

Guide to Safe Return to Work Post COVID 19 Lockdown



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Introduction

As we gradually come to terms with COVID 19 and the impact it has had on all of us, thoughts now turn to returning to work. Irrespective of the actual timing of a return, if your workplace has been closed due to COVID 19, it is likely that returning to “normal” operations will not be an overnight matter. We are likely to see a graduated return process with social distancing measures being applied in all workplaces in the short term. This guide has been prepared as an aid to our clients who are preparing to return to work and addresses the many considerations associated with that process. The hierarchy of controls begins with minimising the number of people in the workplace through practical controls such as working from home, where feasible and minimising visitors. We must then consider control measures that are likely to eliminate or greatly reduce the chance of the virus spreading between people. Finally and very importantly, we must have arrangements in place for dealing with any cases of COVID 19 that arise within the workplace.

Any employee, contractor or potential visitor displaying symptoms must self-isolate and not attend site or work for 14 days. Also, any person living with someone who is self-isolating or waiting a COVID-19 test must restrict their movements for 14 days. It should be noted that recent studies have suggested that COVID-19 may be spread by people who are not showing symptoms.

Return to Work Induction

IN advance of returning to work, it is essential that ALL employees complete a COVID 19 Induction Training programme. This can be completed on line or face to face, provided that numbers are limited and social distancing can be maintained at all times.

Symptoms

Fever (temperature), cough, shortness of breath, breathing difficulties.

Ensure that employees are aware of these symptoms (through posters, induction training, tool box talks and any other media available) and the procedure to follow if they are experiencing these symptoms.

General Health

Personnel living with “at risk groups” as defined by the HSE, must consider if there is a heightened risk from attending work.

Travel

Persons travelling to or returning to the island of Ireland should refer to national advice issued by the HSE / the Department of Foreign Affairs.

1. Minimising Risk - Key Control Measures

1.1 Minimising Numbers in the Workplace

1.1.1 Employees:

Minimise the number of employees in your workplace.

Consider all work activities that can be completed from home and discuss with those who may be able to work from home.

Consider splitting teams and reducing numbers through rearranged work patterns.

Consider shift work with reduced numbers on each shift.

1.1.2 Customers:

Limit numbers accessing the premises to comply with HSE guidelines with continuous monitoring in place.

Limited access for children.

Introduction/Promotion of delivery services, click and collect services and prioritise delivery services to customers who are vulnerable or in isolation.

Desist from any promotional sales activities likely to increase footfall.

Consider special access times for OAP and people with disabilities

(see further guidance relating to Retail Premises at Section 11)

1.1.3 Third Parties:

A restriction on visitors for business matters should be put in place, i.e. suppliers, contractors, sales people, etc. However, where business critical visitors are required to attend the site, a controlled access process should be in place including adherence to sanitisation processes and full personal contact details (e.g. telephone number, last place visited should be collected to assist with contact tracing).

Defer all non essential maintenance and associated work.

Communicate with customers and suppliers:

- Identify essential suppliers and service providers and discuss continuity issues with them such as understanding their business continuity plans.
- Identify essential customers and ensure that plans are in place to meet customer needs.
- Develop a plan on how and when to activate alternative suppliers and/or alternative delivery means to customers.
- Identify stakeholders in your business network and share best practice concerning defence against COVID-19.

1.2 Zoning:

Work areas can be divided into zones with personnel allocated to work within each zone. Zones could be identified by colour, number, section, etc. Movement between zones should be minimised and controlled at all times. Zoning can be used for retail settings, warehouses and distribution centres.

2. Travel to / from and as Part of Work

Where a worker exhibits any signs of COVID-19 or has been exposed to a confirmed case, they should not travel to work.

Wherever possible, workers should travel to work alone using either their company vehicle or their own means of transport.

Management must consider the following:

- Parking arrangements for additional cars / vans and bicycles.
- Providing hand cleaning facilities at entrances and exits. This should be soap and water wherever possible or hand sanitiser if water is not available.
- How someone taken ill would get home.

Social Distancing in Vehicles

Social distancing is advised when travelling in vehicles to/from work and when in site vehicles and operating mobile plant.

Suggested arrangements are as follows:

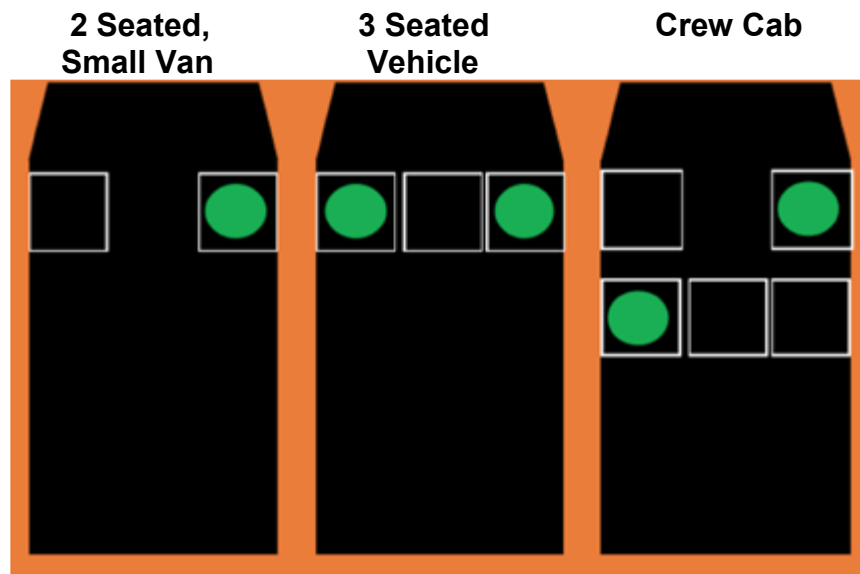
- Single occupancy of vehicles is preferable.
- Sit as far apart as the vehicle allows.

Other Control Measures for Vehicle Use

Workers should not enter a work vehicle with others if they have any symptoms or have had contact with a confirmed case of COVID-19. General guidance for minimising the potential transmission of COVID-19 are:

- Employers should consider requesting personnel to use personal transport to reduce numbers travelling in work vehicles.
- It is advisable to limit the “churn” of people travelling together (i.e. try to ensure the same crew Employers travel and work together day after day).
- When entering (and leaving) all vehicles the driver should clean all common areas that are liable to be touched including the external door handles, keys and other internal furnishings.
- Keep windows at least partially open.
- Keep personal items (PPE, clothes, lunch boxes etc.) separate.
- Wiping/cleaning down of contact points should be done using antibacterial wipes or a wet cloth with soap application, or equivalent.
- Dispose of used wipes/cleaning materials in a designated bin/sealed bag and wash hands for at least 20 seconds.
- If availing of public transport, sit down to minimise contact with frequently touched surfaces, handles, roof straps, isolation bars etc.
- Carry hand sanitiser (at least 60% alcohol) and use it regularly throughout your journey.
- For business travel, minimise through on line meetings where possible.
- Do not carry any passengers if possible, e.g. do not stop to offer a lift.

Suggested Seating Arrangements for Shared Vehicles



Car



3. Workplace Entry

The potential for cross contamination is higher at workplace entry and exit points and where there are high levels of surface contact points such as in welfare areas, site walkways, stairs access etc.

Recommended Control Measures

The following are recommended controls measures at access points to all workplaces:

- Turnstiles to be by-passed with open door access to site.
- Thumb / finger print access and clock devices should be by-passed / turned-off.
- Stagger site start times / finishing times to reduce queues.
- Multiple entry points depending on site numbers.
- Security guards to record all names rather than having multiple persons signing-in using shared pen/booklet. Alternatively, remove and do not provide a pen for signing and out and ask staff to use their own pen.
- Restrict entry to workers and essential visitors only.
- Sanitising stations and advisory signage in position at all workplace entry points.
- Regularly clean common contact surfaces in reception, office, access control and delivery areas (e.g. scanners, door handles, screens, telephone handsets, desks, particularly during peak flow times).

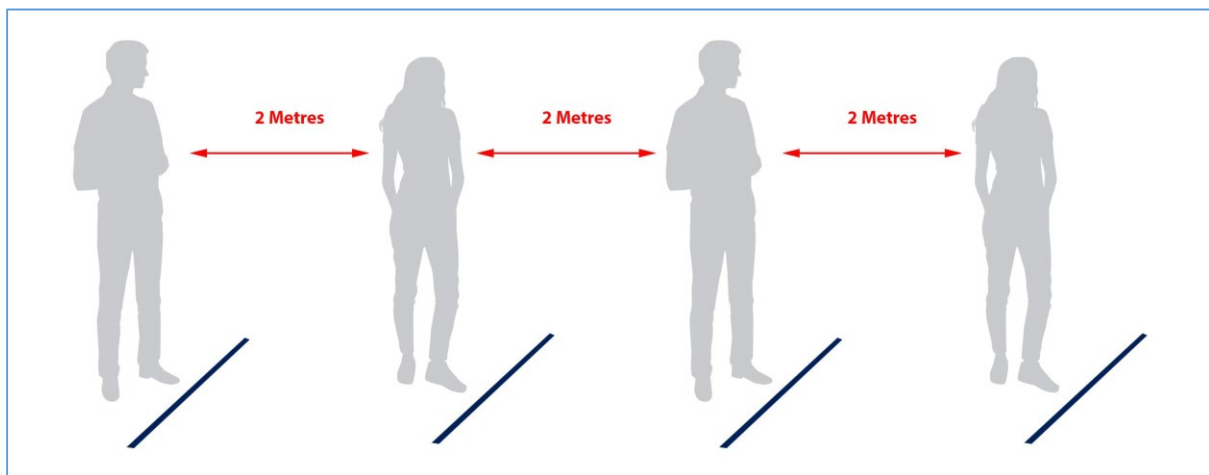
Site Sign-In Supervisors

- Reduce the number of people in attendance at site inductions and consider holding them outdoors wherever possible.
- Delivery drivers should remain in their vehicles if the load will allow it and must wash or clean their hands before unloading goods and materials.
- All persons entering the workplace must be directed to wash their hands and additional hand washing stations should be provided where possible.
- Touch points should be minimised with a “handsfree” approach where possible.
- On access routes throughout the workplace, one-way systems should be implemented where possible, barrier gates should be wedged open, and touch points should be cleaned regularly.

4 Walkways, Corridors and General Access

To assist with social distancing, consider the following:

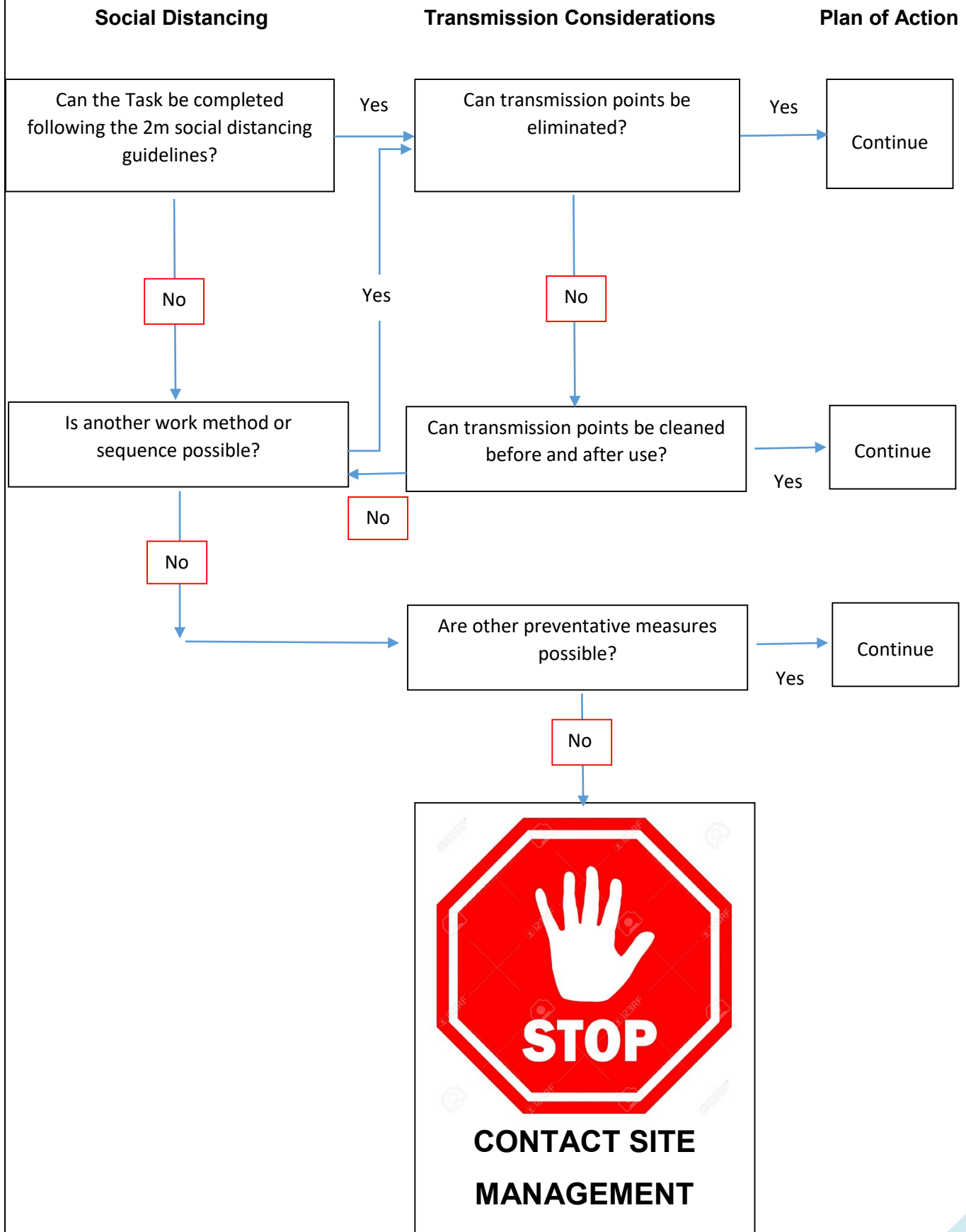
- A one-way system on access routes throughout the workplace where possible.
- Increasing access and egress points can help establish a one-way system.
- Where a one-way system is not possible consider widening pedestrian routes and a “give and take” approach so social distancing can be maintained on main site walkways.
- Marked up walkways can help give an indication of what 2-metre spacing looks like.



Zoning

Work areas can be divided into zones with personnel allocated to work within each zone. Zones could be identified by colour, number, section, etc. Movement between zones should be minimised and controlled at all times. Zoning can be used for retail settings, warehouses and distribution centres. The following zoning template is purely an example of what could be used.

Social Distancing Flow Chart



5 Close Working

Why tasks where personnel are <2m apart require additional focus and daily oversight?

In Ireland, the Health Service Executive (HSE) has recommend a 2 metre safe distance between individuals to avoid transmission hazards. Where a risk assessment identifies work where 2 m separation cannot be maintained, additional safety precautions are required to manage the risk.

Risk Assess

Identify all tasks and activities that involve employees working closely together, i.e. within 2 meters distance.

Elimination of Close Working:

Elimination of close working is preferable and should be investigated.

For all companies and management putting personnel to work, it is critical that you explore every available option possible before putting personnel to work in < 2m close contact tasks.

Requirements for Employees Working Within 2m of each other:

- No worker has symptoms of COVID-19.
- The close contact work cannot be avoided.
- PPE is present in line with the RAMS / Risk Assessment (full face shield etc).
- An exclusion zone for <2m work will be set up pre task commencement.
- Prior to donning appropriate gloves, personnel shall wash / sanitise their hands thoroughly.

There are 2 types of work in the <2m transmission zone,

A) No physical contact between employees

B) Physical touching will occur (manual handling / pushing – pulling side by side, shared tools and equipment).

- Scenario A - preferably, personnel will wear full face shields and gloves - alternatively, FFP3 / FFP2 / surgical masks with eye protection and gloves.
- Scenario B - preferably, personnel will wear full face shields, (alternatively, FFP3, FFP2 or surgical masks with eye protection) , and should wear gloves & disposable suits - on completion, dispose / make safe any contaminated PPE - specific procedures to be agreed on site.
- If it is possible to erect a physical barrier / safety signage that does not impede the work between employees and does not increase work safety hazards (lack of communication / visibility), please consider your options. (e.g. hanging clear plastic / mobile frame with plexiglass).

Note: The full-face visor replaces plexiglass as a physical airborne barrier between employees provided there is adequate air circulation.

- At the end of the task, all tools and equipment for scenario A & B work must be sanitized properly – as should any surfaces safe to wipe down.
- Forced ventilation internally could be considered for restricted confined spaces.

Oversight:

Following assessment that the task has to be completed within the 2 m zone, and review of controls, the contractor's supervisor may issue a permit, which could be in the form of a checklist or other agreed format.

6 Toilet Facilities

- Restrict the number of people using toilet facilities at any one time. Ensure there is a social distance of 2m maintained while using the toilet facility.
- If necessary, fit an access control mechanism or system to the entrance door of the facility itself, not just cubicles.
- Implement appropriate COVID-19 hygiene regime.
- Ensure soap and hand washing pictorial guides provided for washing hands are clearly visual and in a form manner and language understand for all.
- Enhance the cleaning regimes for toilet facilities, particularly door handles, locks and the toilet flush handle.
- Provide suitable and sufficient rubbish bins for hand towels with regular removal and disposal.
- Ensure that soaps, toilet paper etc are replenished in good time.
- Encourage flushing with the toilet lid down.



7 Canteens

- Stagger break times as necessary.
- Restrict the number of people using canteen facilities at any one time - allow 4m² per person.
- Arrange seating with 2 meters between each person – remove surplus seating to avoid error.
- Encourage employees to bring their own crockery and cutlery to work and not to share.
- Provide hand sanitizing at entrances and exits.
- All rubbish should be disposed in a suitable bin.
- Tables should be clear when finished eating.
- All areas used for eating must be thoroughly cleaned after each use, including chairs, door handles, vending machines and payment devices etc.
- Use floor markings to create an exclusion zone (if possible) around shared equipment, kettle, fridge, boiler, toaster etc.
- Provide disposable gloves for use of shared equipment.
- Display warning signs and information posters in the area.
- Monitor and supervise behavioural compliance.



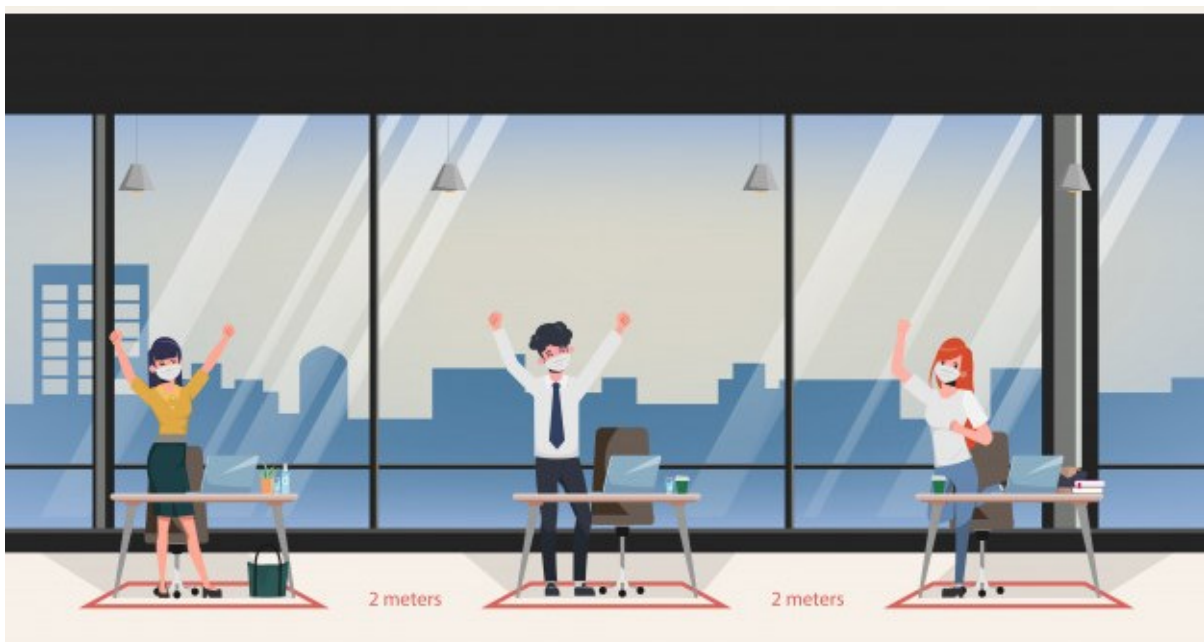
8 Offices

- All employees whose physical presence is not required, should be encouraged to work from home where possible – usual supports required. This could be for part of the working week only if necessary.
- Employees working in offices should be dispersed so there is always a social distance of 2m.
- Consider eliminating or reducing “hot desking” or similar shared work stations.
- Provide disinfectant wipes at each workstation and ensure that keyboards, mouse, telephone and other desk equipment is wiped down regularly.
- Eliminate non-essential visitors attending offices.
- Use I.T software to support online meetings both in and out of the office.
- Keep workstation surfaces clear and wipe with disinfectant regularly.
- Hand sanitizers should be made available at main entry and exit points.
- Keep main doors open where possible to reduce persons touching door handles etc.
- Increase the cleaning regimes including a wipe down with disinfectant on door handles, stair rails etc. at regular intervals throughout the day.

Management of Meetings

All meetings, where possible, are to be conducted virtually using on-line systems for remote meetings unless it is absolutely necessary to meet face-to-face. In these circumstances, keep the numbers attending as small as possible ensuring the mandatory 2m distance apart. The meeting time should be kept as brief as possible.

- Only ‘absolutely necessary’ meeting participants should attend.
- Attendees should be 2m apart from each other.
- Rooms should be well ventilated/windows open to allow fresh air circulation.
- Consideration to be given to hold meetings in open areas where possible.



9 Drying Rooms

The following is suggested to ensure a social distancing of 2m.

- Introduce staggered start and finish times to reduce congestion and contact at all times
- Introduce enhanced cleaning of all facilities throughout the day and at the end of each day.
- Consider increasing the number or size of facilities available on site if possible
- Based on the size of each facility, determine how many people can use it at any one time to maintain a distance of 2 metres. Allow 4 m² per person as a maximum occupancy with due consideration of the 2 metre distancing standard.
- Provide suitable and sufficient rubbish bins in these areas with regular removal and disposal.
- Identify 2-metre social distancing areas.
- Remove all unnecessary items.



10 Workplace Vehicles

Workplace vehicles includes road vehicles such as vans, lorries and cars as well as vehicles such as fork lift trucks, dumpers, loading shovels etc.

Ensure the provision of sanitation kits to drivers to enable them to regularly clean their vehicles including road vehicles, forklifts etc – the kit will include gloves, wipes, sanitiser and instructions.

Where possible it is recommended to have one designated driver per vehicle and to limit sharing of vehicles.

Wear gloves during any delivery. Remove gloves after delivery, clean hands and put on clean gloves.

Decontaminate any shared equipment e.g. pens, phones etc.

Use a separate wipe for each individual item, do not cross contaminate, change wipe sooner if visible soiling present. Double bag wipes in a waste bag, store in the vehicle until able to dispose of at next available location with suitable waste disposal facilities.

For delivery vehicles and other road fleet, it is recommended to take the following steps after each visit to a customer premises. This is a brief but comprehensive sanitisation which can be completed in a few minutes. In order for this to be successful, plan in advance and bring wipes and waste bags on each journey.

Typical Contact Points within a Vehicle

1. Exterior door handles
2. Frame of door and roof
3. Interior door release
4. Window switches
5. Interior door handles
6. Door pocket
7. Seatbelts
8. Seatbelt clips
9. Seat adjust buttons
10. Steering wheel
11. Horn
12. Control stalks
13. Air vents
14. Dashboard
15. Power button
16. Gear shift
17. Multimedia screen
18. Central air vents
19. Heating controls
20. Glovebox
21. Log book
22. Central storage compartment
23. Cupholders
24. Rear-view mirror
25. Interior lights



26. Grab handle
27. Key
28. Head rests
29. Seat pockets
30. Rear central tab
31. Fuel cap (and AdBlue filler)
32. Wheel valves
33. Load area door handles
34. Load area grab handles
35. Load floor
36. Any fitted racking or other load area accessories - including load-through bulkheads
37. Bonnet
38. Washer cap
39. Dipstick
40. Oil cap
41. Joy sticks

Contact Points within Workplace Vehicles & Mobile Plant



Tools, Equipment and Plant

- All hand tools and equipment should be properly sanitised to prevent cross contamination.
- Arrangements for one individual to use the same tool, equipment and plant as much as possible. Make available cleaning material for all tools to be wiped down with disinfectant between each user. Organise work practices to reduce eliminate or reduce transmission points and coach site personnel on the same.
- Cabs and touch points of site vehicles and plant (MEWPS, Excavators, Cranes, etc.) to be thoroughly cleaned and a cleaning regime by plant operatives should be maintained daily thereafter.
- Consider provision of stickers for tools, equipment and mobile plant to encourage disinfection.

11 Retail/Customer Access Premises and Customers

In a retail / customer access type environment, ensuring rigorous enforcement of social distancing for customers and employees alike is vital:

Central to a reopening plan will be social distancing. Employers must devise a plan for customers but also and very importantly a separate plan for employees. Many employers sell over a counter and from a very limited space. Thus, such employers will need to consider reformatting stores and implementing counters specific to each employee. These counters will need to be sanitised for shift changeover etc...

A central matter to consider regarding distancing measures are payments. We are aware that some large national retailers are planning to only accept contactless payments when they reopen. This might only be for a short number of weeks, but it is an important consideration.

It is likely that all employers will need to effectively retrain all returning employees to educate them as to the new normal. This will be a complicated and timely process of training to implement but it needs to be done. Like all business policies you will need to have each employee sign off a Covid-19 policy document to confirm that they have received the training and will abide by the new operating method.

Employers who have had to remain open to serve our Nation have implemented rigorous social distancing protocols for employees. There is marked feet images behind the counter where employees must stand, canteen facilities only allow for one person to sit in an area away from anyone else. These protocols will be required when you reopen.

Some other matters to consider at this time:

Larger format retail premises might potentially open only some departments in phase one and gradually open others. If you tape off an area be sure that the emergency exit in that area is still accessible

Some retailers who have a non-core restaurant / café offer might postpone the opening of the restaurant / café for a while

For retailers with toilet facilities, please consider hygiene protocols

Please consider removing some gondolas and fixtures to allow for the provision of far wider aisles

We strongly advise that you do not offer any special deals or promotions. You need to be overtly non-commercial when you reopen to ensure you do not cause any surge consumption

We strongly advise that your communications and tone of message is one about health and safety of employees and customers

It is recommended that you have an overt and clear footfall counting system in place. You should display your capacity limits at all access points

You need to review pinch points where potentially you cannot guarantee a 2-meter spacing. Most doors into retail premises are less than 2 meters, thus ensure the doors are monitored and allow for a one in, one out type protocols

Larger format retail premises might consider a one-way customer flow system with arrows on the ground guiding customers movements through the store

Those with car parks might considering limiting the number of cars permitted to park at any one time. You might consider using alternative spaces by placing bollards in every second space

You might consider using shopping trolleys only and banning baskets. Trolleys act as a natural distancing mechanism. You will need to provide trolley sanitisation. Those that only use baskets will need to provide basket sanitisation.

Employees at payment points should be instructed to wipe down the keypad after each use.

Provide Perspex screens at point of sale to screen employees.

You might consider restricting the number of shoppers who shop together to a maximum of two.

To quantify the queuing area required to safely allow customers to pay, you must firstly quantify your maximum customer capacity number and then compute average dwell time. This will offer you guidance as to how many customers are likely to be queuing to pay at any one time

Potentially use an in-store tannoy to remind customers of the safety protocols. Perhaps broadcast a message every 15minutes

Be as inventive as possible to rigorously apply the rules. A simple example in a garden centre / DIY setting is to use bags of compost to design a queuing avenue for customers as they enter the store

Strategy to Minimise Spread – Outside a Retail/Customer Access Premises

The same physical distancing principles should apply to outside the entrance of a retail store. This can be achieved in a number of ways and include but is not limited to:

- The implementation of a queue management system with correct distance markings;
- The provision of a staff member at the door keeping numbers in store at an acceptable level,
- Ensuring hand sanitiser is used and reassuring those waiting to enter the store;
- Signage should be placed outside the store regarding numbers allowed in/policy with children entering/acceptable behaviour towards staff, etc
- Signage on public responsibility of personal sanitizing and physical distancing;
- The provision of hand sanitiser at entrance for customers;
- The provision of disinfectant at/outside entrance for cleaning trolleys/baskets before use and door handles on non-automatic doors;
- Control of numbers into a retail store

12 Suspect COVID-19 Case at Work

What to do if an employee or a member of the public becomes unwell and believe they have been exposed to COVID-19:

- If someone becomes unwell in the workplace with symptoms such as cough, fever, difficulty breathing, the unwell person should be removed to an area which is at least 2 metres away from other people. If possible, find a room or area where they can be isolated behind a closed door, such as a staff office. If it is possible to open a window, do so for ventilation. Request individual to wear face to prevent contamination of area and close by personnel.
- The individual who is unwell should call their doctor and should outline their current symptoms. Whilst they wait advice, ideally they should be in isolation or as a minimum remain at least 2 metres from other people. They should avoid touching people, surfaces and objects and be advised to cover their mouth and nose with a disposable tissue when they cough or sneeze and put the tissue in a bag or pocket then throw the tissue in the bin. If they don't have any tissues available, they should cough and sneeze into the crook of their elbow. If they need to go to the bathroom whilst waiting for medical assistance, they should use a separate bathroom if available.
- Closure of the workplace is not recommended.
- The management team of the office or workplace will be contacted by the HSE to discuss the case, identify people who have been in contact with them and advise on any actions or precautions that should be taken.
- A risk assessment of each setting will be undertaken by HSE with the lead responsible person. Advice on the management of staff and Employers of the public will be based on this assessment. The HSE will also be in contact with the case directly to advise on isolation and identifying other contacts and will be in touch with any contacts of the case to provide them with appropriate advice.

Confirmed COVID-19 Case at Work

If a confirmed case is identified in your workplace, the HSE will provide the relevant staff with advice.

These staff include:

- any employee in close face-to-face or touching contact
- talking with or being coughed on for any length of time while the employee was symptomatic
- anyone who has cleaned up any bodily fluids
- close friendship groups or workgroups
- any employee living in the same household as a confirmed case
- Contacts are not considered cases and if they are well, they are very unlikely to have spread the infection to others:
- those who have had close contact will be asked to stay at home for 14 days from the last time they had contact with the confirmed case and follow the home isolation information sheet.
- they will be actively followed up by the HSE
- if they develop new symptoms or their existing symptoms worsen within their 14-day observation period they should call their doctor for reassessment
- if they become unwell with cough and/or fever they will be tested for COVID-19
- if they are unwell at any time within their 14-day observation period and they test positive for COVID-19 they will become a confirmed case.

Staff who have not had close contact with the original confirmed case do not need to take any precautions and can continue to attend work.

Note: Close contact is defined by the HSE as spending more than 15 minutes face-to-face contact within 2 metres of an infected person / living in the same house or shared accommodation as an infected person.

Ref: HSE- Covid 19; Guidance for the business and retail sector (v 1.1 18.03.20)

13 Return to Work Process – Worker

In the event of a worker either being a suspected/ confirmed case of COVID-19 or a known “close contact” with a confirmed or suspected case, this protocol must be followed to ensure they are fit to return to work by means of self-declaration [1].

Fitness for Work should be considered from two perspectives:

1. Does their illness pose a risk to the individual themselves in performing their work duties?
2. Does their illness pose a risk to other individuals in the workplace?

The following steps should be followed, in line with current public health advice in Ireland:

Any worker who has displays symptoms consistent with COVID-19 must stay away from work, self-isolate and contact their GP by phone as part of the triage process.

They must also notify their line manager / employer. An individual will be classified as either a suspected or confirmed case, based on HSE decision to test / outcome of test. An individual who is a known close contact [2] with a confirmed or suspected case will be contacted by the HSE through its contact tracing process. Advice regarding self-isolation for a period of 14 days since their last “close contact” with a confirmed/suspected case must be followed. An individual must only return to work if deemed fit to do so and upon approval of their medical advisor and having coordinated with their line manager/designated HR/employer contact.

When an individual is symptom-free and are deemed fit to return to work, the key criteria are:

1. 14 days since their last “close contact” with a confirmed/suspected case and have not developed symptoms in that time, or
2. 14 days since the onset of their symptoms and 5 days since their last fever (high temperature), or
3. They have been advised by a GP / healthcare provider to return to work. Line Manager/designated Employer/HR should confirm the relevant criteria above with the individual and write down their responses.

[1] Individual must self-declare their fitness for work in the absence of having a fitness for work certificate from their GP/healthcare provider. This is in acknowledgement that GP's don't currently have capacity to be issuing return to work certificates.

[2] Close contact is defined by the HSE as spending more than 15 minutes face-to-face contact within 2 metres of an infected person / living in the same house or shared accommodation as an infected person. [This is only a guide].

14 Cleaning Spaces following Suspected / Confirmed Cases

- It is recommended cleaning an area with normal household disinfectant after a suspected coronavirus (COVID-19) case has left will reduce the risk of passing the infection on to other people
- If an area can be kept closed and secure for 72 hours, wait until this time has passed for cleaning as the amount of virus living on surfaces will have reduced significantly by 72 hours
- For cleaning purposes, wear a face mask, disposable or washing up gloves. These should be double-bagged, then stored securely for 72 hours then thrown away in the regular rubbish after cleaning is finished
- Using a disposable cloth, first clean hard surfaces with warm soapy water. Then disinfect these surfaces with the cleaning products you normally use. Pay particular attention to frequently touched areas and surfaces, such as bathrooms, grab-rails in corridors and stairwells and door handles
- If an area has been heavily contaminated, such as with visible bodily fluids, from a person with coronavirus (COVID-19), consider using protection for the eyes, mouth and nose, as well as wearing gloves and an apron
- Wash hands regularly with soap and water for 20 seconds, and after removing gloves, aprons and other protection used while cleaning

Principles of cleaning after the case has left the area

Personal Protective Equipment (PPE)

- The minimum PPE to be worn for cleaning an area where a person with possible or confirmed coronavirus (COVID-19) is disposable gloves and an apron. Hands should be washed with soap and water for 20 seconds after all PPE has been removed.
- If a risk assessment of the setting indicates that a higher level of virus may be present (for example, where unwell individuals have slept such as a hotel room or boarding school dormitory) or there is visible contamination with body fluids, then the need for additional PPE to protect the cleaner's eyes, mouth and nose might be necessary.

Cleaning and Disinfection

Public areas where a symptomatic individual has passed through and spent minimal time, such as corridors, but which are not visibly contaminated with body fluids can be cleaned thoroughly as normal.

All surfaces that the symptomatic person has come into contact with must be cleaned and disinfected, including:

- objects which are visibly contaminated with body fluids
- all potentially contaminated high-contact areas such as bathrooms, door handles, telephones, grab-rails in corridors and stairwells
- Use disposable cloths or paper roll and disposable mop heads, to clean all hard surfaces, floors, chairs, door handles and sanitary fittings, following one of the options below:
- Use either a combined detergent disinfectant solution at a dilution of 1,000 parts per million available chlorine

or

- a household detergent followed by disinfection (1000 ppm av.cl.). Follow manufacturer's instructions for dilution, application and contact times for all detergents and disinfectants

or

- if an alternative disinfectant is used within the organisation, this should be checked and ensure that it is effective against enveloped viruses

Additionally:

- Avoid creating splashes and spray when cleaning.
- Any cloths and mop heads used must be disposed of and should be put into waste bags as outlined below.
- When items cannot be cleaned using detergents or laundered, for example, upholstered furniture and mattresses, steam cleaning should be used.
- Any items that are heavily contaminated with body fluids and cannot be cleaned by washing should be disposed of.
- If possible, keep an area closed off and secure for 72 hours. After this time the amount of virus contamination will have decreased substantially, and you can clean as normal with your usual products.

Laundry

Wash items in accordance with the manufacturer's instructions. Use the warmest water setting and dry items completely. Dirty laundry that has been in contact with an unwell person can be washed with other people's items.

Do not shake dirty laundry, this minimises the possibility of dispersing virus through the air.

Clean and disinfect anything used for transporting laundry with your usual products, in line with the cleaning guidance above.

Waste Management

Waste from possible cases and cleaning of areas where possible cases have been (including disposable cloths and tissues):

1. Should be put in a plastic rubbish bag and tied when full.
2. The plastic bag should then be placed in a second bin bag and tied.
3. It should be put in a suitable and secure place and marked for storage until the individual's test results are known.

Waste should be stored safely and kept away from children. You should not put your waste in communal waste areas until negative test results are known or the waste has been stored for at least 72 hours.

- if the individual tests negative, this can be put in with the normal waste
- if the individual tests positive, then store it for at least 72 hours and put in with the normal waste

15 C-19 Compliance Officer

It is advisable to appoint at least one of your Management Team as a C-19 Compliance Officer.

C-19 Compliance Officer's responsibilities and duties fall broadly into 2 categories:

1. Proactive day to day duties
2. Reactive emergency duties

Proactive day to day duties of a C-19 Compliance Officer

- Ensure personnel onsite complete relevant COVID-19 Questionnaires / Declarations.
- Being a constant onsite presence to monitor compliance with social distancing of 2 metres between all personnel onsite (with the exception of planned close working). In instances where there is non-conformance with social distancing the C-19 Compliance Officer is to intervene.
- Maintain a log of regular monitoring of COVID-19 controls on site.
- Ensure there is sufficient up to date signage erected onsite to educate all personnel about the COVID-19 controls on site.
- At all times promote and coach good hygiene practises to all personnel onsite.
- Ensure regular cleaning of welfare facilities, handrails, door handles, etc. is undertaken.
- Ensure hand wash liquid/soap and hand sanitisers are replenished as required.
- Check hot water and hand drying facilities are available onsite.
- Make representations to site management with regards any COVID-19 concerns raised by site personnel to the C-19 Compliance Officer.
- Ensure site personnel are adhering to staggered break time schedules and limiting numbers in canteens, drying rooms and smoking areas cognisant of the 2-metre social distancing guideline.
- Ensure site personnel leaving site at designated breaks remove their site PPE and continue to adhere to social distancing guidelines.
- Report any areas of non-compliance to site management and ensure these are addressed.
- Consider provision of additional controls for exceptional circumstances
- Keep up to date on HSE guidelines.

Reactive C-19 Compliance Officer duties

While the main role of the C-19 Compliance Officer is to prevent the spread of COVID-19 onsite, there is the potential where an individual onsite may experience COVID-19 symptoms and where the C-19 Compliance Officer needs to react.

In a reactive position, their responsibilities include:

- Informing site management if there is a confirmed case or if they have been made aware of an individual with COVID-19 symptoms.
- Isolating an individual with symptoms in an isolation room/segregated area away from other personnel.
- Following site protocol for individuals with COVID-19 symptoms. (i.e. send home, inform them to contact GP).
- Assisting in contact tracing should there be a confirmed case of COVID-19.

16 Deliveries

Deliveries To the Workplace/Goods Inwards

- Ensure that all delivery transactions enforce physical distancing.
- Agree a delivery protocol with suppliers and hauliers.
- All deliveries must be planned with allocated times for collections/appointments/deliveries.
- Make arrangements for paperless delivery acceptance and acknowledgements with suppliers to ensure materials management and material reconciliations are accurate.
- Ensure that hand washing facilities are available convenient to set down and goods inward locations.
- Ensure there are appropriate sanitising arrangements at points of site access, egress and set down areas for raw materials and stock.

Deliveries to Third Party Workplaces

- Minimise deliveries and visits to third party workplaces in so far as it is reasonably practicable.
- Clean (wash and/or sanitise) hands before and after each delivery transaction
- Transport vehicles and containers must be kept clean and in good condition and be easy to clean and/or disinfect
- Ensure that drivers adhere to any site rules as applicable.
- Recommend that where possible the driver should stay in his/her cab until loading or unloading has taken place
- Follow HSE guidance on physical distancing when picking up deliveries and passing deliveries to customers
- Request instruction from the third party as to their COVID-19 guidelines for delivery and drivers
- Driver should be familiar with the system to confirm delivery – taking name, scanning barcodes etc
 - • Use wipes to sanitize pens or mobile scanners after delivery
 - • Drivers should use separate toilet facilities where provided
 - • Driver should use gloves when refuelling

17 Health and Safety Documentation

Insurance

Before commencing activities onsite, contractors are advised to contact their insurance broker or insurance advisor for direction.

Safety Statement

It is advised that all employers review their Safety Statement and associated risk assessments, considering COVID-19.

Risk Assessments / Method Statement (RAMS)

Risk assessments and method statements for all work on site should be reviewed to address the risk of COVID-19 and the associated control measures required. Particular emphasis will be required on 'close working', i.e. where persons work within 2m of each other (2m being the HSE recommended separation for social distancing).

Daily Briefings Documents

It is recommended that daily briefing documents such as SSWP's, SPA's, Daily Safe Starts, Task Briefings or equivalent should be updated to reference COVID-19 and specifically social distancing and hand hygiene.

Basic COVID-19 control measures to be highlighted on all such documents.

18 Construction Site Management

Pre-Planning for works

Site management are responsible for ensuring that all personnel on site, including sub-contractor management/ staff have been made aware of the specific requirements of the site-specific Construction Stage Health and Safety Plan.

Specifically:

- To ensure that a member(s) of the management team
- is appointed as the C-19 Compliance Officer.
- To ensure that appropriate personnel from the PSCS/Contractor and the sub-contractors are appointed as C-19 Compliance Officer(s).
- CIF Online C-19 Induction has been undertaken by all site personnel prior to coming to site. Ensuring that non-compliant personnel are not permitted on site.
- The inclusion of COVID-19 as a hazard in their Risk Assessment and Method Statement (RAMS) for their work activities.
- To ensure that this RAMS is effectively reviewed, approved and communicated.
- To ensure that all site facilities are sufficient to allow for the social distancing and hygiene requirements of this SOP and to take appropriate immediate action where they are not.

On-Site

Site management responsibility includes assessing various work scenarios to ensure that the key requirements such as worker distancing and hygiene/PPE controls are being implemented. This may involve discussions with client and PSDP. It will involve conducting regular site walks and inspections. Continuity of work crews to be encouraged for ease of contact tracing purposes.

Site Workers

It is vital that each worker knows how to work safely during this COVID-19 and understands the requirements of their task specific RAMS. Site management should coach and guide workers during the workday to ensure that they are fully compliant with the requirements.

Management Approach

Site management's main priority is ensuring that their plan is implemented at all levels and at all times with the cooperation of all stakeholders – Clients, PSDP, Contractors, Workers and Suppliers.

General Site Work Activities

1. Reduce - the number of persons-in any work area to comply with the 2-metre social distancing guideline recommended by the HSE (e.g. relocate workers to other tasks, review work schedule and task sequence, consider staggered starting and finishing times etc.).

2. Review - work practices, mindful of close working arrangements. Coach site personnel to self-assess their task for social distancing and transmission points.

3. Supervise – or mentor appointment of C-19 Compliance Officer to specifically monitor adherence to social distancing and hygiene etiquette.

19 Hygiene Guidelines

DO:

Wash your hands properly and often. Hands should be washed:

- ✓ *after coughing or sneezing*
- ✓ *before and after eating*
- ✓ *before and after preparing food*
- ✓ *if you were in contact with someone who has a fever or respiratory symptoms (cough, shortness of breath, difficulty breathing)*
- ✓ *before and after being on public transport if you must use it*
- ✓ *before and after being in a crowd (especially an indoor crowd)*
- ✓ *when you arrive and leave buildings including your home or anyone else's home*
- ✓ *before having a cigarette or vaping*
- ✓ *if your hands are dirty*
- ✓ *after toilet use*
- ✓ Cover your mouth and nose with a tissue or your sleeve when you cough and sneeze.
- ✓ Put used tissues into a bin and wash your hands.
- ✓ Clean and disinfect frequently touched objects and surfaces.

DON'T:

- ✗ Do not touch your eyes, nose or mouth if your hands are not clean.
- ✗ Do not share objects that touch your mouth – for example, bottles, cups.

Disposable Gloves

Do not wear disposable gloves in place of washing hands. The virus can get on gloves in the same way it gets on hands. Also, hands can become contaminated when gloves are taken off.

Disposable gloves are worn in medical settings. They are not as effective in daily life. Wearing disposable gloves can give a false sense of security.

A person might potentially:

- sneeze or cough into the gloves - this creates a new surface for the virus to live on
- contaminate yourself when taking off the gloves or touching surfaces
- not wash your hands as often as you need to and touch your face with contaminated gloves.

Face Masks

- Using masks is unlikely to be of any benefit if the wearer is not sick.
- Sick people will be advised by their doctor when to use a mask. Healthcare workers require masks and other personal protective equipment to protect them from infection during their work.

Current guidelines from the HSE do not recommend the wearing of face masks and/or the undertaking of temperature testing at work; the preferred approach is to ensure social distancing and good hygiene measures

20 First Aid Responder Guidance

COVID-19 infects people through contact with the mucous membranes. First Aid Responders must think of these as being the mouth, nose and eyes. It does not infect through the skin.

- The greatest element of risk for a First Aid Responder is transfer of the virus to the mucous membranes by contact of contaminated hands (including contaminated gloved hands) with the eyes, nose or mouth.
- The key interventions to manage this risk are to minimise hand contamination, avoid touching your face and clean your hands frequently with soap and water or alcohol-based hand gel.
- There is also a significant risk of direct transfer of the virus on to mucous membranes by droplet transmission, that is, by direct impact of larger infectious virus droplets generated from the person's respiratory tract landing directly in your eyes, nose or mouth. This risk is managed by use of appropriate PPE (mask and eye protection) and by providing the ill person with a mask to cover their nose and mouth when coughing or sneezing (respiratory hygiene and cough etiquette).
- If, as a First Aid Responder, you can avoid close contact with a person who may require some level of first aid, do so. This, of course, will not be possible in the event of having to provide emergency lifesaving measures such as an incident of cardiac arrest, heart attack, choking, stroke.
- First Aid Responders should be familiar with the symptoms of COVID-19, as per graphic below. You will need to perform a "dynamic risk assessment" based on the scenario you are presented with.

Key Control Measures

- Standard infection control precautions to be applied when responding to any first aid incident in the workplace. Hand washing with warm water and soap or an alcohol-based hand gel must be performed before and after providing any first aid treatment.
- Any person presenting with symptoms consistent with COVID-19 should be treated as a suspected case.
- In such cases, move individual to a first aid room / isolated room to minimise risk of infection to others.
- Only one First Aid Responder to provide support/ treatment, where practical.
- Additional PPE (enclosed eye protection and FFP3 mask if available) should be worn by First Aid Responders when responding to all first aid incidents where close contact cannot be avoided.
- Please also have a mask available to give to person if they are displaying symptoms consistent with COVID-19 to limit droplet dispersion.
- If you suspect a person has experienced a cardiac arrest, do not listen or feel for breathing by placing your ear and cheek close to the person's mouth. If you are in any doubt about confirming cardiac arrest, the default position is to start chest compressions only until help arrives. To iterate the point, a person in cardiac arrest should have compression only CPR applied.
- Persons with minor injuries (cuts, abrasions, minor burns) - where practical, a First Aid Responder should avoid close contact and advise the injured party what steps to take in treating their injury.

- No reusable equipment should be returned to service without being cleaned/disinfected appropriately.

First Aid PPE Requirements

The following PPE must be available for responding to first aid incidents:

1. Disposable gloves (nitrile/latex)
2. FFP3 or FFP2 Face masks
3. Disposable plastic aprons
4. Enclosed eye protection

First Aid Responder must ensure that the mask covers both the mouth and nose and is fitted correctly to create an adequate seal to the face.

Following first aid treatment, disposable PPE and any waste should be disposed of appropriately and reusable PPE cleaned/disinfected thoroughly.

Wash hands thoroughly with warm water and soap before putting on and after taking off PPE. Replenish PPE stock as appropriate.

Liaise with your Site Lead or designated person to ensure any issues with first aid PPE are resolved in as timely a manner as possible.

21 Thorough Examination and Testing

Several pieces of legislation enforced by the Health and Safety Authority (HSA) contain provisions that require examinations and testing to be undertaken by competent persons at predefined statutory intervals. Such legislation includes the Safety, Health and Welfare at Work (General Application) Regulations 2007 (S.I. No. 299 of 2007) in respect to lifts and lifting equipment and the Safety, Health and Welfare at Work (General Application) (Amendment) Regulations 2012 (S.I. No. 445 of 2012), in respect to pressure systems.

The continued safe operation of such equipment depends, in a large part, on the continued safety of the equipment and accessories involved. Failures in this type of equipment can have significant or even fatal consequences for workers and members of the public. Duty-holders have a legal responsibility to maintain work equipment in a condition that is safe and to ensure that any required statutory inspections, examinations or testing is undertaken as required.

There is currently no derogation in respect of the provisions of the Safety, Health & Welfare at Work Act 2005 or its associated statutory provisions at the present time. However, the HSA recognises that employers, as a result of national measures to prevent the spread of COVID 19, may in certain circumstances, find it challenging to source the necessary competence to undertake such examinations. Notwithstanding any such difficulties, employers are reminded of their general duty to ensure, so far as reasonably practicable, the safety health and welfare at work of their employees and that of others who may be present at the place of work.

Additionally, employers must continue to ensure, so far as reasonably practicable, the design, provision and maintenance of plant and machinery so that it is safe and without risk to health. Should duty-holders have any concern about the continued safe operation or use of such plant or equipment, it should be removed from service until such concerns have been appropriately addressed.

In the event that engineering companies are suffering shortages in their resources, which may inhibit their ability to undertake such statutory examinations, consideration should be given to focusing available resources on equipment present at essential locations or which is critical to the operation of infrastructure and supply chains essential to the national interest at this critical time.

Employers are advised to follow the latest public health advice and to identify and implement suitable control measures to mitigate the risk of COVID-19 infection in the workplace. These measures should be communicated to all relevant employees and others at the place of work. Competent persons who are working on site where there are restrictions arising from the risk of COVID-19 should comply with site rules and also take into account public health advice around preventing the spread of COVID-19. Public health advice is available on the Department of Health, HSE and Health Protection Surveillance Centre websites.

During inspections, the HSA have stated that they will take into consideration all matters of fact when deciding the appropriate level of action to take where any contravention of the relevant statutory provisions are observed.

As mentioned above, there is currently no exemption for or relaxation of the legislative requirements in respect to the undertaking of statutory examinations or testing. However, the Health and Safety Authority recognises this is a fluid situation, and are keeping matters under review

22 Health and Safety Training

Manual Handling

No exemptions or relaxation of the legislative requirements in respect of the statutory requirements under the Safety, Health & Welfare at Work Act 2005 or its associated Regulations are in place at this current time, however, the Health and Safety Authority recognise this is a fluid situation, and are keeping matters under review.

The Authority recognises that employers, as a result of national measures to prevent the spread of COVID 19, may find it challenging to source training courses or competent persons to provide the required training in the current circumstances. Notwithstanding any such difficulties, employers are reminded of their general duty to ensure, so far as reasonably practicable, the safety health and welfare at work of their employees and also others who may be present at the place of work. Employers are reminded of the need to take all measures, so far as reasonably practicable, to that end.

Employers need to take appropriate organisational measures or use the appropriate means to avoid the need for manual handling which involves risk. Where manual handling involves risk that cannot be avoided, employers need to take appropriate organisational measures, use appropriate means or provide employees with such means to reduce the risk involved.

Every effort should be made so far as reasonably practicable to continue to provide manual handling training for employees as necessary with particular consideration to be given to prioritising the delivery of training for those staff who are most at risk. Up to date public health advice on preventing the spread of COVID-19 will need to be taken account of when providing training. Detailed public health advice and information is available on the Department of Health, HSE and Health Protection Surveillance Centre websites.

First Aid

PHECC is responsible for the provision of First Aid Certification and has confirmed that that if a Responders certification has lapsed and they are unable to complete recertification, it is acceptable for the Registered Institutions to continue to extend this period until such time that the situation is rescinded.

This departure from normal standards shall be limited to the duration of the current COVID-19 crisis.

The First Aid Regulations require employers, based on a risk assessment, to have sufficient first aid equipment and trained first aiders in the workplace. The regulations do not specify the training standard, duration of training and retraining and recertification periods but the Authority will continue to recognise first aid responders existing certification during the Covid 19 pandemic. Those first aiders can continue to administer first aid in the workplace.

Fork Lift / Driver Mounted Ride on Vehicles

The Authority recognises that employers, as a result of national measures to prevent the spread of COVID 19, may find it challenging to source training courses or competent persons to provide the required training in the current circumstances. Notwithstanding any such difficulties, employers are reminded of their general duty to ensure, so far as reasonably practicable, the safety health and welfare at work of their employees and also others who may be present at the place of work. Employers are reminded of the need to take all measures, so far as reasonably practicable, to that end.

Requirements relating to Rider operated lift truck [ROLT] training are provided in a Health and Safety Authority Code of Practice (COP).

The COP outlines that persons shall not work, nor be required to work, on, at or with any machine unless they have been fully instructed as to the dangers arising in connection therewith and the precautions to be observed and has received a sufficient training in work at the machine. The training of lift truck operators may be broken down into three stages:

- **Basic training** – the basic skills and knowledge required for safe operation;
- **Specific job training** – knowledge of workplace and experience of any special needs and handling attachments;
- **Familiarisation training** – operation on the job under close supervision.

The Code of Practice advises only on basic training of lift truck operators and there is no specific requirement to provide refresher training after set intervals. However, from a civil liability and precedent context, it is strongly advisable to adhere to best practice of refresher training being undertaken at least once every three years.

What do I do if my employees Safe Pass card expires after the 01 March 2020

Arising from the cessation of the delivery of the SOLAS Safe Pass training programme during the Covid-19 emergency and for the period of such cessation, a safety awareness registration card that expires after 1 March 2020 shall be regarded as valid.

23 Water Systems and Legionella

This advice is aimed at employers or those in control of places of work. It highlights the requirement to continue managing Legionella control to avoid the potential for Legionnaires' disease. This disease can be fatal and hospitalization is generally required to treat symptoms. With the health service currently dealing with a public health emergency, it is vital that employers take appropriate action to maintain and operate their water systems especially wet cooling systems, so far as reasonably practicable, during this public health emergency.

Background

Because of the current situation with COVID-19 many places of work such as hotels, leisure facilities, offices, dental clinics and hairdressers have had to temporarily close with only essential businesses staying open. In many cases, the closure may have occurred overnight or at very short notice. Essential businesses such as healthcare facilities and nursing homes may find that their primary focus is on current issues. In addition, employers may have concerns about allowing water system contractors on site due to the current situation. As a result, the control of Legionella bacteria may not be deemed a priority and control measures may be neglected, however, it is vital that so far as reasonably practicable that control measures are still maintained.

What is Legionnaires' disease?

Legionnaires' disease is a potentially fatal form of pneumonia. People may become infected when they breathe in tiny water droplets (aerosols) or droplet nuclei (particles left after the water has evaporated) contaminated with elevated concentrations of Legionella bacteria. Legionella bacteria grow best between temperatures of 20°C–45°C with optimum growth temperature being 35°C–40°C. High temperatures (minimum 60°C) kill the bacteria. Legionnaires' disease can affect anyone. People with immunosuppressed systems, the elderly or people suffering from respiratory problems may be particularly vulnerable.

Where are the bacteria found?

Legionella bacteria are found in low numbers in natural aquatic environments, for instance, lakes, rivers and ground water. As a result, it is virtually impossible to prevent Legionella bacteria entering man-made water systems. In low numbers, the bacteria are generally considered harmless. With the correct conditions, for example, warm water, the presence of microorganisms and nutrients in the water or materials such as rust, the bacteria can grow and multiply to high levels, which increase the risk of exposure. The bacteria tend to grow in biofilms (slime). Biofilms are likely to form on surfaces where there is low water flow or water is allowed to stagnate. Low or no water flow and stagnation can occur during temporary water system closures.

Where may potential sources of aerosols be encountered? The following is a non-exhaustive list of potential sources of aerosols, which may contain Legionella bacteria:

- wet cooling systems for example, cooling towers and evaporative condensers;
- spa pools;
- showers, taps and toilets;
- machine cooling systems for example, in lathes and plastic injection moulding machines;
- spray booth water curtains;
- humidifiers in food cabinets and factories;
- ornamental fountains and water features;
- dust suppression systems such as those used in construction, cement and waste recycling industries;
- horticultural misting systems, lawn sprinklers;
- clinical humidifiers;

- firefighting systems for example, sprinklers and hose reels; and
- vehicle washes and power hoses.

Prevention of Legionnaires' disease during the COVID-19 Pandemic

- Identify key workers who carry out safety critical activities and plan for what should happen if they become ill or have to self-isolate. This may involve providing additional instruction, information and training to other employees and familiarizing them with the Legionella control plan and the required controls and checks to be carried out.
- Ensure that the controls identified in the Legionella control plan are adhered to, so far as reasonably practicable, for example, flushing of outlets, continued chemical dosing of evaporative cooling systems and so on. Controls may need to be adapted due to changing circumstances. Changes to control should be proportionate to risk and based on a review of the risk assessment.
- For premises with simple water systems, which have had to shut down, such as small shops and hairdressers, if access is still permitted, then extended weekly flushing of all outlets will assist in maintaining microbiological control.
- Ensure that employees and contractors adhere to the Government's Public Health Guidelines regarding social distancing, hand washing and other recommended measures.
- Where employees or contractors operate alone, ensure that there is an appropriate lone working policy in place, for example, use of a monitored personal alarm or a designated phone call check.
- In the event it is no longer feasible to continue ongoing control, water systems should be safely shutdown. In general, water systems should be left filled with water and not drained down. With large water systems, residual water or moisture will remain within the system if drained and biofilm can develop where there are pockets of water or high humidity. The water in the system helps to avoid other problems associated with systems drying out, including failure of tank joints and corrosion in metal pipework.
- Where wet cooling systems are being shut down, competent advice should be obtained prior to shutdown. Proper decommissioning (draining, sealing and addition of desiccant) may be required in order to minimise the Legionella risk when put back into service.
- If a building's use is changed, for example to add extra capacity for hospitals or provide accommodation for key workers, then the risk assessment and control measures should be reviewed by a competent person.

Prevention of Legionnaires' disease after the COVID-19 Pandemic

- If the water system has been managed and controlled in line with the Legionella control plan during the pandemic, the system can continue to be used as is.
- Water systems, which have been shut down, have had low water usage, or modified control regimes during the pandemic, may result in an increased risk of Legionella bacteria being present. Such systems may have been out of use for a significant time and in most cases cannot simply be used straight away. The system may require recommissioning as if new (that is thorough flushing, cleaning and disinfection and/or controlled flushing of outlets such as taps, showers and toilets) prior to return to use and reopening of the building. Risk assessment review and water testing should also be considered as part of the recommissioning plan. The services of a competent person may be required to provide further advice.
- Wet cooling systems, which have been shut down, will require recommissioning by a competent person prior to re-use.

24 Fire Safety

The threat associated with fire in your workplace has not fundamentally changed. Therefore, the ongoing maintenance of fire safety equipment is necessary, with due regard to those points outlined at Section 21. Therefore, you must ensure that the normal standards are maintained for:

Fire extinguishers;
 Fire alarm;
 Emergency lighting;
 Fire exits;
 Emergency evacuation exercises.

Liaise with your relevant service provider well in advance of the due date of any testing, inspection, servicing or maintenance requirements.

Emergency Evacuation Exercises

In the context of COVID 19, any emergency plans and procedures should be reviewed and modified where necessary to account for social distancing. Some considerations are:

- Defer emergency evacuation exercises/fire drills for the moment but ensure that you keep this under review and that 2 exercises are completed in the year.
- If necessary, consider undertaking an increased number of evacuation exercises and target groups of employees/occupants. For example, a “floor by floor” or “Department by Department” exercise rather than a full building evacuation.
- Consider providing secondary assembly points to supplement the usual assembly points and cater for social distancing by allowing groups to spread out.
- Discuss evacuation and assembly arrangements with your Fire Wardens. For example, consider utilising area sweeps rather than roll calls to avoid close proximity at assembly points.
- Share revised arrangements with employees.

SAMPLE COVID 19 RISK ASSESSMENT.

Covid-19 is a new illness that can affect your lungs and airways. It is caused by a virus called Coronavirus. Symptoms can be mild, moderate, severe or fatal.

This is a draft copy of a **generic Risk Assessment** for dealing with the current Covid-19 situation in the workplace. It is not likely to cover all scenarios and each employer should consider their own unique circumstances. Much more specific assessments, such as that for health care workers, may look quite different although many of the principles would still be relevant. To keep up to date with HSA advice to workplaces in this fast changing situation visit www.hsa.ie.

What are the hazards?	Who might be harmed	Controls Required	Additional Controls	Action by who?	Action by when?	Done
Spread of Covid-19 Coronavirus	Staff Visitors to your premises Cleaners Contractors Drivers Vulnerable groups – Elderly, Pregnant workers, those with existing underlying health conditions Anyone else who physically comes in contact with you in	<u>Hand Washing</u> <ul style="list-style-type: none"> • Hand washing facilities with soap and water in place. • Stringent hand washing taking place. • See hand washing guidance. • https://www.nhs.uk/live-well/healthy-body/best-way-to-wash-your-hands/ • Drying of hands with disposable paper towels. • https://www.nursingtimes.net/news/research-and-innovation/paper-towels-much-more-effective-at-removing-viruses-than-hand-dryers-17-04-2020/ 	<p>Employees to be reminded on a regular basis to wash their hands for 20 seconds with water and soap and the importance of proper drying with disposable towels. Also reminded to catch coughs and sneezes in tissues – Follow Catch it, Bin it, Kill it and to avoid touching face, eyes, nose or mouth with unclean hands. Tissues will be made available throughout the workplace.</p> <p>Encourage staff to report any problems and carry out skin checks as part of a skin surveillance programme</p> <p>To help reduce the spread of coronavirus (COVID-19) reminding everyone of the public health advice available from www.hse.ie</p>			

	<p>relation to your business</p> <ul style="list-style-type: none"> • Staff encouraged to protect the skin by applying emollient cream regularly • Gel sanitisers in any area where washing facilities not readily available <p><u>Cleaning</u> Frequently cleaning and disinfecting objects and surfaces that are touched regularly particularly in areas of high use such as door handles, light switches, reception area using appropriate cleaning products and methods.</p> <p><u>Social Distancing</u> Social Distancing -Reducing the number of persons in any work area to comply with the 2-metre (6.5 foot) gap recommended by the Health Services Executive</p> <p>Taking steps to review work schedules including start & finish times/shift patterns, working from home etc. to reduce number of workers on site at any one time. Also</p>	<p>Posters, leaflets and other materials are available for display. https://www.hsa.ie/eng/topics/covid-19/covid-19_coronavirus.html</p> <p>Rigorous checks will be carried out by line managers to ensure that the necessary procedures are being followed.</p> <p>Staff to be reminded on a daily basis of the importance of social distancing both in the workplace and outside of it. Management checks to ensure this is adhered to.</p>			
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		<p>relocating workers to other tasks.</p> <p>Redesigning processes to ensure social distancing in place.</p> <p>Conference calls to be used instead of face to face meetings.</p> <p>Ensuring sufficient rest breaks for staff.</p> <p>Social distancing also to be adhered to in canteen area and smoking area.</p> <p><u>Wearing of Gloves</u> Where Risk Assessment identifies wearing of gloves as a requirement of the job, an adequate supply of these will be provided. Staff will be instructed on how to remove gloves carefully to reduce contamination and how to dispose of them safely.</p> <p><u>RPE</u> <i>Public Health guidance on the use of PPE (personal protective equipment) to protect against COVID-19 relates to health care</i></p>	<p>Staff to be reminded that wearing of gloves is not a substitute for good hand washing.</p> <p>To minimise the risk of transmission of COVID-19 during face-fit testing the following additional measures should be carried out – Both the fit tester and those being fit tested should wash their hands before and after the test. Those being fit tested with non-disposable masks should clean the mask themselves before and immediately after the test using a suitable disinfectant cleaning wipe (check</p>			
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		<p><i>settings. In all other settings individuals are asked to observe social distancing measures and practice good hand hygiene behaviours</i></p> <p>Where RPE is a requirement for risks associated with the work undertaken the following measures will be followed-</p> <p>Tight-fitting respirators (such as disposable FFP3 masks and reusable half masks) rely on having a good seal with the wearer's face. A face fit test will be carried out to ensure the respiratory protective equipment (RPE) can protect the wearer. Wearers must be clean shaven.</p> <p><u>Symptoms of Covid-19</u> If anyone becomes unwell with a new continuous cough or a high temperature in the workplace they will be sent home and advised to follow the stay at home guidance. Line managers will maintain regular contact with staff members during this time.</p>	<p>with manufacturer to avoid damaging the mask).</p> <p>Test face pieces that cannot be adequately disinfected (e.g. disposable half masks) should not be used by more than one individual.</p> <p>Fit testers should wear disposable gloves when undertaking cleaning of the tubes, hoods etc. and ensure they remove gloves following the correct procedure (PDF) Reference https://www.hse.gov.uk/news/face-mask-ppe-rpe-coronavirus.htm</p> <p>Internal communication channels and cascading of messages through line managers will be carried out regularly to reassure and support employees in a fast changing situation.</p> <p>Line managers will offer support to staff who are affected by Coronavirus or has a family member affected.</p>			
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