the principles for relaxation are very similar.

### The TV Production industry approach

Irrespective of the UK government's approach in removing specific legal Covid-19 restrictions, and those in the devolved administrations, individual businesses in the UK will need to carry out a risk assessment that includes the risk of COVID-19 and consider the appropriate measures in place in order to meet their health and safety legal duties.

**Part 1** of this guidance is aimed at helping companies to understand legal duties and the application of any remaining legal restrictions and Government guidance.

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<sup>2</sup> As part of the duty on all businesses in the UK under the Health and Safety at Work etc. Act 1974 to take **all reasonably practicable steps to ensure the safety of both their employees and others impacted by the business** (freelancers, visitors, contractors etc.) and under the Management of Health and Safety at Work Regulations 1999 to undertake 'suitable and sufficient' health and safety risk assessments.

**Part 2** builds on the legal framework by describing how production companies might approach their risk assessment and the types of reasonably practicable measures they could apply to reduce COVID-19 risks in the TV production environment.

### **General duties**

As per previous versions of this guidance:

**Producers** will need to:

- complete suitable and sufficient risk assessment of the risks of COVID-19 for their activities,
- record how they are managing significant COVID-19 risks in a risk assessment document,
- engage with their workforce, any recognised trade union and/or employee representatives with this process (providing information to employees about how they will keep people safe, prior to the commencement of production),
- look at the 'priority actions' in the [Working Safely in COVID-19 Guidances](#) (i.e. complete a risk assessment, provide adequate ventilation, clean more often, turn people away with COVID-19 symptoms, enable people to check in at your venue, communicate and train.),
- put together information to assure others (including Commissioners) that appropriate assessments have been completed. This information should be published on their website wherever possible, particularly if they have more than 50 employees.

**Commissioning Broadcasters** should seek assurance that suitable COVID-19 risk assessments have been undertaken. They will also need to engage with Producers about the management of COVID-19 risks since controls may impact on the timescales, content and cost of production.

### **RIDDOR**

In certain circumstances workplace COVID-19 infections are reportable under [RIDDOR](#)<sup>3</sup>, the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 - these requirements should be considered within production protocols.

### **Equality in the Workplace**

In applying this guidance, employers will need to understand and take into account the particular circumstances of different groups of workers or individuals. It is unlawful to discriminate, directly or indirectly, against anyone because of a protected characteristic although there are certain exceptions to this where a balance can be struck between this requirement and the needs of safety, provided that such conduct can be objectively justified. The Government guidance on discrimination can be found [here](#). Employers should involve and communicate appropriately with workers whose protected characteristics might either expose them to a different degree of risk, or where steps being considered might be inappropriate or challenging for them. Additional measures or adjustments may be required as a result and any steps taken must not have an unjustifiable negative impact on some groups compared to others, for example, those with caring responsibilities or religious commitments.

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<sup>3</sup> <https://www.hse.gov.uk/coronavirus/riddor/index.htm>

Employers have additional responsibilities towards disabled workers and those who are new or expectant mothers. Reasonable adjustments must be made to avoid disabled workers being put at a disadvantage. The health and safety risks of new or expectant mothers must be assessed and the Government's [COVID-19 advice for pregnant employees](#) can be referred to.

### **Application of this guidance**

This guidance provides background information and risk assessment guidance for TV production, including detail on basic requirements, key areas to consider and controls. The latest government guidance and information for the UK can be found on the [GOV.UK](#)<sup>4</sup> website. Guidance for employers on making workplaces COVID-secure can be found in [Government guidance on safer working](#) and on the [Health and Safety Executive](#)<sup>5</sup> website .

For specific guidance relevant to Scotland, please see the latest guidance and information on the [Scottish Government](#)<sup>6</sup> website. For Wales, please see the latest on the [Welsh Government](#)<sup>7</sup> website and for Northern Ireland please see the [Northern Ireland Government](#)<sup>8</sup> website.

COVID-19 is a health and safety risk that should be considered within the overall responsibility structure which ensures appropriate standards of health and safety are achieved and maintained throughout the production process.

This guidance covers the broad range and scale of all TV programme making in every genre for TV. Specific information and guidance on managing the risks associated with film and high-end TV drama productions can be found in the [British Film Commission \(BFC\) guidance](#)<sup>9</sup> which should also be considered for productions within that genre.

This guidance has been produced through a collaboration of cross industry experts in this area.

This guidance was accurate as at the date of publication. When referring to it, you should check that there have not been subsequent significant changes in law or relevant guidance.

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<sup>4</sup> <https://www.gov.uk/coronavirus>

<sup>5</sup> <https://www.hse.gov.uk/coronavirus/>

<sup>6</sup> <https://www.gov.scot/coronavirus-covid-19/>

<sup>7</sup> <https://gov.wales/coronavirus>

<sup>8</sup> <https://www.nidirect.gov.uk/campaigns/coronavirus-covid-19>

<sup>9</sup> <http://britishfilmcommission.org.uk/guidance/regarding-covid-19-coronavirus/>

## **Part 1**

### **Understand any specific Coronavirus legal restrictions to the TV industry which may apply**

Whilst any specific government COVID-19 legal restrictions remain in the UK, it is important for production companies to understand how to implement those restrictions into the production environment. Key issues have been set out below.

Understanding the application of the specific COVID-19 legal restrictions relating to a production company however is only one element that needs to be considered in business planning and risk assessment. **Irrespective of any government/ legal restrictions, the company will also need to consider the risk of COVID-19 in the workplace, carry out a suitable and sufficient risk assessment that includes the risk of COVID-19, and identify control measure to manage this risk.** The second part of this guidance (pp. 7 to 18) provides further detail on this.

#### **1. Can we still produce TV in the UK?**

Television production is permitted in England, Northern Ireland, Scotland and Wales. However, specific consideration should be given to any localised COVID-19 restrictions which could impact on filming before the filming takes place.

Each UK nation set out a roadmap out of lockdown including specific dates. More detail on the current local restrictions in place and each nation's plans for easing restrictions can be found here;

- [England](#) <sup>10</sup>
- [Wales](#) <sup>11</sup>
- [Scotland](#) <sup>12</sup>
- [Northern Ireland](#) <sup>13</sup>

Planning for the management of the COVID-19 risk should be done in close collaboration with your commissioning network. If you engage third parties to provide the production with key services or equipment you should review their risk management plans for COVID-19. This should be an integral part of your own planning where they could impact the overall risk on your production and/or you are reliant upon them for the provision of people, products or services that are key to your production.

#### **2. Events and productions with an audience**

The applicable law may vary within the UK country to country and it is important to check legal requirements as at the date of production activity as well as applicable Government guidance.

The relevant guidance in England for production events and audiences can be found in the [Events and attractions](#) and [guidance for safer businesses and workplaces](#)<sup>14</sup> in Scotland. Check for any national or local guidance.

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<sup>10</sup> <https://www.gov.uk/coronavirus>

<sup>11</sup> <https://gov.wales/coronavirus>

<sup>12</sup> <https://www.gov.scot/coronavirus-covid-19/>

<sup>13</sup> <https://www.nidirect.gov.uk/campaigns/coronavirus-covid>

<sup>14</sup> [Coronavirus \(COVID-19\): safer businesses and workplaces - gov.scot \(www.gov.scot\)](#)

### **3. Domestic Travel**

For travel within the four nations, you should refer to current regulations and guidance from relevant authorities including [here](#). Individuals can currently travel freely between England, Scotland, Wales and Northern Ireland. Further information for travel in Scotland can be found [here](#)<sup>15</sup>. For England, [the COVID-19 Safer travel guidance for passengers](#) can be referred to.

Productions should always consider whether there are local restrictions in place where they are filming.

### **4. International Travel**

If international travel to/from the UK is required as part of the production you should consider the latest international travel restrictions and guidance for the UK country the individual is travelling to or from and plan for this, you should also take into consideration that this advice can be updated at very short notice. Further detail can be found at [guidance for travel abroad](#). Further information for international travel from/to Scotland can be found [here](#)<sup>16</sup>.

### **5. Protecting people who are at higher risk from COVID-19**

Some people are more at risk of becoming seriously ill if they develop COVID-19 and the specific consideration required for these groups are set out in Part 2. See guidance on [who is at higher risk](#) and [protecting people who are clinically extremely vulnerable](#). It is the responsibility of production companies to give extra consideration to people at higher risk and to workers facing mental and physical health difficulties. Continue to support these workers by discussing with them their individual needs and supporting them in taking any additional precautions advised by their clinicians.

Consider providing support for workers around mental health and wellbeing. This could include advice or telephone support.

Production companies must create safe environments for everyone so all individuals can do their job, whatever reasonable adjustments they may require. It is important that production companies do not make assumptions about clinically vulnerable or disabled people but instead have an open dialogue with these staff, and contributors, and ask them what they need to do their job safely and effectively. Do not assume that if a person is disabled that they will be automatically classed as clinically extremely vulnerable.

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<sup>15</sup> <https://www.gov.scot/publications/coronavirus-covid-19-guidance-on-travel-and-transport/>

<sup>16</sup> <https://www.gov.scot/publications/coronavirus-covid-19-international-travel-quarantine/>

## Part 2

### **Prepare your COVID-19 Production Risk Assessment**

The Management of Health and Safety at Work Regulations 1999 require productions to protect employees, and others, from harm. That means that companies must:

- identify what could cause injury or illness in the production (risks)
- decide how likely it is that someone could be harmed and how seriously (the assessment of risk)
- take action to eliminate the hazard, or if this isn't possible, control the risk (the controls)

The risk in this case is the SARS-CoV-2 virus that causes COVID-19. The risks to consider here are aerosol and droplet transmission and surface transmission. Risk assessment involves identifying who might be harmed, what action can be reasonably taken to control the risk and how that can be applied in the production context. When documenting their risk assessment, productions may wish to include their assessment of COVID-19 in their main production risk assessment, or as a separate risk assessment.

### **Approaching severity and likelihood of harm in your COVID-19 Production Risk Assessment**

When carrying out a COVID-19 risk assessment, **the impact of any harm from the virus** (severity) and the **likelihood of harm occurring** requires consideration. It is suggested that the *severity* of harm from COVID-19 will not change substantially and is likely to be consistently noted as 'high' in the risk assessment document because of the risk of serious illness or death.

However, in terms of *likelihood*, this changes during the pandemic as levels of community transmission change (i.e. the number of infected people cast and crew could be exposed to in a work environment at a given time).

### **Points to consider in your COVID-19 Production Risk Assessment:**

Production companies should consider Government guidance notes on [Working safely during coronavirus \(COVID-19\)](#) in addition to this industry guidance which focuses on the TV production industry.

In the context of TV production, you are likely to need to consider the following points to determine risk and any necessary control measures to reduce the risk of COVID-19 on the production.

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## 1. Those people at higher risk of harm

*COVID-19 is a disease which is more likely to lead to severe illness (and even death) in some groups of people, notably those who are older and/or suffer from pre-existing medical conditions. See guidance on [who is at higher risk](#) and [protecting people who are clinically extremely vulnerable](#)<sup>17</sup>.*

In Scotland, the term 'extremely high risk of severe illness' is used for rather than 'clinically extremely vulnerable' and further guidance can be found at [NHS Inform](#)<sup>18</sup>.

- If someone working on a production is in the [clinically extremely vulnerable](#)<sup>19</sup> category, at higher risk from COVID-19<sup>20</sup>, or lives in a household with people / cares for people who are in the clinically extremely vulnerable category, then the production team should talk to the individual concerned about their situation and agree ways of managing risk.
- Other factors may affect, or be perceived as affecting, an individual's risk and all those involved in the production should be asked whether they consider themselves to be particularly vulnerable or at higher risk from COVID-19.
- UK Government's working safely guidance <sup>21</sup>for businesses sets out principles on how to protect those at higher risk including giving appropriate consideration to home working. More information can be found [here](#)<sup>22</sup>
- People falling into a high risk category, or considering themselves to be at higher risk, should be offered personalised risk assessments, where deemed necessary, with input from an appropriate healthcare professional and/or the individual's own medical practitioner.

In Scotland, the term 'extremely high risk of severe illness' is used for rather than 'clinically extremely vulnerable' and further guidance can be found at [NHS Inform](#)<sup>23</sup>.

## 2. Heighten precautions for everyone at work

*There is no single measure that can ensure a workplace is "COVID-19 Secure". Protection relies upon layers of defence, each of which reduces the chance of the disease being transmitted. There is an established "hierarchy of controls" in which elimination of the hazard is the most effective measure followed by engineering controls, administrative controls and only finally personal protective*

<sup>17</sup> <https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>

<sup>18</sup> <https://www.nhsinform.scot/illnesses-and-conditions/infections-and-poisoning/coronavirus-covid-19/coronavirus-covid-19-shielding>

<sup>19</sup> <https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>

<sup>20</sup> <https://www.nhs.uk/conditions/coronavirus-covid-19/people-at-higher-risk/whos-at-higher-risk-from-coronavirus/>

<sup>21</sup> <https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19>

<sup>22</sup> <https://www.hse.gov.uk/coronavirus/working-safely/protect-people.htm>

<https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19%23work>

<sup>23</sup> <https://www.nhsinform.scot/illnesses-and-conditions/infections-and-poisoning/coronavirus-covid-19/coronavirus-covid-19-shielding>



equipment. For COVID-19, good practice should consider outdoor space/ adequate ventilation, reducing contact between people, use of face coverings, frequent hand washing/ sanitising and regular cleaning of surfaces.

- Anyone with symptoms of COVID-19 (e.g. high temperature, new continuous cough or loss/ change to sense of taste/ smell) should remain at home in accordance with government requirements.

Consider the best way to reinforce this message within production teams. This may be in the form of self-declarations, daily or periodic checks or other ways deemed appropriate. If the process introduced collects any personal data, you must ensure this is in line with GDPR requirements.

- Procedures should promote appropriate personal control measures such as:
  - Washing or sanitising hands frequently, with particular attention to areas/ activities where objects/ surfaces are touched regularly by different people, or objects are shared.
  - Wearing a face covering in enclosed and crowded spaces.
  - Reducing contact between people. E.g. By reducing the number of people each person has contact with by using 'fixed teams or partnering' or 'cohorting' (so each person works with only a few others), or by using screens/barriers to separate people, or avoiding face to face working.
- Make sure everyone's contact numbers and emergency contact details are up to date and everyone is made fully aware of COVID-19 symptoms and when they should not be at work. It is also important to consider how you keep records of who is in the workplace and when so that in the event of a positive test of an individual who has been in the workplace you are able to inform other members of the production team as appropriate.
- Production schedules and plans should take into consideration the extra time required to properly implement the measures required under this guidance. Specific training for production teams may also be required in managing the COVID-19 risk to give specific guidance on applying the identified controls and understanding the risks. This training will need to be suitable, sufficient and timely and should be detailed through the risk assessment process.
- Undertaking activities outdoors or in well ventilated spaces where possible.
- Maintaining regular cleaning of surfaces, particularly surfaces that people touch regularly.

### **What to do if someone displays symptoms**

If someone displays symptoms of coronavirus they should stay at home and [arrange to have a test](#)<sup>24</sup>. If they are at work they should return home directly. If they don't have access to the internet, a test can be organised by calling 119 (in England, Wales and Northern Ireland) or 0300 303 2713 (in Scotland). They must isolate whilst waiting for the test result, and if the test result is positive, continue to isolate until 10 full days of isolation has been completed<sup>25</sup>.

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<sup>24</sup> <https://www.nhs.uk/conditions/coronavirus-covid-19/testing-and-tracing/get-a-test-to-check-if-you-have-coronavirus/>

<sup>27</sup> <https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection>

<sup>25</sup> [When to self-isolate and what to do - Coronavirus \(COVID-19\) - NHS \(www.nhs.uk\)](#)

If you have been vaccinated or have had COVID-19 previously, you should still isolate if you have symptoms and you should arrange to take a PCR test. This is because it is still possible to get COVID-19 and spread to others even if you are vaccinated.

### **What to do immediately if someone informs you of a positive test**

If someone informs you they have had a positive COVID-19 test result you should stop them physically coming to work, when they are legally required to stay at home and self-isolate. Follow the [workplace guidance on self-isolation](#)<sup>28</sup>.

Guidance for anyone who has been in contact with a person they do not live with who tests positive for coronavirus, including what constitutes as 'contact', can be found [here](#)<sup>26</sup> for England.

Public health guidance for testing and self-isolation in Scotland can be found [here](#)<sup>27</sup>. For [Wales](#) and [Northern Ireland](#) follow the respective national guidance for self-isolation. At the time of publication, there are some differences to exemptions nationally.

### **What records should you keep?**

You should ensure that you have a system to identify and record instances where individuals have come into close contact with others in the course of activity in the workplace. To support accurate and effective tracing of close contacts it may be advisable for you to request that any production member discusses with you the appropriate information for those tracing to act upon and what information should be supplied to the relevant tracing bodies. You should also consider any potential data privacy issues this may involve.

### **What other action should you take?**

You should ensure that anyone who tests positive is asked to describe all situations within the 48 hours before the test was taken / symptoms started where they have come into [close contact](#) with other people on the production. This should be done in an open and blame free manner so that accurate information can be provided to the authorities and so that control measures can be revised or strengthened if required.

### **What should you do if there are multiple cases in the workplace?**

In the event of multiple cases in the workplace you should ensure that you follow the latest local guidance in [England](#)<sup>28</sup>, [Scotland](#)<sup>29</sup>, [Wales](#)<sup>30</sup> and [Northern Ireland](#)<sup>31</sup>. This may involve you being contacted by or needing to report to your local public health team.

Further public health guidance for Scotland can be found [here](#)<sup>32</sup>.

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<sup>26</sup> <https://www.gov.uk/government/publications/guidance-for-contacts-of-people-with-possible-or-confirmed-coronavirus-covid-19-infection-who-do-not-live-with-the-person/guidance-for-contacts-of-people-with-possible-or-confirmed-coronavirus-covid-19-infection-who-do-not-live-with-the-person>

<sup>27</sup> <https://www.gov.scot/publications/coronavirus-covid-19-test-and-protect/pages/summary/>

<sup>28</sup> <https://www.gov.uk/guidance/nhs-test-and-trace-workplace-guidance>

<sup>29</sup> <https://www.gov.scot/publications/coronavirus-covid-19-general-guidance-for-safer-workplaces/pages/workforce-planning-and-support/>

<sup>30</sup> <https://gov.wales/keep-wales-safe-work.html>

<sup>31</sup> [https://www.publichealth.hscni.net/sites/default/files/2020-09/CTS%20flowchart%20for%20business\\_0.pdf](https://www.publichealth.hscni.net/sites/default/files/2020-09/CTS%20flowchart%20for%20business_0.pdf)

<sup>32</sup> <https://www.gov.scot/publications/coronavirus-covid-19-test-and-protect/pages/advice-for-employers/>

### **3. Number of people involved in a production / contact of people onsite**

*This is likely to be a critical control to managing the risk and should be considered before a more detailed risk assessment, key considerations would be;*

- Minimising workers needed on site to complete the work activity
- Maximising technology to enable roles and activities to be done from home and remotely wherever possible
- Reduce the number of people workers come into contact with. *Government guidance on social distancing no longer applies generally and there are no limits on social contact between people from different households. However, COVID-19 can still be spread through social contact.*

Examples of ways to do this include:

- Reducing the number of people each person has contact with by using 'fixed teams or partnering' or 'cohorting' (so each person works with only a few others)
- Reviewing layouts, using screens or barriers to separate people from each other, or using back-to-back or side-to-side working, instead of face-to-face (screens are only likely to be beneficial if placed between people who will come into close proximity with each other)
- Productions may still choose to follow social distancing, such as 2m separation between individuals, determined by their risk assessment

#### **Other considerations**

Any roles that are key to ensuring safety during specific higher risk on set activity should be considered essential to that activity taking place, these should be specified in the risk assessments for the higher risk activities (such as stunts or SFX).

Some individuals may have specific requirements which necessitate additional people on site – e.g. disabled or deaf people may need an assistant or a sign language interpreter in order to carry out their role.

For productions who are continuing with social distancing at this time, due to the unique circumstances in managing the COVID-19 risk in production and the complexity of maintaining social distancing, when considering the limits to people permitted on set, you may still need to allow parents or guardians to accompany children. Parents may assist with aspects of preparing their children, which can include hair, makeup and clothing - perhaps under tutorial when required. The use of parents in this role is only permissible when mitigating COVID-19 risks; the use of chaperones is preferable, but productions should use their discretion on this when implementing COVID-19 safety restrictions. If parents do fulfil this role, the safeguarding planning must be part of the risk management process and would normally include being briefed in a similar way to chaperones.

There are specific groups of people that may need access to a set including trade union representatives and essential visits of agents or professional advisors. Visits should be made in line with the safety measures introduced for the location.

Any overall reduction in people should not have a negative impact on other, non-Coronavirus (COVID-19) safety related, aspects of the production.

#### **4. Editorial 'on camera' requirements**

*A key consideration is how the creative and editorial requirements of the production can be met and measures should be agreed with Commissioning Networks within the parameters of the current restrictions. Examples of measures may include:*

- Changes to script and scenes to take into account reduction in contact of workers (whether this is social distancing or otherwise – determined by the production risk assessment).
- Changes to set to take into account the reduction in contact of workers.
- Use of 'green screens' and 'down the line' to support minimising numbers on production.
- Scripts should be provided as early as possible to support with planning.
- Directors and other relevant roles may need to be brought on earlier in the planning and prep for production to establish what is required to deliver the production within the restrictions of managing the COVID-19 risk.

#### **Other considerations**

Where provisions introduced to manage the risks of COVID-19 result in additional requirements being placed on cast outside of their engagement period, these should be discussed fully beforehand.

Where children are part of a production, remember that all relevant child safeguarding measures still apply and that performance licensing requirements are still enforceable.

If you are filming within a household with children present you should consider both COVID-19 risks and usual risk considerations associated with working with children (including safeguarding) as part of your assessment process.

#### **5. Ventilation**

*Airborne spread is a major route of transmission for the SARS-CoV-2 virus that causes COVID-19 and maximising the amount of fresh air people are breathing is a critical control measure.*

- Where practicable, filming and other production related activity should be conducted outdoors. This is even more important for higher risk activity such as exercise or when people are singing or raising their voices.
- Where indoor activity is essential, spaces should be as large as possible and should be ventilated effectively before, during and after people are present.
- Ventilation may be natural (opening windows, doors and vents), mechanical (fans and ducts) or a combination of both.
- Provide a good fresh air supply and avoid indoor areas where fresh air supply is difficult (e.g. internal back rooms).
- Where mechanical ventilation is used, ensure systems are set to maximise fresh air and minimise air recirculation. Maximise the amount of fresh air the system draws in and provide additional fresh air where necessary.

- Identify any poorly ventilated spaces as part of the production risk assessment and take steps to improve fresh air flow in these areas. HSE provides guidance on how to identify a poorly ventilated space. It also explains steps you can take to improve ventilation in these spaces. Read the [advice on air conditioning and ventilation](#). Where ventilation in a space cannot be improved, it may be safer to restrict the time spent in the space and number of people who access it, or altogether stop using it.
- Carbon dioxide (CO<sub>2</sub>) monitors can be used to establish if there is a build-up of CO<sub>2</sub> in an area. People exhale CO<sub>2</sub> as they breathe out and so this would provide an indication if ventilation needs improving. Follow the [HSE guidance on CO2 monitoring](#).
- For further guidance on indoor ventilation and air changes:
  - [GOV UK: Working safely during COVID-19](#)
  - [GOV UK: Ventilation of indoor spaces to stop the spread of COVID-19](#)
  - [HSE: Ventilation and air conditioning during the COVID-19 pandemic](#)
  - Detailed [ventilation guidance](#) for workplaces and public buildings during the pandemic is provided by the Chartered Institution of Building Services Engineers (CIBSE).
  - Scottish Government ventilation guidance can be found [here](#)<sup>33</sup>.

## 6. Travel

*Follow the current government guidance on any local or international travel restrictions (See Part 1 for further information). Further to a production risk assessment, considerations may include:*

- Digital or technical alternatives which eliminate (as a first point) or if that is not reasonably possible, minimise, the need for travel outside the home where necessary
- Use of local crew and contributors to help minimise the need for travel where necessary
- Travelling in separate private vehicles, or where using multiple occupancy/ vehicle sharing considering seating positions, vehicle ventilation and face coverings to minimise transmission risks. Also considering travelling in fixed teams and consider the impact of a positive COVID-19 case.
- If more people will be driving to the workplace than normal, considering if you have appropriate parking facilities available.
- If public transport is required, considering travel at off-peak times, use of quieter stations and stops and keeping changes to a minimum. Follow [current public health guidance](#) (safer travel on public transport). For further information for travel in Scotland can be found [here](#)<sup>34</sup>.
- Whether face coverings are mandated or recommended on public or shared transport (including taxis and ride-sharing operators), depending on the nation, and where local rules stipulating that they are a condition of travel. Refer to national guidance for [Wales](#), [Scotland](#), [England](#) and [Northern Ireland](#) about where face coverings are required to be worn.
- Washing or sanitising hands before and after using any public transport, including taxi or shared vehicle.
- Wiping down vehicle touchpoints.

## 7. Locations

<sup>33</sup> <https://www.gov.scot/publications/coronavirus-covid-19-ventilation-guidance/>

<sup>34</sup> <https://www.gov.scot/publications/coronavirus-covid-19-guidance-on-travel-and-transport/>

*Consider the physical capacity of the space if you are social distancing/ reducing contact (depending on your risk assessment) between production staff/ contributors/ visitors/ audience members. Also consider the provision of hygiene facilities and ventilation. Consider key risks you may be introducing to others who already occupy the space and cleaning of the premises prior to and during occupation controls. Considerations are likely to include:*

- Relevant topics in separate sections including ventilation, travel and the wearing of face coverings.
- Using available studio space in such a way that means you can minimise turn around and avoid the need to move equipment unnecessarily.
- Marking out routes and areas to support in managing social distancing if your risk assessment requires it.
- Ensuring adequate space to separate out cohorts where using the Close Contact Cohort approach set out in **Annex A**.
- Effective cleaning routines and requirements. This may include supplementing daily general cleans with intermediary cleaning of high usage areas and provision of materials for user wipe down of touch points.
- Providing adequate hand washing/ sanitiser facilities and ensure they are readily available to teams. Regular hand washing/ sanitising should be encouraged through clear signage.
- Food and beverage areas should be cleaned regularly with a focus on touch points.

## **8. Work Activities**

*Consider the activities that people are going to need to undertake across roles on production, and if these can be adapted or changed to reduce risk. Considerations are likely to include:*

- How activities can be designed to reduce contact between members of the production team (or achieve social distancing where the production risk assessment requires it), or use physical barriers (such as plexiglass screens).
- Where close contact is required, consider the use of Bubbles or Close Contact Cohorts in line with Annex A.
- Review and modify set design to minimise rigging time and to avoid the need for close working as far as possible.
- Review hair and makeup and ensure that [government guidance on close contact services](#) is followed. Further information for close contact services in Scotland can be found [here](#)<sup>35</sup>. Consider the impact of a positive COVID-19 case.
- The provision of appropriate induction and refresher training is provided to personnel on COVID-19 risks and the control measures identified in your risk assessment.
- Identify a nominated person to monitor compliance with your COVID-19 risk assessment on set and ensure they have sufficient authority to take any appropriate action.

## **9. Work Equipment**

*Work equipment is key to TV production from cameras and headsets to edit suites. Good hygiene and managing potential issue with touchpoints should be addressed. Considerations are likely to include:*

- Where practicable, providing work equipment for single person use.
- Where sharing equipment is necessary, ensuring provision is made for users to sanitise equipment before and after use.

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<sup>35</sup> <https://www.gov.scot/publications/coronavirus-covid-19-close-contact-services/pages/high-risk-zone-and-good-practice/>

## **10. Work Patterns**

*Additional precautions to manage the COVID-19 risk could lead to increased prep and overall production time. There will be deadline pressures and a foreseeable temptation to stretch the 'camera hours' and the working day to deliver, this must be considered and addressed within the production culture from initial briefings to day to day reinforcement of key messages. Whilst many will be keen to return to work, many others will be anxious and concerned about health risks from COVID-19. Consideration of the impact of this on production teams should be factored into the working schedules which may impact the length of working day deemed appropriate at this time. Work patterns may also enable you to have small groups (cohorts) of people who don't come into contact with other groups and this should be a planning consideration. Considerations are likely to include:*

- Aiming to keep teams of workers small, reducing mixing where practicable and keeping teams together as cohorts.
- Scheduling work to minimise the overlap between teams as far as is reasonably practicable.

## **11. Rest Areas**

*Rest areas are very important but may need some reconfiguration and planning around breaks to ensure rest areas are as safe as possible. Considerations are likely to include:*

- Using scheduling and limitation of numbers to help reduce work place contacts and avoid crowding.
- Following government guidance on food and beverage services including [Government guidance for restaurants, bars, pubs and takeaways](#). For Scotland, please see food sector guidance [here](#)<sup>36</sup>.
- Taking steps to reduce crowding in the toilet areas.

## **12. Medical Provision**

*Consider that emergency services are under great pressure so may not be able to respond as quickly as possible alongside this Coronavirus (COVID-19) poses a potential risk to first aiders. Ensure your first aid provision is adequate and that first aiders are familiar with current government guidance. Considerations are likely to include:*

- Ensuring that your first aid provision is adequate and that first aiders are familiar with [current government guidance](#).
- The adequacy of healthcare provision on set, and the reliance on local services, depending on the risk level.
- Reviewing schedules for higher risk scenes, such as stunts and SFX, in the context of the COVID burden on local healthcare facilities. These scenes may need to be minimised / numbers participating reduced, or postponed, depending on the level of risk.

## **13. Face coverings and Personal Protective Equipment (PPE)**

*PPE should be continued to be used in a work activity where it was already being used to protect against non-COVID risks, this should be determined by risk assessment. The precautionary use of PPE to protect against COVID-19 should not be encouraged unless in a clinical setting or responding to a suspected or confirmed case of COVID-19.*

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<sup>36</sup> <https://www.foodstandards.gov.scot/publications-and-research/publications/covid-19-guidance-for-food-business-operators-and-their-employees>

*Face coverings reduce airborne transmission by filtering out most of the droplets and some aerosol in the breath of the wearer, thereby reducing the chance that they can pass on the virus. They also provide limited protection to the wearer, partly through filtration and partly by increasing humidity levels within the breathing zone. Considerations are likely to include:*

- There are currently some places where you must wear a face covering by law. Rules vary across the UK and are detailed on the relevant websites for [England](#)<sup>37</sup>, [Northern Ireland](#)<sup>38</sup>, [Scotland](#)<sup>39</sup> and [Wales](#)<sup>40</sup>. Production teams should be aware that some individuals are unable to wear face coverings due to their medical condition or disability and may be exempt in law (including children, dependent on their age). Be aware that face coverings may make it harder to communicate with people who rely on lip reading, facial expressions and clear sound.
- Wearing face coverings is good practice, especially when indoors where contaminated aerosols can “hang” in the atmosphere. This is especially important in enclosed and crowded spaces.
- Consider encouraging the use of face coverings by workers (for example through signage), particularly in indoor areas where they may come into contact with people they do not normally meet. Where people are required/ choose to wear a face covering, support them by providing advice on how to use one safely ([Advising your workers](#) UK GOV).
- Face coverings should cover both nose and mouth and are most effective when composed of three layers.
- Face visors are not an alternative to face coverings as they do not act as a filter. They may be appropriate in addition to face coverings in some circumstances.
- Ensuring appropriate PPE in the workplace will be determined by risk assessment and any other government guidance and should be considered as necessary to supplement other control measures put in place on a production.
- Any work activities or environments where you might want to mandate the use of face coverings in the work place, depending on the level of risk.

### **Other considerations**

Where people are unable to wear face coverings, and have concerns, production teams should discuss alternative ways of managing risk with the individuals.

Particular issues arise for people who are hearing impaired and rely on lip reading. Production teams should explore alternative options to standard face coverings with the person concerned and may need to seek specialist advice.

### **14. Testing**

*Testing for COVID-19 cannot eliminate the risk of viral transmission. It is of value to public health authorities and productions may wish to support the national effort through workplace testing. However, testing is complex, onerous and costly – productions should be absolutely clear about what they are trying to achieve before embarking on a programme.*

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<sup>37</sup> <https://www.gov.uk/government/publications/face-coverings-when-to-wear-one-and-how-to-make-your-own/face-coverings-when-to-wear-one-and-how-to-make-your-own#when-to-wear-a-face-covering>

<sup>38</sup> <https://www.publichealth.hscni.net/covid-19-coronavirus/covid-19-information-public#face-coverings>

<sup>39</sup> <https://www.gov.scot/publications/coronavirus-covid-19-public-use-of-face-coverings/>

<sup>40</sup> <https://gov.wales/face-coverings-guidance-public>



*In the context of employment there are three reasons that could justify testing:*

- 1. Test to protect – part of a comprehensive risk management programme*
- 2. Test to enable - enabling activities that would otherwise be considered inappropriate when COVID-19 is circulating.*
- 3. Test to release – foreshortening periods of quarantine or self-isolation with official sanction.*

- People with symptoms of COVID-19 or contacts of someone who has tested positive should be asked to go home and use [the free Government scheme](#) to arrange a test.
- People who do not have symptoms can [order free packs of tests](#) for home testing if they wish.
- Productions planning to incorporate testing as part of their general safety management system should take specialist advice about whether to do so and how.
- Productions seeking to establish Close Contact Cohorts to enable specific activities should refer to **Annex A**.
- Rules on testing related to travel and associated quarantine or self-isolation can be found [here](#).

Further information on workplace testing in Scotland can be found [here](#)<sup>41</sup>.

### **Other considerations**

Establishing the need for COVID-19 testing should always be the first step – only then should consideration be given to detail such as sampling strategies and the type of test to use.

Setting up an effective testing regime is complex and specialist guidance should be sought.

False positives and false negatives both cause difficulties for productions and the chances of them occurring (positive and negative predictive values) vary with levels of community transmission.

If a decision to test is made, the list of private providers who have self-declared that they meet the Government's minimum standards for general testing and/or test to release may be helpful.

Detailed consideration of the issues relating to testing for SARS-CoV-2 is beyond the scope of this document [and fuller guidance is available in a Health & Safety Executive review](#) of the topic.

### **15. Contact tracing**

*National Governments and Health Services have established systems to trace people who are believed to have been in contact with someone who develops COVID-19. While most contacts are likely to occur away from work, productions should maintain records relating to people who have been in close contact on set, whether planned or inadvertently. Such records will assist the authorities and potentially limit disruption caused by cast or crew being required to self-isolate unnecessarily.*

When considering the record that should be kept, companies should think about:

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<sup>41</sup> <https://www.gov.scot/publications/coronavirus-covid-19-general-guidance-for-safer-workplaces/pages/workforce-planning-and-support/>

- Records relating to people who have been in [close contact](#) with others while working on a production, including the times spent in contact;
- The need to meet any data protection requirements.
- The fact that wearing face coverings and masks will not obviate the need to maintain records of exposure.
- Provide guidance to production teams, to enable them to respond appropriately to a COVID-19 outbreak in the workplace. Plans for contacting your [local authority public health team](#) if you've had an outbreak **and** need further guidance (including nominating a single point of contact from your business to liaise with public health if required) .
- [Additional record keeping requirements](#) apply to productions in certain circumstances, such as where there is an audience and you should refer to guidance of [Events and attractions](#) for further information.

## 16. Vaccination

*Vaccination against the virus that causes COVID-19 is an important public health measure in controlling the pandemic. Productions may therefore wish to encourage people to take up offers of vaccination when they receive them. Vaccination reduces the chances, but does not eliminate the risk, of people developing COVID-19, becoming seriously ill and passing on the virus.*

- Serious side effects are rare but mild side effects are common and productions should consider in planning that people may not feel well the day after vaccination.
- Vaccination status may impact on some international travel but productions should ensure that any records kept by the production company meet data protection requirements.
- Vaccination status is relevant if you have been a close contact of a positive case of COVID-19. Follow national guidance for [England](#), [Scotland](#), [Wales](#), and [Northern Ireland](#).

### Other considerations

Vaccination in the UK is entirely within the NHS and private provision is not currently an option. Productions should be mindful of when cast and crew are likely to be invited for vaccination and the potential impact on scheduling, especially if filming overseas (including second doses).

## 17. Mental health and wellbeing

*The COVID-19 pandemic has had a significant impact on people's mental health and wellbeing. Many more people than usual have experienced bereavement as well as suffering from isolation and financial hardship themselves. As well as adults, children and young people may have experienced trauma, anxiety and an increased exposure to harm as a result of the COVID-19 pandemic. Gaps in employment, including furlough, have been greater than usual and many people will be anxious about returning to work. Wellbeing and mental health should therefore be considered as part of the risk assessment for the production. Considerations may include:*

- Where restrictions are in place, the impact of the altered/ restricted way of working on mental health, especially for people at a higher risk from COVID-19.
- The duration of anxiety as people become fatigued and their resilience reduces during the pandemic.

- The procedure for dealing with positive cases/ outbreak in the workplace and communication processes.
- Long COVID and the knock-on effect at work.
- Support offered across productions should be identified and communicated clearly and regularly. This may range from a peer to peer model through to appropriate helplines and/or online platforms.
- Signposting sources of help/ support for the crew and cast proactively, and considering support structures on set e.g. specialist support available.

The Film and TV Charity is committed to supporting the UK film and TV workforce in returning to production after COVID-19 and provides many useful resources for cast, crew and those making programmes.

#### **18. Feedback loop**

*Each production will face unique challenges and unforeseen issues will inevitably occur. It is therefore important that production teams report any shortcomings, successes and lessons learned to ensure that risk assessments are improved and remain effective.*

- Risk assessments should be reviewed on a regular basis and whenever there is a material change in circumstances.
- Systems should be established to allow people to raise concerns confidentially and have them investigated promptly.
- There should be an explicit commitment that no one will be sanctioned for raising safety concerns or refusing to work in an unsafe environment.

## Alternative Options to Allow for Close Contact in TV Production The Close Contact Cohorts Protocol ("CCC Protocol")

### Scope

This protocol applies in circumstances where editorial changes and/or technical adjustments are insufficient to allow essential elements of a production to be undertaken and people have to work in close proximity to each other without standard protective measures (such as social distancing, face coverings, etc.). It sets out alternative controls which may be applied to reduce the risk of COVID-19 in such exceptional circumstances.

It is essential that any decision to dispense with standard control measures, as set out in the main TV Production Guidance is only made after careful consideration and as part of a full risk assessment. It is not intended that this protocol is used as a general alternative to the standard guidance and production companies will need to be able to justify why the approach has been taken.

### Alternative approaches

This protocol envisages two approaches that could be used to mitigate risk for those having to work in close proximity to each other:

- a) A '**Bubble**' – in which the people concerned are completely isolated from those outside the bubble for the duration of the activity (including outside of work).
- b) A **Close Contact Cohort (CCC)** – where segregation is applied assiduously in the work environment and minimised elsewhere, so as to allow limited mixing with, for example, their immediate family.

**Bubbles** have been used successfully where larger groups need to come together for a specified period (e.g. sporting tournaments and manufactured reality programmes) and can be quarantined for the duration. Bubbles may also be appropriate where the aim is to reduce the risk of disease to an exceptionally low level due to significant vulnerabilities of the people concerned or for commercial reasons.

**CCCs** are likely to be used for smaller groups who need to have close contact (e.g. characters filming a love scene). CCCs are inherently less secure than Bubbles and rely upon the group being as small as possible. Additionally, there needs to be rigid segregation between that small group and others on set (in terms of distancing applied) and there needs to be a clear system for how to minimise social interactions with those outside the CCC when not at work.

The guidance in this Annex focuses on the use of a CCC in TV production though some of the elements may be helpful to productions setting up a Bubble.

### Principles

COVID-19 is contracted through the spread of the SARS-CoV-2 virus. Transmission occurs either directly through the airborne transfer of virus from person to person or by fomite spread (i.e. where a surface contaminated by one person is touched by another and transferred to their face).

Fomite spread is now thought to be a less common mode of transmission than airborne transfer and can be controlled effectively by the general measures in the TV Production Guidance relating to cleaning, ventilation and personal hygiene.

Airborne transmission may be through contaminated droplets or aerosols. The risk for both can be significantly reduced by introducing impermeable barriers between people, maintaining at least 2 metres physical distancing and/or wearing face coverings/masks.

Where barriers, distancing and face coverings cannot be employed, risk can be reduced by creating a CCC based on the following:

- a) Ensuring that no one diagnosed with COVID-19, living with someone who is infected or displaying symptoms of the disease is admitted to a CCC.
- b) Limiting the number of people in the CCC to the absolute minimum – pairs are the optimum as each additional person adds significantly to the risk.
- c) Applying rigid segregation on set so that people in the CCC spend as little time as possible in enclosed spaces with as few other people as is practicable and that the 2 metre distancing rule is applied assiduously when in proximity to those outside the cohort.
- d) Ensuring that everyone on the production understands that each CCC is discrete and that members from different CCCs cannot mix or be interchanged – to do so effectively creates a larger CCC which is substantially less secure than its component parts.
- e) Making sure that the standard measures outlined in the TV Production Guidance are applied rigorously by CCC members when not engaged in necessary close contact activity, including when off set.
- f) Requesting that CCC members limit mixing with other people as far as possible away from work. Encouraging them to reduce both the number of people they interact with and the time spent together, as far as is reasonably practicable.
- g) Establishing a testing regime for the CCC to reduce the chances that an asymptomatic infected person enters a CCC and to check that controls are working on an ongoing basis. This is primarily an assurance mechanism and subsidiary to the measures outlined above.

## **How to set up a CCC**

### **1. Making a decision to establish a CCC**

- a) Any decision to establish a CCC should be part of the overall production COVID-19 risk assessment and the rationale should be fully documented.
- b) The starting point should be to explore whether changes to script or technical measures can enable the standard TV Production Guidance controls to be applied. Only if those options are found to be 'not reasonably practicable' should a CCC be considered as an alternative control measure. Operating CCCs is onerous, time consuming and costly – it should never be seen as “an easy option”.
- c) The editorial team should be closely involved in planning to ensure the size of each CCC and the number of CCCs for the production are kept as low as is reasonably practicable.
- d) A written system should be set up to document how the CCC process will be managed on the production. This protocol should assist with the factors to be considered but the specifics will be determined through the risk assessment process.
- e) It may be appropriate to consult a suitably qualified health and safety professional to assist in putting together the approach, answering questions and supporting implementation.

### **2. Forming a CCC**

- a) Communicate clearly with the individuals who will be potentially involved in the CCC about what is involved so that they can confirm that they understand and accept the arrangements.
- b) Consider engaging, where appropriate, with union representatives to ensure that the implications of working in a CCC are well understood.

- c) Identify any members of a proposed CCC or their household members (including if CCC members have caring responsibilities) who have [COVID-19 vulnerabilities](#)<sup>42</sup> so that this can be separately assessed and any appropriate adjustments made in consultation with the individual(s) concerned.
- d) Carry out screenings for those in the CCC to ensure that they are not suffering from COVID-19 or symptoms suggestive of the disease. This screening should include obtaining a written declaration from the individuals that they are symptom free as well as a test for SARS-CoV-2 undertaken during the 48 hours preceding entry to the CCC (see sections 5 and 6 on selecting and implementing a testing regime).
- e) Provide everyone on the production (including those not in the CCC) with suitable and sufficient information, instruction and training about the principles and practical implementation of a CCC system.
- f) Keep each CCC to the absolute minimum number of members possible. Members should, as far as possible on set, only mix with other members of the same cohort and must observe strict physical distancing with others.
- g) Avoid the mixing or swapping of members between CCCs. Someone can only be a member of one CCC at any one time. If there is a requirement to move from one CCC to another, the full process for joining a CCC should be adhered to unless there is complete alignment between protocols and a COVID secure transfer can be assured.
- h) Work out how to make the CCC members easily identifiable as a member of a specific CCC (e.g. colour coding different groups).
- i) Remind those in a CCC regularly of their obligations to minimise mixing and social contact both on and off set. Productions may wish to consider more stringent restrictions on social activity in some cases. Where provisions introduced to manage the risks of COVID-19 result in additional requirements being placed on cast outside of their engagement period, these should be discussed fully beforehand.
- j) Establish a system for recording who is in a CCC with full details of periods of close contact on the production. This will be vital if a member develops the illness and may be required by official contact tracing bodies.
- k) Exclude from the CCC anyone diagnosed with, testing positive for or displaying symptoms suggestive of COVID-19 and comply with [current Government guidance](#)<sup>43</sup>.

#### 4. Operating a CCC

- a) Require CCC members to complete and record symptom checks before coming on set each day. Temperature checks are now considered to be of little value because both sensitivity and specificity are extremely low.
- b) Test the CCC regularly for SARS-CoV-2 (normally at least weekly). Risk assessment of an individual or the production may indicate that more regular testing of the cohort is appropriate.
- c) Ensure that if a member of a CCC displays symptoms of, or tests positive for, COVID-19 at any time during the production that person and all other members of the CCC who have been in close contact, regardless of their own test result, self-isolate immediately in line with current Government guidance.
- d) Instruct any CCC member who displays symptoms and then tests negative, that they should wait until they are symptom free before returning to production.
- e) Advise CCC members isolating because another member displayed symptoms but subsequently tested negative, that they may return to production providing they also test negative **and** are symptom free.
- f) Ensure that if a CCC member is contacted by the authorities due to close contact outside of the work, they understand that will need to self-isolate in line with current Government

<sup>42</sup> [Who is at high risk from coronavirus \(clinically extremely vulnerable\) - NHS \(www.nhs.uk\)](#)

<sup>43</sup> [Stay at home: guidance for households with possible or confirmed coronavirus \(COVID-19\) infection - GOV.UK \(www.gov.uk\)](#)

guidance. Other members of the CCC will not be required to self-isolate unless instructed to do so by the official contact tracing body.

- g) Advise members of a CCC who test positive that they should engage with the official tracing body and that the responsibility to inform close contacts outside of the workplace lies with the individual.
- h) Institute a production investigation if a CCC member develops COVID-19 or tests positive, to clarify the circumstances and determine if workplace control measures have been properly adhered to.

#### **NOTE Self-isolation rules for close contacts have changed in the UK:**

Cast and crew may no longer be legally required to self-isolate if they are identified as a close contact of a positive COVID-19 case, as long as they have received their final dose of an MHRA approved COVID-19 vaccine at least 14 days prior to contact with a positive case.

Please check the latest guidance in [England](#), [Northern Ireland](#), [Scotland](#) and [Wales](#) as rules differ between the nations. Cast and crew members in all UK nations must still self-isolate, regardless of being fully vaccinated, if they:

- have symptoms that may be caused by COVID-19, even if their symptoms are mild
- have received a positive COVID-19 test result (whether or not they have symptoms)
- have been told to self-isolate by the NHS or relevant public health body

Productions may wish to consider utilising further testing before allowing someone who has been identified as a close contact from re-entering the workplace. They may also wish to consider further testing/ controls for the 10 days proceeding the contact with a positive case. This should be considered as part of their risk assessment.

#### **5. Selecting a testing regime to use for a CCC**

As stated in Section 7 of the TV Production Guidance, testing for COVID-19 is complex, onerous and costly. The justification for using a testing regime as part of a CCC system is to **test to enable** (i.e. to allow for activities to take place that would otherwise be considered higher risk when COVID-19 is circulating). Testing cannot eliminate the risk of COVID-19 and there is no ideal test to use, despite the large range of technologies now available.

In the context of a CCC system the desirable characteristics of a test include high accuracy, ease of administration and speed of results. Unfortunately, there is often a trade-off between accuracy and the other characteristics so a “best fit” for particular needs is required.

“Accuracy” of a test is usually described by its **sensitivity** (the ability to detect a true case) and its **specificity** (the ability to detect a non-case). Neither parameter can reach 100% and the laboratory figures quoted may differ markedly from real world experience (especially for sensitivity where sampling quality is a major factor). Both false positives and false negatives have adverse consequences for those being tested as well as for a production.

A more useful way to assess the usefulness of a test may be to examine its ‘negative predictive value’ (NPV) which measures how likely a negative test result is to reflect a truly negative situation of infection/infectivity and its ‘positive predictive value’ (PPV) which measures the rate at which a positive test truly reflects infection or infectivity. NPV and PPV vary considerably for a test depending upon levels of community transmission of the virus. **Consequently, at high levels of community transmission there may be a significant number of false negatives while at low levels**

**there may be a high proportion of false positives.** A fuller explanation of this phenomenon is given in a recent [European Commission publication](#)<sup>44</sup>.

The biggest influence on real world sensitivity is the quality of sampling (generally a deep nasal and/or throat swab). Sampling undertaken by a trained operator invariably delivers better results than self-sampling, even when the latter is supervised, and the difference in sensitivity is far greater than between most tests.

Consequently, careful consideration needs to be given to the sampling strategy as well as the “accuracy” of the test and different solutions may be appropriate at different levels of community transmission.

There are a number of test types available for the detections of SARS-CoV-2:

- a) Polymerase chain reaction ("PCR") tests are the standard method for diagnosing COVID-19. They have high levels of laboratory sensitivity and specificity and are used as the benchmark with which other tests are compared. Analysis time has reduced during the pandemic but is still several hours and the usual requirement for examination in a laboratory adds further delay, so it may be 24 to 48 hours between sampling and receiving a result. That time lag can cause difficulties for productions and give rise to exposures to other CCC members if someone tests positive.
- a) If considering the use of an alternative to the laboratory PCR testing it is prudent to ensure that the technology you plan on using meets the desirable performance characteristics of the [Target Product Profile published by the MHRA](#) for SARS-CoV-2 detection tests. The rationale, including the independent verification of the test used, should be documented as part of the risk assessment and the principle to apply is that, taking all factors into account, the level of protection offered is at least as good as that offered by a PCR based programme.
- b) A number of newer technologies have been developed or adapted for the detection of SARS-CoV-2 (e.g. LAMP, LampORE, Immunofluorescence, etc.). All offer faster results and many come close to the levels of accuracy for PCR testing. Other factors to consider include whether analysis is conducted on site or in a remote laboratory, the complexity of the process which may require use of a laboratory technician and acceptability to insurers.
- c) Lateral flow tests are widely used for population screening and are freely available to individuals through [the Government scheme](#)<sup>45</sup>. They are not however considered sufficiently accurate for CCC purposes.
- d) Antibody tests are completely unsuitable for this type of application and should not be used in an employment context.

Selecting an appropriate testing regime is not straightforward and advice from a suitably qualified health professional will often be necessary.

## **6. Implementing a testing programme for a CCC**

It is generally preferable to procure a testing solution from a provider rather than just buying the test to use yourself as there are multiple [regulatory considerations in setting up a testing programme](#)<sup>46</sup>. The government has published a [list](#)<sup>47</sup> of private providers for general testing settings which may be used as a starting point in selection of a testing partner.

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<sup>44</sup> [Rapid antigen detection tests SARS-CoV-2.pdf](#)

<sup>45</sup> [Order coronavirus \(COVID-19\) rapid lateral flow tests - GOV.UK \(www.gov.uk\)](#)

<sup>46</sup> [Coronavirus \(COVID-19\): testing guidance for employers - GOV.UK \(www.gov.uk\)](#)



Considerations when engaging with a potential provider and/or setting up a testing programme include:

- a) Samples should be collected by a trained operator in line with approved methodologies. Self-sampling may be considered in exceptional circumstances but increases the risk of both invalid results and false negatives.
- b) The testing provider should be required to have in place a system for further analysis of results which are indeterminate or implausible. That should include quantitative analysis (e.g. Ct levels) supplemented by appropriate specialist advice. False positives within a CCC can derail a production and, particularly at times of low community transmission, may be expected – a pre-determined protocol for dealing with implausible results is therefore prudent.
- c) Obtaining samples and processing biological tests requires the informed consent of the subject on each occasion. Consent will need to be obtained in writing and should include permission for results to be communicated to the nominated person advising production.
- d) The production company will be required to confirm testing requirements for CCC members under 18 with the testing provider. Parents/ guardians will be required to give consent on behalf of these individuals in line with the testing provider’s guidelines.
- e) Test results and any other personal data held as part of the testing process will need to be handled and communicated in a confidential manner and in line with [data protection requirements](#)<sup>48</sup> which is likely to require that:
  - i. One named person who has suitable knowledge and/or access to clinical advice should receive and communicate the results.
  - ii. Resultant advice to production should be framed as “fitness to continue in the CCC” or similar, rather than as clinically sensitive information.
  - iii. No other sensitive personal information should be communicated, in line with the UK’s [Information Commissioners Office guidance](#)<sup>49</sup>.
- f) Positive results require immediate action, even if considered implausible. The individual concerned and all other members of the CCC must self-isolate as soon as possible after the result is received and the guidance outlined above (para. 4.c to 4.h) should be implemented. Validation of implausible results can be undertaken in parallel.

## 7. Exiting and/ or returning to a CCC

People may leave a CCC because their role no longer requires close contact with other members and CCCs will be dissolved once the activity for which they were formed is complete. In either case there should be an exit procedure to ensure that members remain protected for the limited period during which a risk of infection remains.

The exit procedure for leaving a CCC and joining a new a CCC should involve a break of 48 hours between CCCs and a new negative test before joining a new CCC, unless there is complete alignment between protocols and a COVID secure transfer can be assured.

Individuals who develop COVID-19 or test positive may end their period of social isolation in line with current government guidance, provided they have not had a high temperature (without any medication being taken to lower the temperature) after that required isolation period and are feeling well. Symptoms of persistent coughing and loss of taste / smell can persist for some weeks after recovery. They may then re-enter a CCC, provided they are well, and neither a re-entry test nor ongoing testing is recommended for 90 days from the time they developed symptoms or tested positive. This is because testing cannot differentiate between residual viral RNA (which can linger

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<sup>47</sup> [Private providers of COVID-19 testing: what you need to know - GOV.UK \(www.gov.uk\)](#)

<sup>48</sup> For the UK see [Guide to the UK General Data Protection Regulation \(UK GDPR\) | ICO](#)

<sup>49</sup> [Testing | ICO](#)

for many weeks) and active infection. Epidemiological evidence shows that re-infection within 90 days is extremely rare.

Productions and individuals should however note that testing persistently positive may have implications for ability to travel overseas.

## **8. Further information**

This guidance has been prepared in the context of the UK but there may be elements which require adaptation in the light of advice issued by the Governments of [England](#), [Scotland](#), [Wales](#) and [Northern Ireland](#).

Individual companies / broadcasters may have their own bespoke guidance to supplement this document.

A video explaining the testing process in the context of the TV industry, can be found [here](#).