

Covid-19

Risk Based Occupational Health and Safety Guidelines to Support Return to the Workplace

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Introduction Covid-19: Return to Working Guidance

The current global pandemic (COVID-19) has had an unprecedented impact on the global economy and continues to present all business sectors with severe immediate challenges both commercially and ethically.

These guidelines are intended to assist employers re-establish working arrangements once restrictions on social contact have been eased, or removed, by national or regional governments. The guidelines take account of current good practice occupational health and safety guidance issued by the World Health Organisation (WHO) The Organisation for **Economic Cooperation and Development** (OECD) the UK Health and Safety Executive (HSE) and the European Commission. These guidelines will be updated periodically as more information is developed by governments, nongovernmental organisations, NGOs, and professional organisations.

The risk of transmission of Covid-19 is expected to be present for some time. As more and more employers start to re-open, or increase workplace activities, including opening to the public and visitors, careful consideration must be given to how to protect employees, visitors, contactors, and others.

Beyond total avoidance of personal contact, such as remote working or working at home, there is no single measure which can provide absolute safeguarding for the many combinations of work activity and the movement of people in work. These guidelines provide a selection of specific types of control measures which can be combined to provide the best practical protection to employees and those they may come into contact with. These options are presented as a range of measures starting with the most effective through to those which are least effective, but which still may be important.

The guidelines will assist employers in ensuring that the risk of infection from COVID-19 is reduced as far as is reasonably practicable, in line with occupational health and safety, (OHS) and other relevant legislative requirements. Implementation and sustainability of protection requires an OHS management system to deliver the intended outcomes of infection control. Central to this is careful planning based on an assessment of the opportunities for transmission in the specific context of the work environment and workplace, coupled with the way transmission can be eliminated or reduced as far as possible whilst still enabling the business to function. A record of the conclusions of these considerations should be retained and communicated to employees (and others) on what has been decided and why.

Given that the risk of transmission of this novel virus cannot be totally eliminated, then any form of personal interaction, beyond absolute segregation within a working environment, will still involve a risk of infection and transmission between employees and those with whom they come into contact.

This guidance provides general information on the measures you can take to protect your workplace.

Further support, advice and guidance including sector-specific supplementary information is available from the British Safety Council.

Risk Management

This section outlines some minimum expectations and components of an occupational health and safety management system which should be in place to establish, implement and maintain protective control against the risk of transmission of Covid-19 within the workplace or during routine work activities.

Assessing the risks

The control measures set out in this guidance should be selected and appropriately implemented based on an assessment of the potential risks to employees (and others) arising from their work activities. A suitable and sufficient risk assessment should take account of:

- work location
- workplace configuration (set-up)
- workflow
- access to, and egress from, the workplace
- how people travel to and from their place of work
- work activities
- level of workplace occupancy
- Working hours (shift patterns)
- Ability to ensure adherence to relevant requirements
- likelihood of acceptance by employees, contractors, visitors and customers
- · behavioural and wellbeing impact
- current government, sector or WHO guidance

In the context of workplace occupational health and safety, the risks are of person to person transmission of Covid-19, together with transmission from touching equipment, articles and the fabric and structure of the workplace such as door handles, tools, desk workstations, telephones etc. Wherever work involves interaction with non-employees such as customers, workplace visitors, contractors or those bringing articles and materials into the workplace, then this risk is a two-way process. The risk of employees passing on infection to others directly or indirectly via objects and materials and the risk of others directly or indirectly passing on infection to employees. This means that the risk assessment, to prepare for opening up of the workplace, should consider all such potential channels of transmission.

Essentially, a risk assessment should consider:

- Where within the workplace can people come into direct, close contact with others or touch potentially contaminated surfaces, equipment, and materials?
- What activities are undertaken which give rise to the opportunity for transmission?

In order to assess these issues, an analysis of workflows to identify where products, items and people move through the workplace should be undertaken. Locations where people could interact or assemble should be identified to determine contact points or potential congestion "hot spots" where there may be an elevated risk of transmission.

Planning the control measures

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Once completed, the risk assessment should generate a Covid-19 Preparedness and Response Plan or alternatively a set of phased plans to re-open the workplace.

At least two parts of such a plan will be required.

Part 1: Should include the actions required leading up to re-opening or scaling-up activities and detail those employees who can remain working from home base.

Part 2: Should address the issues and control measures to be implemented once workplace occupancy has resumed.

Careful consideration should be given to what each measure will achieve in terms of preventing infection to (and from) your employees and how effective each control will be in the context of your workplace, work activities and support from your employees.

The important aspects of planning to consider are that:

- The control measures being implemented should be based on the most effective means to prevent infection through work activity
- The workplace Preparedness and Response Plan should be recorded and documented and made available to employees and their representatives

- The selection and adoption of control measures should be made in consultation with, and participation of, employees or their representatives
- The plans cover the phases to be implemented to get people into the workplace together with the measures to be put in place once people are at work
- Inclusion of how people will travel to and from the workplace.

This Covid-19 Preparedness and Response Plan should include both the physical and administrative measures such as:

- Direction of flow of people around the workplace
- Restrictions such as barriers or entry control points
- Designation of who has to comply with specific measures during designated activities
- Information, training, needs and expectations for both employees and others and when and how that information or training is required. For instance, if you can advise visitors to your workplace in advance of their arrival of the special measures in place, this will help them to prepare in advance.

Allocate Roles and Responsibilities

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Relevant personnel within your business should be allocated specific roles and responsibilities for developing, communicating, implementing, monitoring, and reviewing the effectiveness of the control measures.

In larger organisations establishing a preparedness and response team will help to provide a more co-ordinated approach.

Sufficient time should be allowed for planning and preparing for a return to work. Many organisations have indicated that three to four weeks of advanced planning, preparation, testing and communicating is needed before re-commencing work. It should be the role of senior management within the organisation to lead and oversee these preparations and to provide sufficient resources and support for implementation. Senior managers and executive teams should review the effectiveness of the measures in place to ensure any concerns raised by employees are adequately addressed.

Allocating roles and responsibilities should include:

- Designating teams or individuals with responsibility for each area of the plan and for monitoring compliance and effectiveness
- Designating Covid-19 special advisors who can be a point of contact within the workplace.



Implementing and maintaining controls

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The return to work planning needs to be converted into reasonably practicable and effective workplace controls and arrangements designed to support their sustainability.

Controlling the risk of infection may involve innovative and significant changes to traditional ways of working in many workplaces. Such changes will need time to be fully assimilated and accepted by employees as they may well involve perceived inconvenience, disruption and delays which did not exist prior to Covid-19.

Consultation with, and participation of, employees and/or their representatives in the development and implementation of control measures will support acceptance and adherence within the workplace. Important issues to consider are:

- The strongest possible and most effective measures should be implemented before work activities resume or are scaled up
- The control measures selected, the location or activities to which they apply and the workers to which they apply should be documented
- Update existing OHS plans and risk assessments to reflect the new measures adopted for Covid-19. This should include the workplace emergency arrangements.



Communication and training

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Sharing information, understanding of the measures selected and of the underlying rationale will be essential in ensuring compliance, sustainability and, most importantly, re-assurance to employees, visitors, and other stakeholders.

Once the Preparedness and Response Plan has been developed, consideration should be given regarding the key messages and information which employees and others will need and prepare the methods and materials needed to communicate these effectively.

Providing visual information through posters, signs, screensaver prompts and televisual presentations at entrances, exits and throughout the workplace will be important to reinforce and remind everyone of why these precautions are important and the reasons they are in place.

The important issues to consider are:

- Information about the control measures, the reasons why they have been selected is communicated to employees
- Signs, posters, screensaver prompts and televisual information relating to the control measures should be displayed throughout the workplace
- Induction training on the control measures should be provided before employees return to work or change duties. This should be done remotely (electronically), if possible
- Frequent (daily), informal presentations
 / briefings should be made to
 employees and contractors explaining
 the purpose of the measures and
 allowing for questions to be raised.

The communication plan will need to be in at least two parts.

Part 1: The first part should provide the information people will need before they return to work or visit your workplace to help them prepare. For staff who visit other workplaces or residential premises to provide a service, you may wish to provide information in advance to your customers and clients on how your staff will interact with them whilst maintaining precautions to reduce the risk of transmission.

Part 2: The second part of the communication plan should cover "day to day" operations within the workplace or for work activities where the aim is to ensure people understand and accept the arrangements that have been put in place for their health and safety.

People will understandably be anxious about their personal health and safety and that of others when they return. It is considered essential that employees (and others) may require clarification on the control measures that have been implemented and how to fully apply them. Clear and confidential arrangements for people to raise concerns should be established and effectively communicated.

Monitoring effectiveness

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Experience shows that even the best designed occupational health and safety controls deteriorate over time and that once in place, continual improvement can often be identified.

It is essential that effective monitoring arrangements are established in order to provide assurance that the measures implemented function as desired and that any misuse or deterioration of the controls are identified and rectified as quickly as possible. The transmission of the virus is opportunistic and can exploit any weaknesses in your control measures. The effectiveness and adherence to the control measures should be monitored at least daily.

The important arrangements needed are:

- Monitoring the implementation and adherence to the control measures at least daily
- Defeat or misuse of the designated measures is recorded and followed up to ensure that they are both effective and sustainable.



Reviewing and revising arrangements

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Use the findings of the monitoring arrangements, review and consider whether the control measures are effective and delivering the level of protection required. Consider feedback from employees and others to continually improve the control measures.

The important continual improvement factors are:

- Outcomes from workplace monitoring should be used to review and revise the control measures in place
- Government and other expert advice should be constantly monitored to determine whether improvements or relaxations are appropriate

- Feedback from employees (and other stakeholders) should be used to determine whether changes are necessary
- The risk assessment and Preparedness and Response Plan should be reviewed whenever there is a change in operational activities.



Control Measures – How to Minimise the Risk of Transmission

Let's all stay safe and stand two metres apart These guidelines offer a selection of control measures which can be applied in differing combinations within a workplace (or work activities) to control the risk of spread of infection as far as is reasonably practicable.

A systematic risk assessment (as outlined above) should provide guidance in selecting suitable control options. Different combinations of controls in different parts of the workplace may be required, or indeed at different times dependant on the activities being undertaken.

There is no universal solution, or a definitive set of rules, that can apply everywhere. However, considering the way protection is achieved by each measure, or a combination of measures, should support implementation of the best, and most appropriate available controls.

The available control measures are based upon a hierarchy of control principle based upon:

- Elimination of risk, as far as possible, and then
- Control potential exposure
- Reduce level of contamination
- Reduce duration of exposure.

More specifically:

- 1. Avoid all direct personal contact
- 2. Health surveillance (including support provision) and exclusion of those with symptoms (or members of same household with symptoms)
- 3. Social distancing (minimum 2m)
- Personal hygiene measures
 PPE & physical barriers
- (protective screens)
- 6. Workplace cleaning regimes
- 7. Ventilation.

The effectiveness of the control measures is based on the relative level of protection provided by each measure to reduce potential exposure to Covid-19.

The most effective method of protection is to avoid all direct personal contact (1) with reliance on workplace ventilation (7) being the least effective.

Each control measure should be adopted as far as possible with the highest priority being given to the most effective measures that can be implemented.

Each control measure should be supported by consultation, information and training for personnel who need to adopt the controls or comply with their requirements. People are more willing and receptive to adhering to controls if they understand why they are needed and how it will help protect them and others.

Total avoidance of personal contact

The Covid-19 virus is transmitted directly from person to person from airborne droplets (e.g. through coughing or sneezing) or exhaled, and indirectly where the viruses land on surfaces, objects or materials (fomites) which are then transferred onto hands and into the body via touching mouth, nose or eyes.

The only completely effective way to control transmission is for people to avoid direct contact with others or contact with potentially contaminated surfaces. This is essentially what "lockdown" restrictions are aimed at achieving.

Within the workplace this principle should continue to apply and home or distance working should be implemented as much as possible. Those key employees who have to come into the workplace to undertake their jobs should be identified, whilst others should continue working remotely as far as is possible.

This is especially the case in the early phase of a return to work plan where lockdown restrictions have been eased and people will be adjusting to alterations in working practices and new workplace controls.

What does this involve?

• Not being in direct personal contact with fellow employees or the public or potentially contaminated surfaces and objects whilst at work.

Why is it needed?

• This is the only effective way to fully prevent work-related infection and onward transmission.

How do I apply these controls?

- Working at home or remotely from others.
- Teleworking and video conferencing.
- Only essential staff attend the workplace and only for the period they are needed.
- Working at home for the most vulnerable members of staff, those with underlying health conditions, pregnant women, and employees over 70 years of age.

Where and when should they be implemented?

- Whenever and wherever possible.
- Including within workplaces to reduce interpersonal contacts.

Who should adopt them?

- Any employee or support contractor who has the capacity and opportunity to work from home or remotely from the workplace.
- Vulnerable employees:
 - Employees with underlying health conditions which place them at increased risk of Covid-19 infection or from severe effects
 - Pregnant women
 - Employees over the age of 70.

Although this is the most effective and desirable control measure available, it will be the most difficult to sustain for extended periods of time. However, distance working can be incorporated into new working patterns alongside other measures set out in this guidance.

The risk of infection is based on the opportunity for transmission. Alternating periods at work including remote working for differing groups of employees, will reduce potential exposure in a similar manner to controlling exposure to other health and safety hazards (e.g. noise).

However, as with Covid-19, where the form of harm is not visible or easily detected, then wider considerations and subsequent in control measures are required.

Health Control and Surveillance

Identifying people who may be infected with Covid-19, or who have been in close personal contact with an infected person, and then isolating them from work for a period until they are clear of infection is a key control measure.

People carrying the Covid-19 virus can transmit infection before they show any symptoms and indeed may never show symptoms.

As with other control measures in this guidance this measure should be used in combination with other controls within the workplace. It is also advisable to identify employees who are at high-risk of serious illness due to their age or underlying health conditions before they return to work. Essentially, pre-return to work confidential health assessments via self-declaration by employees (including those living within the same household who share living spaces) should be considered (in accordance with GDPR requirements). This can be a simple health declaration statement completed by the employee and submitted to the employer before they return to work. The declaration should confirm that the person:

- Is not currently suffering with, or has not suffered with, the symptoms of Covid-19 within the last 14 days
- Has not tested positive for the virus within the same period
- Persons with whom they share the same household are free from symptoms, and equally, have not tested positive for Covid-19 in the last 14 days.

Preferably this should be done electronically, or verbally by telephone to avoid handling paperwork. This will not require a medical examination of the employee. There are existing and rapidly developing "Apps" which can be used to support this approach. Where clinical testing for current infection, or for possible acquired immunity via an antibody test, is available to the employer or employees this can provide a more accurate indication of infection, including, identifying symptomless cases.

In most cases, apart from essential employees in high risk occupations, a simple health declaration should be sufficient. Even with well-developed testing regimes there is still a chance of inaccurate results (positive or negative) so caution must be exercised even within testing regimes. *Employee personal confidentiality must be maintained when dealing with personal health information*.

Health declarations should be routinely repeated once people return to the workplace (for example a weekly repeat of the health declaration). The Preparedness and Response Plan should include clear instructions for employees to notify the employer once the workplace has re-opened if:

- They or a member of their household, exhibit symptoms, or
- If they or a member of their household tests positive for Covid-19.

Importantly, if an employee or visitor becomes unwell with the symptoms of Covid-19 whilst at work, the following actions are recommended:

- They should immediately report the matter and steps should then be taken to isolate this person and exclude them from work.
- Arrangements should be put in place to respond to such a situation covering the following points:
 - The affected person should report their condition from their work location, wherever this is possible, rather than moving to a first aid room or occupational health centre
 - They should stay in the one location and the response should come to them
 - The response should be undertaken by suitably trained personnel (for example first aiders) who should be provided with suitable PPE
 - The affected person should be provided with and asked to wear a face mask

- They should then either be moved under supervision to a place of isolation within the workplace or leave the workplace as soon as possible via a safe route where they will not come into contact with other people apart from medical response staff should they need to be taken to hospital
- Recent contact details should be collated from the person to determine who they have been in contact with and where they have been within the workplace during their work period for that day
- Advice should be given to recent direct contacts of the person taken ill who should be alerted to be vigilant relating to developing symptoms themselves or coming into contact with people within their household who are at high risk of serious illness from Covid-19
- If they are key employees and a reliable antigen test is available, then it will be advisable for them to be tested
- The local working area should be thoroughly cleaned and disinfected by designated personnel provided with suitable PPE. All surfaces and articles that the affected person has been in recent contact with should also be cleaned.

Screening the temperature of people with remote thermometers has developed as a common practice, especially for mass transport systems such as air travel or for entry into locations with large gatherings of people. This can also be a useful measure at the entrance to workplaces before allowing people to enter.

However, this form of health monitoring has several disadvantages in so far as its takes time to conduct and would undoubtedly delay entry time into workplaces. The checks also need to be performed by trained staff and the accuracy of the results can be variable. The check may not detect all those with symptoms (high temperature is just one of many symptoms) or may be a sign of something other than Covid-19. These factors do not make this measure a strong form of control of transmission, although it could be considered to provide a positive signal that controlling transmission within the workplace is being taken seriously.

Another important aspect of health monitoring is to ensure suitable support is available for employees who may be experiencing anxiety, depression or stress. Information relating to employee assistance programmes, trained mental health first-aiders, and external support services should be effectively communicated to employees accordingly.

What should I do?

- Detect people who may be infected, including testing where available.
- Exclude infected and potentially infected people from the workplace.
- Trace recent employee contacts of a person with symptoms or known to be infected.

Why is this needed?

 Rapid detection and isolation of infected employees or close household contacts of employees reduces the risk of transmission at a stage where they may be shedding large volumes of virus.

How do I apply these controls?

- Self-reporting of symptoms by employees.
- Workplace health monitoring checks.
- Reporting of symptoms and confirmed cases within households of employees.
- Reporting of symptoms by contractors or drivers (for example delivery) who visit or work in the workplace.
- Exclusion from work of employees with symptoms or a confirmed infection.
- Exclusion from work of employees who share a household with a confirmed case or person exhibiting symptoms.
- Following up unreported absences from work.
- Provide clear information on key symptoms and health reporting system.

Where and when should they be implemented?

- 'Good Health and Symptom Free' declaration before returning to work, after a period of leave, or following recovery from other illnesses.
- Immediately symptoms appear at work or when at home before attending their workplace.
- Periodic repeats of 'Good Health and Symptom Free' declarations.

Who should adopt them?

- All employees, part time or full time.
- Contractors who work within the workplace.
- Delivery or collection drivers upon arrival on site.

Allowances should be made for self-reporting and self-isolation of employees with symptoms of Covid-19 or other respiratory symptoms, so they can be absent from work without medical certification.

Where available, unwell employees should be directed towards community or home testing facilities to determine whether they have the virus.

However, an employee who has a severe cough, even if they test negative, should be advised to stay at home because of the anxiety which may be caused to other employees or others if they returned to work displaying such symptoms.

STAY SAFE AND KEEP YOUR DISTANCE

Social Distancing

Maintaining a safe distance from others whilst at work will be the commonest form of protection adopted within workplaces as it reduces the likelihood of the virus being passed by direct contact and/or airborne transmission. It has the advantage that people have all become accustomed to social distancing in all aspects of our lives and so this practice can then be moved into the workplace as businesses re-open.

However, there will be an infinite variety of work situations for which you will need to decide how social distancing can be achieved and maintained. Applying this measure will present both logistical and behavioural challenges.

In the period of lockdown restrictions, many people have adopted the social distancing principles and so once they return to work, they will be anxious about breaking their personal rules and behaviours. Consultation, communication and assurance to employees and others about the measures you have adopted and how they will provide protection, should be provided.

What should be done?

- Maintaining at least 2m distance from other people in all situations.
- Includes customers, visitors, delivery drivers, contractors.

Why is this needed?

- To reduce the spread of the virus by exhaled droplets.
- To reduce the opportunity for personal contact.
- As a physical reminder of the risk of transmission.

How do I apply these controls?

- Control queuing and pedestrian flow (single direction flow so far as possible).
- Customers and visitors queuing outside premises as far as possible.
- Reducing or restricting building occupancy (consider amended working hours).
- Managing the use of lifts and stairways.
- Reducing or controlling access at natural congregation points such as refreshment points, lift lobbies.
- Avoid holding face to face meetings.
- Physical barriers.
- Protective screens.
- Floor markings and direction marking.
- Supervision.
- Providing separate entrances and exits.
- Remote working and teleworking.
- Staggering shift start times.
- Identification, before work re-starts, of tasks where 2m separation distancing cannot be achieved, and cannot be eliminated, in such cases:

A task-specific risk assessment to cover how the work is to be undertaken, including:

- Designate 'close-working'
- Teams kept as small as possible
- Individual teams kept separated
- Pre-authorisation of changes in team members
- Suitable PPE provided
- Avoid face to face working
- Reduce close-working time to as short as possible
- Increased cleaning, and sanitisation regimes.

Where and when should they be implemented?

- Throughout the workplace.
- At entrances and exits.
- At approaches to workplaces where people queue before entering.
- At delivery and dispatch areas.
- In canteens, restrooms and locker areas.
- In toilets, washrooms and smoking areas.
- At reception areas.
- In emergency assembly points in the event of fire or other types of emergency.
- By employees on their journey to and from work.
- For visiting staff who work in other locations.

Who should adopt them?

 Everyone to the greatest extent possible, including employees, visitors, customers, contracted support workers, delivery and dispatch workers and peripatetic staff.

To identify where maintaining a 2m separation may be difficult, or where congestion of people movement may occur, consideration should be given to two aspects of working:

- The workplace layout and access routes, corridors, staircases, and location of facilities
- The flow of work processes and people within the workplace.

Workplace movement and congregation arrangements will need to be adapted and changed.

The movement of people within the workplace may need adjustment to allow people to arrive at their workstation or location with the minimal amount of personal interaction, and then to remain in place as much as possible once they arrive. This will probably involve staggering work start and finish times to reduce flow and applying the same principles at break times, including arrangements for smoking breaks. This should also be applied to how and where people prepare food and take refreshments or visit canteens, tea and coffee stations, restrooms etc. This may even include allocation of designated time slots for groups of employees to take breaks and meals.

Overall, the capacity of the workplace compared to normal times may need to be restricted to accommodate the specific social distancing measures adopted.

Individual workplace or room capacity may need to be reduced to allow for effective social distancing and for the flow of people between work locations. In addition, desk occupancy may need to be reduced to allow for separation distancing. The addition of perspex screens between work locations or to shield reception desks or service counters can also reduce the risk of transmission.

The use of "in person" meetings should be eliminated or reduced as far as possible. Meetings within and between work locations should instead be conducted from individual workstations using telecommunications and virtualmeeting technology. Wherever possible, one-way flow routes should be set out so that people can maintain social distances without any counter flow. Separate entrances and exits may be required as well as oneway staircases or taking the lift upwards but using the staircase down for as many people as possible. The one-way systems should be supported by floor markings, signage and physical barriers. Floor plans may be posted throughout the workplace to inform people of the routes they should take when changing locations. Wherever possible, and without compromising building fire safety integrity or security, internal access doors should be left open to reduce the need to touch doorplates and handles.

Potential areas for congestion will include reception and entrance ways, staircases and lift lobbies as well as lift occupancy. Flow management systems should be implemented, and this may require supervision and hold points at busy times. Queuing for lifts and escalators away from enclosed lobby areas may be required which may then entail lift etiquette of allowing full disembarkation at a safe distance before new passengers enter the lift. The timing of lift door opening may need to be adjusted to allow for this slower rate of entry and exit. Lift occupancy should be reduced as far as possible to maintain at least a 1m distance for short duration, as entering into a crowded lift may induce anxiety in passengers and this should be recognised and accommodated.

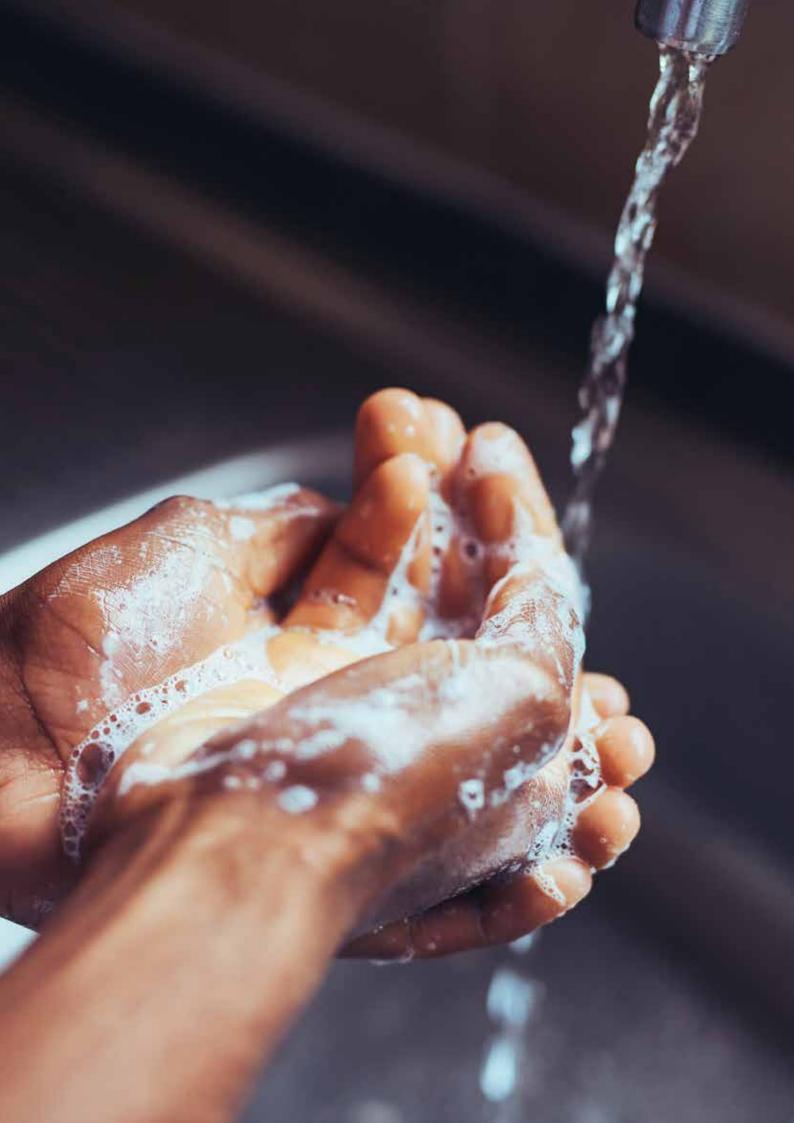
Special consideration to the application of social distancing within emergency arrangements for incidents such as fire, terrorism etc. If possible, fire evacuation drills and practices should be reduced to a minimum whilst maintaining usual tests of the systems and alarms. Where a test of the alarm is to be undertaken advanced warnings should be given to employees and visitors, instructing them to remain at their work location.

Preferential fire exit routes should be designated within the workplace which direct people to the nearest safe exit route from their work location. This will support one-way flow as much as possible, together with social distancing as people exit. Relevant information and training should be provided to ensure people know to seek alternative exit routes if the designated nearest route is obstructed or compromised. In the event of a fire, or other emergency event, people should still be encouraged to leave the premises as quickly as possible.

Fire assembly or muster points outside your premises may need to be redesignated (or additional points identified) so that social distancing is maintained. Occupiers of rented or leased workplace, or workplaces shared with other businesses, should consult with the landlord or facility management company and other occupants on the parts of any evacuation plan which require co-operation.

Employees should be encouraged to reduce the risk of infection or transmission on the way to and from the workplace. This will be assisted by staggering work start and finish times to avoid peak times on public transport, advising against car sharing, walking or use of bicycles wherever possible.

Workplace social and recreational events may also need to be postponed.



Personal Hygiene

Individual personal hygiene etiquette plays an important role in reducing the spread of infection. Information and instruction should be provided to all employees (and other visitors to the workplace) on the measures and behaviours to be adopted. This is best achieved as part of return to work protocols and reinforced frequently within the workplace with signs, posters, and visual presentations.

What should be done?

- Removal of the virus from hands and skin with soap and hot water or cleansing with an alcohol-based sanitiser (>60% alcohol).
- Avoiding spreading infection by coughing or sneezing.
- Avoidance of picking up virus particles from contaminated surfaces / objects.
- Avoidance of transfer of virus particles from hands to face.

Why is this needed?

- Infection is spread by exhaled, expelled droplets. Covid-19 viruses can be transmitted directly or can be picked up on hands and face.
- Routine cleansing removes contamination.

How do I apply these controls?

- Frequent and thorough hand washing in soap and hot water for at least 20 seconds.
- Frequent sanitising hands with 60% alcohol-based sanitiser.
- Correct hand washing technique.
- Use of disposable paper towels, and sealed lid waste bins.
- Provision of sufficient washing facilities, sanitiser dispensers within workplace.
- Provision of sufficient hand sanitiser dispensers in common areas and at entrance/exits.
- Avoid touching surfaces, handrails, door handles, light switches, and control panels and keypads.
- Provision and use of paper tissues and means of safe disposal within workplace.

Where and when should they be implemented?

- At the start of work.
- Following breaks.
- When changing work location.
- Before leaving work.

Who should adopt them?

• Everyone.

Effective personal hygiene routines reduce the onward spread of infection from infected people via coughs, sneezes and physical transfer of viruses through contact, and also protects people from acquiring infection by picking up contamination on their hands and then touching their face.

Allowances in working patterns should be made and set routines put in place to facilitate breaks to allow for hand washing and sanitising. Additional washing facilities may need to be provided and it is good practice to provide hand sanitiser and tissues in many locations within the workplace, at workstations and on common access routes. Footoperated waste bins should be provided for disposal of tissues and handtowels.

Employees should be encouraged to adopt good hygiene etiquette by using tissues to capture coughs and sneezes accompanied by cleaning and wiping down nearby work surfaces and equipment. Staff should not share telephones, pens and other hand-held equipment or tools. Hand sanitiser and sanitising wipes should be provided near to communal office equipment such as printers and control panels. Staff should be asked to wipe down touchpads on such equipment before and after each use.

Use of Personal Protective Equipment (PPE)

Personal protective equipment (PPE) is a type of worn barrier (or set of barriers) to prevent or limit the transfer of harmful substances to the wearer, or in the case of an infected person from them to others, or into the environment.

The universal use of PPE by all employees is not required for most work activities. Medical and public health opinion is still divided on the issue of how much protection is afforded to a non-infected person by wearing face masks.

However, there is more general agreement that face masks do reduce the risk of an infected person passing on Covid-19. Further advice on the selection and use of work-related PPE in relation to Covid-19 is given in a number of the source references at the end of this document.

The use of additional PPE to that normally required for work activities should be reserved for those at higher risk of infection within the workplace. High risk jobs are considered to be those with high potential for exposure to known or suspected sources of Covid-19. These occupations are likely to be confined to medical, post-mortem, laboratory, health care delivery and medical transport workers. Other workers who may benefit from minimal PPE such as face masks and gloves, include those in frequent and unavoidable close contact with members of the public and who cannot be better protected by the use of screens and social distancing.

Why is this needed?

- To reduce the transmission of infection from contagious people.
- To provide some protection to those exposed to viruses from infected people.
- To reduce the spread of infection from personal contact with contaminated objects or surfaces.
- To reduce personal anxiety about the risk of infection.

What sort of PPE is available?

- Face masks.
- Respirators, including positive pressure air fed respirators.
- Visors or goggles.
- Gloves.
- Head coverings.
- Aprons.
- Overalls.

Who should use PPE?

- Employees at higher risk of repeated or prolonged exposure such as:
 - Those who frequently come within 2m of members of the public during their work activities and who cannot be protected by screens
 - Cleaners who sanitise a widespread range of potentially contaminated surfaces or objects
 - Public transport workers
 - Work in confined spaces with others.

When should PPE be used?

- When judged by a systematic workplace risk assessment to be an appropriate control measure.
- Nature, type, duration of use, replacement period of PPE to be determined by the risk assessment.

Special precautions

- Single use disposable PPE is preferable.
- PPE on individual issue.
- Re-useable PPE should have safe cleaning, disinfection and storage protocols in place.
- PPE selected on the basis of a suitable protection factor resulting from the nature of potential exposure and durability of the PPE associated with tasks being undertaken.
- Safe and sealed disposal arrangements for discarded PPE.
- Training, instruction, and supervision provided to ensure correct use and deployment.
- Suitable spares and stocks available to meet the replenishment rate.
- Face fitting for respirators and advice on secure fitting for face masks.

All PPE should be:

- Selected based upon the hazard to the worker.
- Properly fitted and periodically refitted, as necessary.
- Consistently and properly worn when required.
- Not temporarily removed to facilitate conversations with others.
- Regularly inspected, maintained, and replaced when expired, damaged or contaminated.
- Carefully removed, cleaned, stored, or disposed of in a way which avoids contamination of self, others or the environment.

Some employees may feel safer by wearing PPE whilst at work even where the risk assessment has determined it is not necessary. This should be permitted provided that the same precautions relating to storage, cleaning, and disposal, as set out above, are followed.

The ad-hoc use of PPE by some employees may cause concern amongst other employees about whether they too require PPE and so consultation. Communication and participation in the process are essential at all stages.



Workplace Cleaning

Frequent and regular cleaning of the workplace, equipment and surfaces that people may contact, helps remove any contamination which otherwise may be spread by hand to face contact. The focus of Covid-19 based cleaning regimes should be work surfaces, equipment and tools and structural elements of the workplace that people routinely touch. This includes door handles, telephones, keypads, pointof-sale equipment, light switches, control pads, instrument panels, touch plates and even shared refreshment equipment such as kettles and water dispensers. Contamination by the virus is not visible and so cleaning routines must assume that there is always potential contamination present immediately following contact.

What does this require?

• Frequent deep cleaning of surfaces and work equipment to remove the virus.

Why is it needed?

- Cleaning and sanitising surfaces and equipment reduces the level of potential contamination.
- Reduces contamination and the risk of the virus being picked up and passed to employees and visitors.
- Provides a visible signal to employees that workplace hygiene is important, and that care is being taken of their working environment.

How do I apply these controls?

- Enhanced more frequent cleaning routines and use of disinfectants.
- By specified staff trained in the risk of contact with infectious agents.
- By specified staff with the correct provision of PPE.
- Avoidance of accumulation of waste within and around the workplace.
- The cleaning protocol and schedule should be documented and displayed in the workplace.
- The cleaning schedule should be monitored and validated by sign-off.

Where and when should this be applied?

- Surfaces which people may come into direct contact with by touch.
- Washing and sanitary facilities.
- Handrails, doors, desks, draw handles, switches, keypads, telephones, and computer screens.
- Other hand-held or hand operated work equipment.
- Vehicles, machinery cabs and control equipment

It is reasonable to ask employees to routinely wipe down and sanitise their own workstation and personal issue equipment, and to even wipe down shared facilities such as printer control pads before and after each use. An expectation that **'wipe after use'** is adopted for all shared equipment and tools and that workstation surfaces and other personal issue equipment is cleaned before work starts and at any time employees take a break or finishes work could become a standard across the organisation.

Paper towels and cleaning materials, disinfectant wipes and sanitiser solutions should be provided for this purpose.

For other areas of the workplace, dedicated cleaning staff should be used and a documented protocol developed that sets out what item, area or facility is to be cleaned; the cleaning method and materials to be used; and the frequency it should be cleaned. Focus should be given to surfaces and items which will be touched often by different people, together with washrooms, washing facilities and toilets. Cleaning staff, whether direct employees or contract staff, will be anxious about their own health and safety and suitable information and training should be provided to ensure they fully understand the risks and controls in place.

Suitable gloves and other PPE such as face masks should be provided for their protection.

The Covid-19 cleaning requirements and protocols should be discussed with your contract cleaning company (wherever used) well in advance of reopening the workplace to ensure that these arrangements can be delivered and sustained. It may be advantageous to walk through the workplace with your cleaning staff or their supervisors, to ensure there is clarity about what is required. As outlined in the section on health surveillance, specific arrangements should be put in place to respond to a person taken ill or developing symptoms of Covid-19 whilst at work.

Such protocols should be established to clean and sanitise areas an ill person has been working in and those who will provide the cleaning response should be fully briefed to ensure that they understand what will be required.

The effective implementation of the workplace cleaning protocol must be closely monitored to ensure it is being followed. This is especially important in the initial stages following re-opening of the workplace so that any issues can be addressed.

Workplace Ventilation

Frequent changes of the air within enclosed workplaces helps to dilute and remove airborne viruses. A good airflow should be maintained using general ventilation (opening windows and doors) without compromising fire protection or security.

If the workplace has mechanical ventilation, then it is important that the operation and function of the system is fully understood. **Recirculation of unfiltered air within the workplace should be avoided or reduced as far as possible**.

For unfiltered ventilation systems, the external discharge points of the exhausted air too should be monitored to ensure it does not impinge on a location where people work or congregate. Where particulate filters are provided within the ventilation and air conditioning system, then these should be kept in good condition and cleaned regularly. Special arrangements should be made with an appropriate engineering service contractor to ensure that a specific risk assessment and method statement has been developed covering the risk to people cleaning the filters and how they are to be safely disposed of.

Tenants in a leased or rented workplace, should check this information with the landlord or building facility manager.

What is required?

• Extraction or creation of fresh airflow into the workplace.

Why is this needed?

• To remove or dilute the concentration of airborne virus particles that may present in the workplace.

How do I apply these controls?

- Natural ventilation through windows, doors, or vents.
- Mechanical ventilation, including filtration and air conditioning.

Where and when should this be applied?

- Wherever possible.
- To the greatest extent throughout the workplace.

Special precautions

Care should be taken to check the position of mechanical extraction ports to avoid discharge directly into areas or enclosed spaces where employees, or others may be present.

Risk assessments should be undertaken to determine safe systems of work for the cleaning of ventilation equipment and filters.

Cleaning and maintenance of ventilation systems should be undertaken by competent and trained staff who follow the prescribed safe system of work.



References and sources of information

A selection of additional Covid-19 resources is given below:

- i. Health and Safety Executive: www.hse.gov.uk/news/coronavirus.htm
- ii. UK Government: www.gov.uk/coronavirus
 - a. Scotland from the Scottish Government: www.gov.scot/coronavirus-covid-19
 - b. Wales is available from the Welsh Government: https://gov.wales/coronavirus
 - c. Northern Ireland has guidance on nidirect: www.nidirect.gov.uk/campaigns/coronavirus-covid-19
- iii. NHS: www.nhs.uk/conditions/coronavirus-covid-19/check-if-you-havecoronavirus-symptoms
- iv. Energy Institute Covid-19 The New Normal: https://publishing.energyinst.org/topics/health/occupational-health/covid-19-thenew-normal-a-framework-to-assist-an-organisation-when-planning-to-returnto-normal-operations-post-covid-19
- v. OSHA Guidance on Preparing Workplaces for COVID-19: www.osha.gov/Publications/OSHA3990.pdf
- vi. British Council for Offices Thoughts on Office Design and Operation after COVID-19: www.bco.org.uk/Research/Publications/Thoughts_on_Office_Design_and_ Operation_After_Covid-19.aspx
- vii. Construction Leadership Council Site Operating Procedures during Covid-19: www.constructionleadershipcouncil.co.uk/news/site-operating-proceduresduring-covid-19
- viii. European Commission, DG Employment, Social Affairs and Inclusion. COVID-19: guidance for the workplace; https://oshwiki.eu/wiki/COVID-19:_guidance_for_the_workplace
- ix. European Commission, DG Employment, Social Affairs and Inclusion.
 Back to the Workplace, Adapting workplaces and protecting workers: https://oshwiki.eu/wiki/COVID-19:_Back_to_the_workplace_-_Adapting_ workplaces_and_protecting_workers)

About British Safety Council

Engagement with impact is at the heart of the work of the British Safety Council.

We want to influence employers so that they prioritise health, safety and wellbeing in the workplace. We want to pass on our expert knowledge to practitioners at every level through our publications and training and through our consultancy and audit services so that organisations have the processes in place to protect their workforce. We want people to thrive and we want the workplace to promote wellbeing, enhancing quality of life and not detracting from it. Talking to our members and communicating our vision is vital to achieving those goals. The British Safety Council has always operated as a not-for-profit, investing the income we make from training, audits, membership and awards back into our campaigning and philanthropy – here in the UK and in India. We are a registered charity, with all that entails, and we fundraise through our products and services to deliver on our vision.

Our founder James Tye was a born campaigner, but he was also a campaigner with a purpose – it was his drive that founded the British Safety Council in 1957 and paved the way for the Health and Safety at Work Act 1974. He believed in having an impact and so do we.





No-one should be injured or made ill through their work.

Our mission is to keep people as safe and healthy as possible in their work through education and practical guidance. We look forward to working with you to achieve this goal.

If you have any enquiries or require further information, please do not hesitate to contact us.

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