

CHECKLIST: No chance for omicron (V

The starting point:

Update your risk assessment and take appropriate measures for physical and psychosocial sanity

very important:

- a) involve your workers and their representatives in the risk assessment revision
- b) liaise with your risk prevention or occupational health provider, if you have one
- c) communicate the agreed new measures to your staff and contractors
- Next step after risk assessment = implementation of hierarchy of controls' measures to
 a) to first eliminate the risk and if this is not possible,

b) minimise workers' exposure.

Start first with collective measures and – if necessary – supplement them with individual measures, such as protective personal equipment (PPE)

- If you have identified an infection risk despite having applied all feasible safety measures a) then provide all necessary personal protective equipment (PPE) to staff
 - b) train them how to use it correctly (e.g. face masks)

Think about putting in place support for staff members who are most vulnerable and those who may be suffering from anxiety or stress (caused by for example by concerns to get infected, serious illness or death of relatives/friends, financial difficulties in the family), e.g.

- managers asking their reports more often how they are
- facilitating exchanges or buddying between these colleagues
- changes in work organisation and tasks
- "employee assistance program" or "coaching center" (maybe teaming up with local psychological services in the neighbourhood)
- Offering contact to occupational health service.

Communicate your understanding for their situation (e-townhall meetings, CEO mail or podcast), provide information about the measures taken and the support available to them.



1) General recommendations for minimising exposure to COVID-19 at work:

a) Work organisation & workplace layout

Carry out only essential work and postpone all non-essential activities to a lower-risk time

If possible, deliver services remotely (by phone or video) instead of in person

put in place policies on flexible leave and remote working to limit presence at workplace to ensure that only workers who are essential to the job are present at the workplace \rightarrow encourage everyone else to work from home

Facilitate workers' use of individual rather than collective transport, e.g. by making car parking available or a place for storing bicycles securely, and encourage workers to walk to work, if possible

Minimise presence of third parties

Reduce, as far as possible, physical contact between workers, e.g. during meetings or breaks

Isolate workers who can carry out their tasks alone safely and who do not require specialised equipment or machinery that cannot be moved.

Example: whenever possible, arrange for them to work alone in a spare office, staff room, canteen or meeting room.

If possible, ask vulnerable workers to work from home (older people, those with chronic diseases such as lung or heart problems or diabetes, undergoing cancer treatment, pregnant workers)

Workers with close family members who are at high risk may also need/prefer to do teleworking

Any staff member dealing with members from the public/external contacts should be protected from airborne particles, best with a temporary physical shield (e.g. plexiglass), but minimum with a distance of roundabout 2 meters



Eliminate and - if not possible - limit physical interaction with and between staff/visitors/supply chain partners, e.g. through

- online and phone orders,
- contactless delivery
- managed entry à avoid crowds in front of entrance and
- physical distancing both inside and outside the premises
- Reduce contact between different parts of your business at the start and end of shifts
- Arrange starting and ending time of working hours to reduce crowding
- Arrange timing of meal breaks to reduce the number of people sharing the cafeteria, staff room or kitchen
- Reduce cafeteria activity to packaged meals for take-away with contactless payment
- Allow only 1 worker at a time in toilets, bathrooms and changing rooms
- Place a sign on the main door indicating when one of the toilets is in use to ensure that only 1 person at a time enters
- For lifts stipulate maximum people allowed

b) Especially for supplies & deliveries

When delivering goods (e.g. cafeteria, external customers), do so via pick-up or delivery outside the premises

Advise drivers and other delivery staff on good hygiene in the cab and provide them with appropriate sanitation gel and wipes

Delivery workers must be allowed to use facilities such as toilets, cafeterias, changing rooms and showers, albeit with appropriate precautions (regular cleaning, allowing only 1 user at a time)

Place impervious barriers between workers, especially if they are not able to keep a 2-m distance between each other

Purpose-made or improvised barriers can comprise plastic sheeting, partitions, mobile → drawers, or storage units.

Bear in mind that unsolid things like pot plants or trolleys can create new risks.
 →Alternatively make sure 1-2 desks are left unoccupied between employees.



If close contact is unavoidable, keep it to less than 15 minutes

Hand-out "reminder" flyers to supply chain partners and display safety posters at entrance

Contact details of everyone entering the site must be collected and saved for one month for potential back-tracking of contacts in case of assumed infections

c) Overall hygiene recommendations:

Supply soap and water or appropriate hand sanitiser at convenient places

Advise workers to wash their hands frequently

Clean your premises frequently, especially counters, door handles, tools, handrails and other surfaces that people touch often. Use cleaning agents that are usually used in these areas and follow the directions on the label. Consider additional disinfection.

Provide good ventilation, wherever possible

Avoid excessive workload on cleaning staff by taking appropriate measures, e.g. by a) Assigning additional staff to the tasks, e.g. all shifts/office clerks clean their surrounding thoroughly before leaving and after arriving

b) Asking workers to leave their workplaces tidy, also when shifts change

c) Provide disposable (disfectant) wipes to staff so that they can clean commonly used surfaces themselves (e.g. computer equipment, desks, telephones, smartphones)

Provide workers with tissues and waste bins lined with a plastic bag so that they can be emptied without contacting the contents

Place posters encouraging people to stay home when sick, cough and sneeze etiquette, and hand hygiene at entrance to the workplace and in other areas where they will be seen
 See Fecc COVID-19 Dos & Don'ts poster in multiple language contained in COVID-19
 safety guidance of 16 April communication; <u>downloadable</u> in Dutch, English, French, Italian, Portuguese, Romanian and Spanish language

d) Face masks:

In some European countries wearing face masks in public places or at closed places where the minimum distance cannot be kept has been made mandatory, in other countries it is recommended, but not imposed.

Situations in which it is not possible to maintain a safe distance to others may arise not only at the workplace, but also at clients' premises, when carrying out visits or deliveries, or when using public transport.

Face masks should only be considered as complementary measure, not as a replacement for established preventive practices, such as physical distancing, hygiene, cough & sneeze etiquette, etc., and it is important that they are worn properly to be effective and safe:

- Face masks should fit properly, completely covering the face from bridge of nose to chin
- Clean hands properly before putting the face mask on or taking it off
- Only touch the cord or elastic at the back of the face mask when removing it, not the front
- If the face mask is disposable, be sure to do so safely in a proper container (closed lid)
- If reusable, wash the face mask as soon as possible after use with detergent at 60°C.



Persons who have become seriously ill – especially those who have been in intensive care (IC)- may require special consideration even after being declared fit for work. There are indications that former Coronovirus patients in their first return-to-work phases may still suffer from:

- Muscle weakness, which can also cause respiratory constraints
- 30-50% of former IC patients may sow am Post-Intensive-Care-Syndrom (PICS), which is comparable to a post-traumatic stress disorder
- Problems with memory and concentration, which may impact performance and usually become visible only after having returned to work for a while.

Please note that these symptoms may apply independently from the age of workers and are subject to a variety of individual health and treatment aspects of former Coronavirus patients.

The staff member's doctor and the occupational health service, if available, should advise on the on the manner and timing of their return to work.

It is important that you

Develop understanding and - if possible - first guidance for these staff members

Consider work adaptations, such as a gradual phase-in, flexible work schemes and extended breaks

Facilitate free time for them to undergo treatment/physiotherapy

Engage with occupational physicians and health services, maybe by teaming up with neighbouring/local medical doctors with specific expertise, to advise them

Address these issues with high sensitivity and respect

By all means keep their names private and confidential to avoid stigma and discrimination

Encourage them to possibly connect with other people in a similar situation under strictest confidentiality rules in a forum or other anonymous e-based portals outside the company to avoid stigma and discrimination.



3) Coping with a high rate of absence

The absence of a substantial number of workers, even if only temporary due to quarantine measures, assumed or proven infections, may cause a strain on continuing activities of your company. While the available staff shall be flexible, it is important that they are not exposed to additional stress that can endanger their health or safety. This can be avoided by

Elaborating back-up plans/cross training schemes for staff members, especially for crucial positions

Keeping additional workload as low as possible, avoiding overburdening

ensuring that this situation does not last too long \longrightarrow fix a date for revising the situation

respecting for rules and agreements on working hours and rest periods

ensuring that staff can fully disconnect from work when off-duty

considering additional training and support for people who take over other/additional work, especilly for interim staff

Important monitoring role for line managers



4) Managing staff working from home

While in Covid-19 times with physical distancing measures all employees are encouraged or obliged to work from home, for many people it is their first time as "teleworkers" and their working environment at home is likely to be deficient in many aspects as compared to their workplace.

Suggestions to minimise the risks to teleworkers who have not been able to prepare their home workplace properly:

Offer guidance to staff working from home on how to set-up a workstation at home and how to best perform under current conditions

Allow workers to take equipment that they use at work home on a temporary basis (if they cannot pick it up themselves, consider arranging its delivery), e.g. computer, monitor, keyboard, mouse, printer, chair, footrest or lamp.

Give teleworkers support in the use of IT equipment and software, tele and videoconferencing

Encourage staff to take regular breaks (around every 30 minutes) to stand up, move and stretch

Schedule regular on-line meetings (best as video-conference) to maintain team links and communication flow, encourage "chats" and "informal virtual coffee meetings"

As soon as physical office presence is allowed, consider rotating staff between home office and company office to mitigate feelings of isolation and disconnect

In case teleworkers have family obligations, making working hours flexible

Assist staff in setting healthy boundaries between work and free time by communicating clearly when they are expected to be working and available.



5) What if...

a) ...Someone becomes unwell at the workplace and there is reason to suspect they may have come into contact with COVID-19

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The person should be removed to an area which is at least 2 meters 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

Open window for ventilation, if possible

The person who feels unwell should use their own mobile phone to call the designated public health service number

If it is an emergency (seriously ill or injured or life at risk), dial 112 and explain the situation. Provide relevant information, such as current symptoms.

While awaiting advice from the designated public health or emergency service, the affected person should

a) remain in min. 2-meters distance from anyone else and should avoid touching people, surfaces, objects

b) cover their mouth and nose with a face mask or at least disposable tissue, at least when they cough or sneeze, and put the tissue in a bag or pocket.

c) If there are no tissues available, they should cough and sneeze in the crook of their elbow.

d) If they need to go to the bathroom while awaiting medical assistance, they should use a separate bathroom, if available.

Follow the advice of medical staff.

b) ...Someone with suspected or confirmed COVID-19 has recently been in your company

Get in touch with your local/national public health authority

Follow their guidance on the next steps

Inform fellow staff members of their potential exposure to COVID-19 at the workplace, but make sure to maintain the highest level of confidentiality possible.

Instruct colleagues with direct exposure to a confirmed COVID-19 case on what to do according to your company's policies and the national authorities' guidance

Arrange for thorough cleaning of all surfaces that the affected person has come into contact with, e.g. toilets, door handles, telephones, desks, computers, etc.

Take precautionary measures to protect the cleaners



All waste that the affected person has been in contact with (e.g. tissues, used masks) should be put in a plastic rubbish bag and tied when full. This plastic bag should then be put in a second bin bag and tied, put in a safe place and marked for storage until the test result is available. It can go into normal waste, if the individual tests negative: otherwise the public health authorities will instruct you on how to best dispose of it.

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The public health service will

- contact the management team of the office or workplace to discuss the case
- identify people who have been in contact with them and to advise on any actions and precautions that must be taken.
- Perform a risk assessment of each situation with the lead responsible person in your company
- The public health authorities will also contact the affected person directly to advise on isolation and identifying other contacts whom they will advise, too.
- Advise you on cleaning of common areas such as offices or toilets
- Advise you how to correctly dispose of potential waste of the affected person.

Contacts are not considered cases, but still consider precautionary measures:

14-days self-isolation of those with close contacts to the affected person _______ follow-up done by public health authorities

those without close contact to the affected person ask to carefully observe their health situation; encourage teleworking

clearly communicate the situation, also when a COVID-19 case is confirmed, to actively deal with anxiety and nervousness at the workplace

refer to reliable sources of information on COVID-19 (see section "Sources for information"

consider flexible work schemes and teleworking until situation is cleared