





### **The Lighthouse Construction Industry Charity**

The Lighthouse Construction Industry Charity is the only charity that is 100% dedicated to the mental, physical and financial wellbeing of construction workers and their families in Ireland and in the UK. The mission of the charity is that no construction worker or their family should feel alone in a crisis. The charity achieves that mission through the delivery of a variety of free and easily accessible resources to support our construction community, including:

# FREE 24/7 Construction Industry Helpline – Call 1800 939 122

The charity's 24/7 Construction Industry Helpline provides free and confidential support on a huge variety of mental, physical and financial wellbeing issues for all construction workers and their families

### **FREE** Construction Industry Helpline app

The free Construction Industry Helpline app is a preventative tool and helps to build resilience in the areas of mental, physical, and financial wellbeing. Each section of the app offers learnings about a variety of conditions and issues, self-assessment tools, coping strategies and referral pathways to access expert advice and support in your locality. Search for 'Construction Industry Helpline' and download for free from the Apple and Google Play app stores.

Alternatively, visit the webpage:

https://www.constructionindustryhelpline.com/app.html

For full details, visit:

https://www.lighthouseclub.org/







### **Other Mental Health and Wellbeing Supports**

#### **Build Health**

'Build Health' is a joint initiative between the CIF, Laya Healthcare and Spectrum Life that can support both employers and employees in the sector. The mental health and wellbeing support programme offer resources to leaders in the sector and the 24/7 Mental Health Support Programme offers invaluable and confidential help and advice to those who need it.

For more details, see attached or visit the CIF Build Health *Webpage: https://wellbeing.spectrum.life/cif/* 

### **Construction Workers' Sick Pay Trust**

The trust is committed to the promotion of better health, including mental health and wellbeing for all workers in the construction sector. During 2019, just over 7,000 sick pay benefit claims were paid to members covered by the Scheme and this is regardless of the type of illness, once certified.

For information on how to claim, please visit **www.cwspt.ie** or email **sickpay@cwspt.ie** or call **01-4977663**.

### **Healthy Ireland**

This is a Government-led initiative aimed at improving the health and wellbeing of everyone living in Ireland, provides a range of support materials which can be accessed at the website:

www.gov.ie/en/campaigns/together

#### 50808

In June of 2020, the Health Services Executive launched a text-based mental health service. '50808' is a first of its kind for Ireland, a free 24/7 text service, providing everything from a calming chat to immediate support for people going through mental health or emotional crisis. For free 24/7 support in a crisis, free text 'HELLO' to 50808.

### **Pieta House**

To speak with a therapist any time, day, or night, freephone 1800 247 247 or text 'HELP' to 51444. Website may be accessed here: https://www.pieta.ie/

#### **Aware**

Freephone Aware's Support Line is available Monday to Sunday from 10am - 10pm on **1800 80 48 48** or email: **supportmail@aware.ie** 

### **Samaritans**

If you need someone to talk to, the Samaritans can provide one-to-one help 24-hours per day.

Freephone 116 123 or email: jo@samaritans.org





### **Disclaimer**

The Construction Industry Federation (which shall include their servants and agents and any policy committees of the Construction Industry Federation)("CIF") has devised a plan the intention of which is to provide a standardised approach to commencing construction projects in Ireland which incorporates the COVID-19 public health requirements ("the plan"). The use of the plan is subject strictly to the following:

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DOCUMENT CONTROL					
Version	Date of Revision	Detail of Amendments (Section; Description)			
2	11.05.2020	Added reference to Covid 19 Specific National Protocol for Employers and Workers Added reference to Site Safety Representative Added reference to instruction in hand hygiene Added reference to disposable gloves Revised requirement for return to work declaration Added reference to recording of site attendees Added reference to vertical social distancing Updated close working Updated sample declaration form			
3	20.05.2020	Added link to HSA templates / checklists			
4	August 2020	Update Introduction Amended symptoms - smell / taste Updated info on travel Added promotion of HSE COVID Tracker app Updated links to cleaning information Updated face mask information Updated temp testing info Updated travel to /from work Added info a training - C 19 Officer / Lead Worker Revised guidance on Hi Viz for C19 Officer Updated symptoms comparison chart Added HSA advice on meetings Added guidance on contact tracing Added HSE guidance on case management Updated additional reading Updated C19 Questionaire			
5	November 2020	Generally updated links Section 7 renamed Introduction updated Updated symptoms Updated control measures Additions to Site Management Section Updated guidance on face coverings in Sec 6 Added ESB induction as equivalent to CIF Induction Added bullet point to Travel to and from work Added advice against sharing computer equipment Updated advice on managing cases Updated return to work process Updated site awareness poster Sample - Site Response to Covid 19 Case action plan			

Continued next page





DOCUMENT CONTROL continued						
Version	Date of Revision	Detail of Amendments (Section; Description)				
6	11.05.2020	Added reference to Covid 19 Specific National Protocol for Employers and Workers Added reference to Site Safety Representative Added reference to instruction in hand hygiene Added reference to disposable gloves Revised requirement for return to work declaration Added reference to recording of site attendees Added reference to vertical social distancing Updated close working Updated sample declaration form				
7	13.01.2021	CIF President's Message Expanded section on mental health and wellbeing supports Updated advice on close contacts Inclusion of international travel restrictions Recommendation that sites require the wearing of face coverings/masks at all times Explanation provided of COVID-19 testing regimes Temperature testing on site entry is recommended Single occupancy of vehicles is recommended Offices should be regularly ventilated by opening windows Updated advice for meetings Link to Statutory Instruments related to the COVID-19 pandemic				
8	1.06.2021	Updated President's Message HSA findings from COVID-19 inspections (Section 25) Details provided for Vaccinations Expanded section on Rapid Antigen Testing CIF and Trade Union Federation Agreement (Section 24) Amended guidance for international travel Updated advice on close contacts relating to new variants and vaccines				

**Abstract:** This document has been developed by the CIF Safety and Health Subcommittee mindful of the best available guidance, nationally and internationally, and serves as a guide for the management of COVID-19 on a construction site for the duration of the pandemic. The actions set out in this document should be implemented in tandem with an amended Construction Stage Health and Safety Plan. The purpose of this document is to protect workers, their families and the community, whilst also recognising the need to protect livelihoods.





# **Table of Contents**

1	Introduction & CIF President's Message	8
2	What is Coronavirus / Key Control Measures	10
3	Role of the Client	15
4	Health and Safety Documentation	16
5	Site Management	17
6	Hygiene	18
7	Commencing Work - Sites	20
8	Travel to / from Work	21
9	Prevention of Cross Contamination	25
10	Social Distancing	26
11	C-19 Compliance Officer & Site Safety Representative	28
12	Communal and Welfare Areas	29
13	Site Walkways and General Access	31
14	First Aid Responder Guidance	32
15	Management of Meetings	34
16	Management of Deliveries	34
17	Close Working	36
18	COVID-19 Suspect / Confirmed Cases	37
19	Return to Work Process - Worker	41
20	Cleaning Spaces following Suspected / Confirmed Cases	43
21	Statutory Training Updates	44
22	Government's Work Safety Protocol	46
23	Additional Reading	48
24	Reference Documents	49
25	Feedback from the Health and Safety Inspectorate	55





### Introduction

This Version 8 of the Standard Operating Procedure (SOP) has been updated to reflect lessons learned from the ongoing management of the health and safety risks associated with COVID-19.

An agreement was reached with the Trade Union Federation to ensure worker's safety on site; this agreement is industry-specific and supports the government's Work Safely Protocol. I am delighted to confirm that an updated agreement was reached in February 2021 and facilitates COVID-19 testing (temperature, PCR testing and antigen testing) provided by employers. This is outlined in Section 24 (pages 49-53) of this document and is an example of the collaborative approaches witnessed across society to collectively tackle the virus.



It is genuinely heartening to witness the resilience and extra effort demonstrated by those within the sector in addressing this pandemic. Whilst the safety protocols implemented on construction sites have proven to be effective in combating the virus, we must not lose heart or focus and instead continue to take the appropriate precautions to tackle this virus. As one of our members put it, "As the vaccine program is rolled-out, we must continue to remain vigilant and compliant inside and outside work to enable a return to normality and to keep ourselves and our loved ones safe".

The vaccine is not mandatory but is strongly recommended that all in the sector get the vaccine as soon as it is available to protect family and colleagues.

I would urge all in the construction sector to continue to follow public health guidance, and together, we will suppress COVID-19.

### **Tom Parlon**

Director General Construction Industry Federation







### CIF President's Message

At time of writing, the vaccination programme is gathering pace and will greatly assist measures to protect ourselves and our loves ones from the COVID-19 pandemic. Nonetheless, we must continue to follow our industry's safe working protocols to ensure the safety and wellbeing of all persons engaged within construction and to ensure continuity of work and livelihoods.

On 14th May 2021, the Government launched a second revision of the Work Safety Protocol; updates include guidance on ventilation and vaccinations as part of the range of measures to prevent the spread of COVID-19. Additionally, information is provided on how to approach the use of antigen testing in the workplace is provided, should an employer choose to do so.

This SOP has been updated to reflect the updated Work Safety Protocol and other pertinent updates, to ensure the sector keeps abreast of best practice measures for addressing COVID-19.

Mindful of the aforementioned, the CIF recommends that all persons working in the sector revisit the protective measures for COVID-19 and ensure that systems remain in-situ and observed. Please consider the following, in conjunction with reported findings from HSA workplace inspections (see Section 25):

#### **Fitness for Work**

No persons should attend a workplace if displaying symptoms of COVID-19. We should all be familiar with the symptoms and if unsure, don't take a chance. Do not travel to work and instead seek medical advice.

### **Social Distancing**

We all need to continue to work together by staying apart, ensuring a minimum of 2 metres separation insofar as possible, in order to limit our exposure to the virus.

### **Wearing of Face Coverings**

Even if vaccinated, there is insufficient evidence at present to support an easing of protective measures, which include the wearing of face coverings in certain circumstances.

### **Vehicle Sharing**

Persons should continue to travel alone in vehicles, in so far as is possible, to prevent transmission of the disease.

On behalf of the CIF, thank you for your efforts to date, and let's continue to follow best practice measures to ensure the safety, health and wellbeing of all persons engaged in construction.

Take care!

### **Frank Kelly**

President CIF / Chair of CIF Health & Safety Committee





## **2 What is Coronavirus / Key Control Measures**

COVID-19 is an illness that can affect your lungs and airways. It's caused by a new (novel) Coronavirus virus called CoronavirusSARS-CoV-2. As we all now know, the virus is more infectious than the flu virus and recent variants (UK, South African and Indian) are even more infectious.

Viruses can be easily spread to other people and patients are normally infectious until all the symptoms have gone. COVID-19 is mainly spread through close contact and droplets that come from an individual's nose and mouth. This happens when people are within 1 to 2 metres of each other; that's why keeping a 2 metre distance from other people is an important way of reducing the spread of COVID-19.

Getting COVID-19 from surfaces is not as common as getting it through close contact with someone who has the virus. Nonetheless, it is still important to wash your hands properly and often as COVID-19 may survive on surfaces for prolonged periods. See: https://www2.hse.ie/conditions/coronavirus/how-coronavirus-is-spread.html

A combination of good personal hygiene and management of social distancing can protect from infection. This is at the core of this document.





### **Key Control Measures**

The following are key control measures required for managing the spread of the virus on construction projects:

### Symptoms

You must ensure that no person with symptoms attends site - reinforce this message regularly. The symptoms are - fever (high temperature of 38 degrees Celsius or above), shortness of breath, breathing, loss or change to their sense of smell or taste, a new cough (any kind of cough, not just dry).

Personnel should be advised if they have flu like symptoms, (headache, aches and pains), they should assume that this is Covid and act accordingly. Ensure staff have been provided with the following advice:

Call the emergency services on 112 or 999 if you are very short of breath. For example, if you are so short of breath that you cannot complete a sentence.

Note - latest advice for general close contacts is that the close contact does not have to restrict movement if they had Covid 19 in the previous 6 months or if they are fully vaccinated - full details at https://www2.hse.ie/conditions//coronavirus/testing/if-you-are-a-close-contact.html

Also note, the additional advice in relation to "new variants / variants of concern" - more detail at https://www2.hse.ie/conditions/coronavirus/testing/close-contact-of-a-covid-19-variant-of-concern.html

If you were tested because you were a close contact of someone with COVID-19, restrict your movements for 14 days from the last date you were in contact with that person, even if you have a test and your test comes back negative. You should restrict your movements because there is a chance you may have COVID-19.

You can stop restricting your movements when both apply:

- 1) You have a negative test (COVID-19 not detected) 10 days after you were last in contact with the person who tested positive.
- 2) You do not have any symptoms of COVID-19.

Check out 'The difference between self-isolating and restricted movements' - HSE.ie:

https://www2.hse.ie/conditions/coronavirus/ managing-coronavirus-at-home/self-isolating-andrestricting-movements-differences.html

The HSE advises, in respect of persons testing positive for COVID-19, "most people can stop self-isolating when both of these apply:

- 1) you have had no fever for 5 days
- 2) it has been 10 days since you first developed symptoms

If you tested positive because you are a close contact, you may have no symptoms. In this case, you can stop self-isolating 10 days from the date of your test.

If you are caring for someone who cannot self-isolate you should restrict your movements for 17 days (https://www2.hse.ie/conditions/coronavirus/managing-coronavirus-at-home/self-isolation.html).

It should be noted that experience has shown that COVID-19 is spread by people not showing symptoms.

If you come into contact with a person who has tested positive for COVID-19, you may be a close contact and you would need to follow appropriate public health advice, which currently includes getting tested for COVID-19 and restricting your movements.

Current HSE advice is available at https://www2. hse.ie/conditions/coronavirus/close-contact-and-casual-contact.html#close

### General Health

Personnel living with "at risk groups" as defined by the Health Services Executive (HSE), must consider if there is a heightened risk from attending work.





### **Key Control Measures** continued

### Vaccinations

The COVID-19 vaccine helps your body to protect itself by making antibodies to fight the virus.

Even after you are vaccinated, continue to follow public health advice on how to stop the spread of COVID-19 (e.g. continue social distancing, wearing a face covering and washing your hands properly and often).

The vaccine **ONLY** protects the individual from the disease; there is not yet sufficient evidence to confirm that a vaccinated person cannot carry pass the virus onto others. Current guidance is that individuals are considered fully vaccinated for COVID-19 at the following intervals:

- 15 days after the second AstraZeneca dose
- 7 days after the second Pfizer-BioNTech dose
- 14 days after the second Moderna dose
- 14 days after the single Janssen dose.

### International Travel

Arrangements for international travel are subject to regular changes. For the most up-to-date information on international travel, visit the webpage of the Department of Foreign Affairs: <a href="https://www.dfa.ie/travel/travel-advice/coronavirus/">https://www.dfa.ie/travel/travel-advice/coronavirus/</a> or the Government of Ireland's COVID-19 Travel Advice:

https://www.gov.ie/en/publication/b4020-travelling-to-ireland-during-the-covid-19-pandemic/

All passengers, aside from essential supply chain workers arriving in the Republic of Ireland (ROI) are obliged to complete a COVID-19 Passenger Locator Form before entry. See online form:

https://cvd19plf-prod1.powerappsportals.com/ en-us/

### HSE COVID Tracker App

Companies should encourage employees to download the tracker app. Persons should download the HSE's free Covid-19 tracker app for mobiles phones, by visiting Apple's App Store or the Google Play Store. The mobile app uses Bluetooth to alert subscribers if they have been in close contact with another registered app user who has tested positive for Covid-19.

### Hand Hygiene

Ensuring everyone is washing hands regularly and thoroughly or sanitizing and sufficient facilities are provided and maintained to allow this to happen.

### Social Distancing

Ensuring workers maintain a minimum of 2 metre separation insofar as possible while working, when using toilets, canteens, drying rooms etc. Also, to promote social distancing when travelling to and from work (public transport, vans etc.), and in their daily lives, in order to limit exposure.

### Cough Etiquette / Respiratory Hygiene

Ensuring people cough / sneeze into sleeve or elbow, always cover up, dispose of tissues appropriately.

### Cleaning

Ensuring that all frequently touched objects and surfaces are regularly cleaned and disinfected.

### Face Covering / Mask

It is highly recommended that sites require the wearing of face coverings / masks at all times (other than when specific Respiratory Protective Equipment) is being worn. A face covering is a material you wear that covers the nose and mouth. Wearing a face covering reduces the spread of COVID-19 in the community. It helps to reduce the spread of respiratory droplets from people infected with COVID-19. This helps to stop people who do not know they have the virus from spreading it to others. If a face covering or mask is worn, it should be clean and they should not be shared or handled by other colleagues. 3-ply community (cloth) masks have proven to be effective against the virus.

See https://www2.hse.ie/conditions/coronavirus/face-coverings-masks-and-covid-19/when-to-wear.html for more information.





### **Key Control Measures** *continued*

### Testing

The Health Services Executive, HSE utilises

Swab PCR testing for diagnosis of COVID-19. This test method looks at the genetic material of the virus, is undertaken in a laboratory environment and is a very reliable way of knowing if you are currently infected with COVID-19.

As of 29th January 2021, notifications of positive results from Antigen Detection Tests (ADTs) undertaken in the public health system also satisfy the definition of a COVID-19 interim case.

The CIF and the Trade Union Federation signed an agreement to ensure worker safety on site; this agreement is industry-specific and supports the Work Safely Protocol. An updated agreement was reached in February 2021 and facilitates COVID-19 testing (temperature, PCR testing and antigen testing) provided by employers.

Private companies may also offer two other types of tests, including an on-site testing service, which are **not** recommended or endorsed by the HSE at this time; these are:

### Saliva PCR testing

This may be self-administered (with training) and is generally less expensive than the swab PCR test, when arranged privately. For information only, the CIF recorded a webinar with HealthWatch, which is accessible here: https://ciftraining.ie/cpd-courses/rapid-affordable-and-convenient-saliva-based-rt-qpcr-testing-for-covid-19/

#### Antigen testing

Antigen testing is quicker but less reliable than swab PCR testing.

### Antigen Detection Tests (ADTs)

ADTs for COVID-19 are immunoassays that detect the presence (or absence) of specific antigens on the surface of the virus. ADTs can identify people who are at the peak of infection, when virus levels in the body are likely to be high. ADTs generally involve the taking of nasopharyngeal or nasal swab specimens, by trained persons, with results available within 15-30 minutes of commencement.

A significant difference between ADTs and swab PCR testing is that thousands of virus particles per microlitre would be required to produce a positive result under ADTs for COVID-19, whereas swab-PCR tests can detect very small amounts. ADTs may thus be considered as less sensitive in detecting COVID-19; nonetheless, ADTs possess other characteristics, such as shorter turnaround times and lower reagent costs, which may assist the public health response to COVID-19 through early detection of highly infectious cases. Furthermore, antigen tests are best used to identify people who are likely to be high.

Late January 2021, the Health Protection Surveillance Centre (HPSC) published 'Interim Guidance on the use of Antigen Detection Tests (ADTs) in the public health system in Ireland'. This guidance acknowledged and effectively endorsed the use of such tests, subject to certain criteria.

# Setting up a Rapid ADT Testing Regime in a Workplace Setting

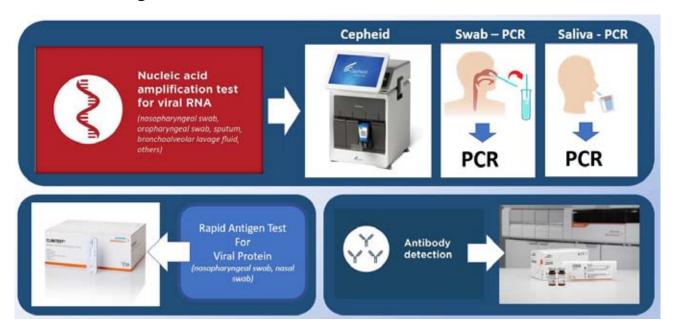
The Work Safety Protocol: https://enterprise.gov.ie/en/Publications/Work-Safely-Protocol.html provides advice for employers in setting-up a Rapid Antigen Detection Testing (RADT) regime in workplace. Before establishing a RADT testing regime in a workplace setting, the employer must discuss and agree its implementation and administration with workers and their representatives.

Note: If you test positive through either a Saliva PCR test or an Antigen test, you must self-isolate and contact your GP to arrange for a Swab PCR test which will either validate or reject the earlier test result.





### **COVID-19 Testing Solutions**



The aforementioned control measures are elaborated on throughout this document and all individuals need to take personal responsibility to advise their employer of any symptoms immediately.

Please bear in mind current public health guidelines when planning work activities, notably the existence of restrictions in accordance with the government's

'Resilience and Recovery 2020-2021: Plan for Living with COVID-19'

https://www.gov.ie/en/campaigns/resilience-recovery-2020-2021-plan-for-living-with-covid-19/

### Ventilation and Air Conditioning (HVAC)

Provision of adequate ventilation is an important consideration for preventing the spread of COVID-19. The Work Safety Protocol: https://enterprise.gov.ie/en/Publications/Work-Safely-Protocol.html provides advice for employers in terms of assessing ventilation within a workplace. It is important to maximise ventilation in areas where people are in close contact.

While large droplets containing the virus will settle onto the surrounding surfaces within seconds, smaller particles can stay suspended for longer. Dilution of indoor air by opening windows and doors or using mechanical ventilation systems can lower the airborne concentration and remove these smaller particles from the air.





### 3 Role of the Client

The construction industry is largely a service industry. Contractors work for clients under a construction contract. In most instances, compliance with these Standard Operating Procedures (SOP) involves changes to the schedule or delivery programme for construction projects. Therefore, the implementation of these SOP's must have the support of the client and be implemented in accordance with the necessary contractual instructions from clients. A contractor cannot operate unilaterally and each site and project is unique in terms of its design and the tasks associated with its construction. Clients must therefore accept that adapting and complying with the good practice illustrated in this SOP has productivity and cost

implications. It is therefore recommended that as construction continues on site and more is learnt about the Cornavirus and its variants, a revised risk assessment is conducted by the client and contractor to ensure the project can operate safely, revised work programmes are agreed and/or any necessary contractual instructions are issued by the client which make it possible to comply with these SOP's.

On certain projects where the client and the builder are the same entity (such as housing projects) it is still recommended that a revised risk assessment is carried out before implementing these SOP's.





## **4 Health and Safety Documentation**

Prior to construction projects commencing project health and safety documentation should be reviewed to ensure that the documentation is aligned with the measures as outlined in this "Construction Sector C-19 Pandemic SOP" and the Government's Work Safety Protocol, general / standard health and safety requirements, considering the constraints of COVID-19.

It is recommended that each PSCS / Contractor / Developer should document a specific COVID-19 Plan in line with this document and in consultation with the Client. The resulting plan should consider and address the level(s) of risk associated with the project and tasks that workers perform on site. On each project, the PSCS, in consultation with other contractors, will appoint COVID-19 Compliance Officer(s) and workers Safety Representative as necessary depending on the size, scale and complexity of the project.

### **Insurance**

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

#### **Safety Statement**

It is advised that contractors 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).

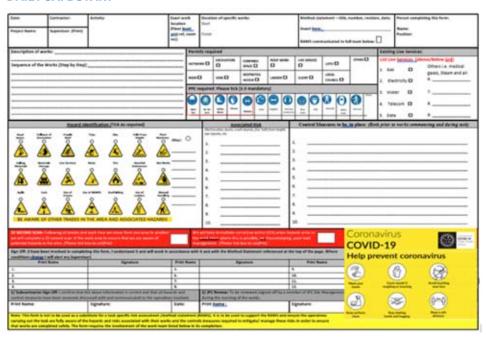
Section 17 of this document deals with 'close working'.

### **Daily Briefings Documents**

To ensure consultation with workers, 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.

### **DAILY SAFE START**







## 5 Site Management

### **Site Management and Supervision**

For the purposes of the document, anyone with supervisory responsibilities is classified as site management.

### **Responsibilities of Site Management for COVID-19**

Site management must risk assess and manage safety and health hazards in the workplace. In the context of the application of the requirements of this C-19 SOP, responsibilities include managing and instructing site workers on the various control measures and compliance. This SOP identifies a number of key management responsibilities during the implementation of this Plan. These responsibilities are elucidated hereafter.

Note: Project teams must stay agile as new information comes available that may change approach in procedures, processes or PPE.

### **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).
- ► To ensure that Safety Representative(s) / Lead Workers Representative(s) have been selected.
- ► 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. Please note that the CIF recognises the ESB COVID-19 induction as being equivalent.
- ► 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. Experience has shown that keeping workers in "pods" can assist in reducing virus transfer and reduce possible contacts.

### **Site Workers**

It is vital that each worker knows how to work safely during this COVID-19 pandemic 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. Workers should also note that they have a personal responsibility, to their colleagues and family, to follow the guidelines for safe working but also to inform site management of any issue that impacts on site safety - e.g. close contacts / positive cases.

### **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 social distancing and hygiene etiquette.





## 6 Hygiene

### Good hygiene and hand washing

All site personnel should follow this advice and encourage others to follow this advice too. Site management should provide toolbox talks on how to perform hand hygiene effectively.

See https://www2.hse.ie/wellbeing/how-to-wash-your-hands.html

#### 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.



According to the HSE, "there is no persuasive evidence that uniforms / personal clothing pose a significant hazard in terms of spreading infection. Normal household laundry practices can be expected to inactivate the COVID-19 virus and most other common pathogens. A ten-minute wash at 60 degrees Celsius is sufficient to remove most microorganisms".





## 6 **Hygiene** continued

### 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 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. Disposable gloves are generally not required for infection prevention and control purposes.

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 / Face Coverings - General Use

Based on current scientific evidence, the wearing of face coverings in general use, can reduce the transfer of the virus. The mandatory wearing of face coverings in certain public places is required:

https://www2.hse.ie/conditions/coronavirus/face-coverings-masks-and-covid-19/when-to-wear.html

It is recommended that the wearing of face coverings be enforced site wide. There is strong evidence to confirm that this can reduce the transfer of infection considerably.

Temperature testing on entry has been found to be useful in detecting cases and providing confidence to workers and is recommended.

Site Management should consider additional measures to ensure the containment of the virus; these include posters and/or leaflets to advise workers of the hazards associated with COVID-19 and the measures to be taken to prevent the spread of the disease.

The Health Services Executive (HSE) and CIF have prepared a selection of posters which can be displayed in all workplaces and sites. A link to these posters is provided in Section 23.











## 7 Commencing Work - Sites

In advance of sites commencing, all construction companies must consider the following, in conjunction with communications and briefings that will be required:

- Safety and Health Plans, Safety Statement and other relevant documents will have to be communicated to all staff members
- Construction Stage Health and Safety Plan must be communicated to all Site Management
- All site personnel and visitors must complete the 'CIF Online C-19 Induction' (or ESB equivalent programme).
- All persons working on site should complete a weekly Covid 19 Questionnaire / Self Declaration form. See https://www.hsa.ie/eng/topics/covid-19/return\_to\_work\_safely\_templates\_checklists\_and\_posters/return\_to\_work\_form.pdf.
  It is recommended that this be completed and submitted by each main contractor / contractor / developer ideally in advance of persons returning to site if conditions change at any time, resulting in a re-appearance of symptoms workers should be advised not to come to work!
- The questionnaire / self declaration is designed to seek confirmation that the individual has no symtoms of COVID-19 and is not waiting a COVID-19 diagnosis.
- Persons returning to work must ensure that they follow the HSE guidance which can be found here: https://www2.hse.ie/conditions/coronavirus/ returning-to-work-safely.html



Example of toolbox talk while applying social distancing





### 8 Travel to / from 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 site alone using their company vehicle or their own means of transport.

Where public transport is the only option for workers, face masks must be worn, then regular toolbox talks outlining how to reduce the possibility of infection should be considered.

Site 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.

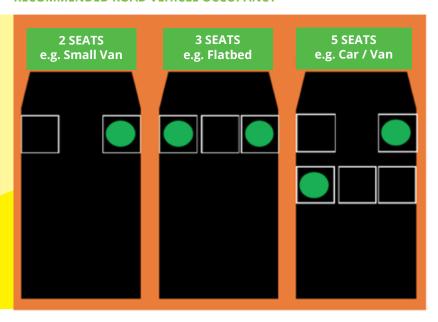
- How someone taken ill would get home.
- Workers travelling together in vehicles are automatically "Close Contacts" - site management should endeavour to understand who is sharing vehicles and group them in working pods.

Note: Knowing who is sharing vehicles will assist with contact tracing.

### Suggested arrangements are as follows:

- Single occupancy of vehicles is recommended.
- In circumstances where it is impractical to limit occupancy to one or two persons, additional control measures must be adopted (e.g. use of face masks, use of screens between occupants, and open the windows.
- Sit as far apart as the vehicle allows.

#### RECOMMENDED ROAD VEHICLE OCCUPANCY







### 8 Travel to / from Work continued

### **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 members travel and work together day after day and where possible, keep them working in a pod).
- 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.
- Where there is more than one person in the vehicle, occupants should wear face coverings.
- If vehicle screens are available and where multiple passengers are traveling, installation should be considered.

- 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 'with soap' for at least 20 seconds.
- If availing of public transport, sit down to minimise contact with frequently touched surfaces, handles, roof straps, isolation bars and wear a face covering etc
- Carry hand sanitiser (at least 70% alcohol) and use it regularly throughout your journey.

**Note:** It is noted that it is commonplace in the construction sector for family members to travel together or workers, who lodge together, to travel together (i.e. essentially a "family unit").

Recommended Road Vehicle Seating Arrangements						
No. of seats	Max no. of occupants	Seating arrangement				
2	1	1 driver				
3	2	1 in the driving seat 1 in the far passenger seat				
5	2	1 in the driving seat 1 in the far passenger seat				



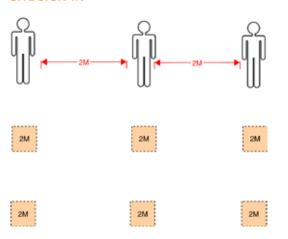


### 9 Prevention of Cross Contamination

#### **Site Entry**

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

### **SITE SIGN-IN**



### **Recommended Control Measures**

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

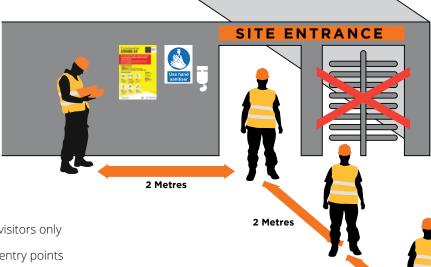
- Record details of entrants to site to assist with contact tracing further detail in Section 18
- Turnstiles to be by-passed with open door access to site
- Thumb access devices should be by-passed / turned-off
- Stagger site start times / finishing times to reduce queues
- Multiple entry points depending on site numbers
- Security guards to record all names rather than having multiple persons signing-in using shared pen/booklet
- Restrict entry to workers and essential visitors only
- Sanitising stations in position at all site entry points
- Regularly clean common contact surfaces in reception, office, access control and delivery areas (e.g. scanners, turnstiles, screens, telephone handsets, desks, particularly during peak flow times)

- 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 site must be directed to wash their hands and additional hand washing stations should be provided where possible
- The wearing of face coverings should be reinforced
- Touch points should be minimised with a "handsfree" approach where possible
- On access routes throughout site, one-way systems should be implemented where possible, barrier gates should be wedged open, and touch points should be cleaned regularly.

**CONTROLLED SITE ACCESS** 

2 Metres

**FOR COVID-19** 







### 9 Prevention of Cross Contamination continued

### **Cleaning to Prevent Contamination**

Enhanced cleaning procedures should be in place across all sites to prevent cross contamination, particularly in communal areas and at touch points including:

- ► Taps and washing facilities
- Toilet flush and seats
- Door handles and push plates
- Handrails on staircases and corridors
- Lift and hoist controls
- Machinery and equipment controls
- Food preparation and eating surfaces

- Communications equipment
- Keyboards, photocopiers and other office equipment
- Rubbish collection and storage points should be increased and emptied regularly throughout and at the end of each day
- Regular cleaning of site welfare facilities, handrails and touch points should be undertaken.

The HSA advises that contact/touch surfaces such as table tops, work equipment, door handles and handrails should be cleaned at least twice daily, with modified cleaning intervals for rooms and work areas. For washroom facilities and communal spaces, cleaning should be performed at least twice per day.

#### **CONTACT POINTS WITHIN A VEHICLE**



- Steering Wheel
- Gearstick
- Handbrake
- Door Handles
- Radio & Infotainment Controls
- Steering Column (Indicators, Windscreen Wipers, Cruise Control)
- Elbow Rests
- Seat Position Controls
- Door Frame





### 9 Prevention of Cross Contamination continued

### **Tools, Equipment and Plant**

- All 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 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.

### **EXAMPLES OF STICKERS TO PROMOTE CONTROLLED USE OF MOBILE PLANT/EQUIPMENT**



Coronavirus COVID-19 
DO NOT SWITCH DRIVERS
CLEAN TOUCH POINTS

CONTACT POINTS
WITHIN A MINI DIGGER







# 10 Social Distancing

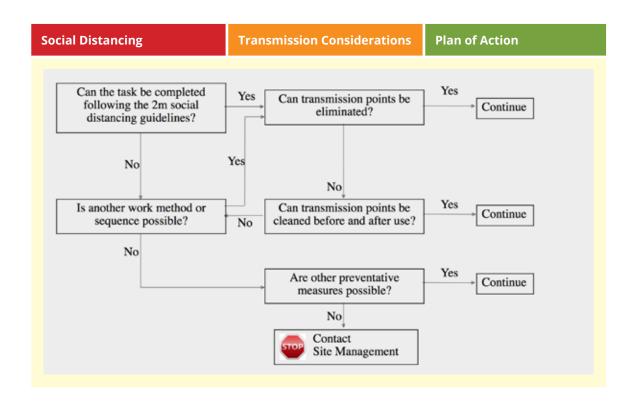
### What is social distancing?

Social distancing, or physical distancing, is a set of interventions or measures taken to prevent the spread of a COVID-19 by maintaining a physical distance between people and reducing the number of times people come into close contact with each other.

In order to slow the transmission rate of COVID-19, a social distancing of minimum 2m is recommended by the HSE.

**Note:** Social distancing should be considered in the vertical as well as horizontal when planning works e.g.: when working on scaffold.

The flow chart below is provided to assist in the review of work processes with social distancing in mind.







## 11 C-19 Compliance Officer

This section is intended to outline the role and duties of a COVID-19 Compliance Officer ('C-19 Compliance Officer') for sites of all sizes.

Projects should also facilitate the selection of at least one Site Safety Representative / Lead Worker Representative to assist with ensuring that Covid-19 measures are strictly adhered to.

**Note:** Role of the Lead Workers Representative is as outlined in the Government's Work Safety Protocol.

Note 2: Free, online training for the Lead Worker Representative is available at <a href="https://www.hsa.ie/eng/topics/covid-19/hsa\_return\_to\_work\_safely\_online\_courses/hsa\_return\_to\_work\_safely\_online\_courses.html">https://www.hsa.ie/eng/topics/covid-19/hsa\_return\_to\_work\_safely\_online\_courses.html</a>

It is important that the right candidate is appointed/selected as a C-19 Compliance Officer.

Projects must assess how many C-19 Compliance Officers are required depending on size, environment, number of personnel and the work activity to be monitored. C-19 Compliance Officer's duties should be shared among all contracting companies on a project.

# Social distancing compliance is the responsibility of everyone.

A backup must be available in the event of a C-19 Compliance Officer going on training, annual leave or being off sick.



EXAMPLE OF HIGH VISIBILITY VESTS TO IDENTIFY C-19 COMPLIANCE OFFICER / SITE SAFETY REPRESENTATIVE(S)

Details of the assigned C-19 Compliance Officer and Site Safety Representative(s) to be communicated on site safety notice boards.

### Role of a C-19 Compliance Officer

- ▶ The role of a C-19 Compliance Officer is to monitor day to the site activities to ensure social distancing and hygiene rules are being maintained to protect health and reduce the spread of the C-19 virus. This individual may have other responsibilities.
- These key personnel should be clearly identifiable onsite with a high viz vest noting C-19 Compliance Officer written on them. The class of hi viz provided should be appropriate to the location that the worker will be working readers should consult ISO 20471:2013+A1:2016
- The persons undertaking the role of C-19
  Compliance officer and the Site Safety
  Representative(s) must receive training (inhouse /
  CIF webinar) in what the roles entail.
- ► Ensuring compliance to the 2m social distancing rule and good hygiene is not the sole responsibility of the C-19 Compliance Officer. Their role is supported by all site management, Site Safety Representative(s) and workers.
- Site Management must communicate to all onsite details of the appointed C-19 Compliance Officer(s).
- ► A C-19 Compliance Officer must not put themselves at risk while carrying out their duties.
- C-19 Compliance Officers must have a structure or framework to follow within the organisation to to be effective in preventing the spread of COVID-19. This structure must be regularly audited and managed to ensure it works and protects all onsite. Failure to take it seriously could result in an outbreak of COVID-19 onsite.

Note: The C-19 Compliance Officer should be suitably knowledgeable in terms of Covid-19 prevention measures; no formal training is required, and in-house training would be acceptable. The CIF has provided free access to a recorded webinar, accessible here: <a href="https://ciftraining.ie/cpd-courses/c-19-compliance-officer/">https://ciftraining.ie/cpd-courses/c-19-compliance-officer/</a>





## 11 **C-19 Compliance Officer** continued

### Responsibilities of 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 practices 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.





### 12 Communal and Welfare Areas

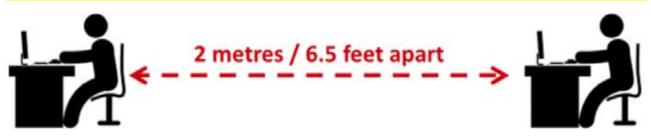
### Office arrangements

- Face covering should be worn in offices.
- All non-essential site personnel should be encouraged to work from home where possible
   usual supports required.
- Personnel working in site offices should be dispersed so there is always a social distance of 2m.
- Offices should be regularly ventilated by opening windows.
- 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.

### **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.
- 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.

### **OFFICE SPACE**







### 12 **Communal and Welfare Areas** continued

### **Canteens and Eating Arrangements**

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

- Whilst there is a requirement for construction sites to provide a means of heating food and making hot drinks, a pandemic is an exceptional circumstance and workers attending site canteens should be advised where possible to bring a packed lunch and flask to help eliminate transmission points on microwaves and water pour points etc.
- ▶ Break times should always be staggered to reduce congestion and contact. Where workers decide to eat their lunch in their vehicle, they should be advised to do so on their own to avoid possibility of infection from others.
- ► Face coverings should be worn, except when seated at a table to eat or drink. Workers should reduce times in canteens to a minimum and wear face coverings when not eating / drinking
- Site personnel must be encouraged to wash their hands before eating.
- Hand cleaning facilities or hand sanitiser should be available at the entrance and exit of any room where people eat and should be used by all personnel when entering and leaving the area.
- ► Ensure a seating arrangement where workers sit 2 metres apart from each other whilst eating and avoid all physical contact with co-workers.
- Where catering is provided on site, consider the provision pre-prepared and wrapped food only.

- Payments should be taken by contactless card wherever possible.
- Tables should be cleaned between each use and sitting based on rota.
- 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.
- Provide illustrations of 2 metre spacing to clearly demonstrate social distancing.

### **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.
- Face covering should be worn.
- 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.
- Provide suitable and sufficient rubbish bins in these areas with regular removal and disposal.
- Identify 2-metre social distancing areas.
- Remove all unnecessary items.





# 13 Site Walkways and General Access

To assist with social distancing, implement the following:

- A one-way system on access routes throughout the site where possible. Increasing access points can help establish a one-way system. (e.g. An additional HAKI stair to allow for one-way traffic up and down).
- ▶ Where a one-way system is not possible consider widening pedestrian routes 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.

### **SOCIAL DISTANCING ONSITE**









## **14 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.

Symptoms	COVID-19 Symptoms range from mild to severe	FLU Abrupt onset of symptoms	COLD Gradual onset of symptoms
Fever or chills	Common	Common	Rare
Cough	Common (usually dry)	Common (usually dry)	Mild
Shortness of breath	Common	No	No
Lost or changed sense of smell or taste	Common	Rare	Rare
Fatigue	Common	Common	Sometimes
Aches and pains	Common	Common	Common
Sore throat	Sometimes	Sometimes	Common
Headaches	Sometimes	Common	Rare
Runny or Stuffy Nose	Sometimes	Sometimes	Common
Feeling sick or vomiting	Rare	Sometimes	No
Diarrhoea	Rare	Sometimes in children	No
Sneezing	No	No	Common





## 14 First Aid Responder Guidance continued

#### **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.

### **PPE Requirements**

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

- 1. Disposable gloves (nitrile/latex)
- FFP3 or FFP2 or other face coverings providing suitable protection
- 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 Project Lead or designated person to ensure any issues with first aid PPE are resolved in as timely a manner as possible.





# 15 **Management of Meetings**

Conduct meetings as much as possible using online remote means. Where face-to-face meetings are necessary, these must be arranged in line with the Government advice that is in place at the time of holding the meeting. Furthermore, the length of the meeting and the numbers attending should be kept to a minimum and participants must maintain physical distancing at all times. Proper ventilation, for example open windows, should also be in place. Attendance in a meeting room for a prolonged period may result in attendees being considered close contacts should an outbreak occur.

According to the HSA, there is no time restriction on how long workers can be in the same room observing physical distancing advice, however HPSC Guidelines in the identification of contacts for contact tracing purposes states that "For those contacts who have shared a closed space with a case for longer than two hours, a risk assessment should be undertaken taking into

consideration the size of the room, ventilation and the distance from the case. This may include office and school settings and any sort of large conveyance.

### **Site Meetings**

- 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.
- Experience has shown that sharing of IT equipment etc. at meetings contributes to transmission of the virus. Eliminate where possible - if not, sanitise the equipment between users.

## 16 Management of Deliveries

### Site Management should:

- 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.



### **DRIVERS**

Follow instructions to set down area





## 17 Close Working

This section outlines guidance relating to COVID-19 Particular Risks for short-term work that must be completed where workers are less than 2 metres apart (<2m).

### **Elimination of Close Working:**

Elimination of close working is preferable and should be investigated and prioritised.

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.

Stages of the construction process where <2m tasks can be eliminated /mitigated: (including a non-exhaustive list of examples)

- Design sections of materials are:
  - A) 2.5m long or longer OR
  - B) Materials can be installed by an individual (lightweight/ fixings are simplified
  - C) Mechanical means for lifting and access can be used while keeping construction personnel >2m apart
- Planning for work: RAMS / Planning / Sequencing / Coordination / Communication – All tasks planned via a pre-planned safe system of work shall consider eliminating <2m work.</p>
- RAMS must consider elimination of work within 2m as the first priority. Where this is not possible the RAMS must detail the control measures for persons working <2m on the task.</p>

# 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.

Requirements for personnel 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.





### 17 Close Working continued

- There are 2 types of work in the <2m transmission zone,
  - A) no physical contact between colleagues
  - B) physical contact will occur (manual handling / pushing – pulling side by side, shared tools and equipment).
- Scenario B is of higher risk than scenario A.
- A task specific risk assessment is required to identify the appropriate PPE / combination of PPE e.g. faceshield / mask (surgical type / FFP3/FFP2 / other), eye protection / disposable suit / gloves\*.
  - \*note previous comments regarding disposable gloves (p.10).
- If it is possible to erect a physical barrier / safety signage that does not impede the work between colleagues 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 colleagues 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.

Risk assessment / other documentation for close working should be retained for contact tracing purposes.





### **18 COVID-19 Suspect / Confirmed Cases**

#### **Suspect COVID-19 Case at Work**

What to do if an employee becomes unwell and you 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 mask to prevent contamination of area and close by personnel.
- The individual who is unwell should call their doctor and should outline their current symptoms. They should return home and await public health guidance details are available here:

  https://www2.hse.ie/conditions/coronavirus/testing/how-to-get-tested.html
- 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. Experience to date has shown that this can take some days. In an individual case, the HSE will not contact the employer. It is advisable to carry out contact tracing relating to this individual and in the event, they prove positive, advise all close contacts.
- A risk assessment of each setting may be undertaken by HSE with the lead responsible person. Advice on the management of staff and members 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.
- Advice on cleaning of communal areas such as offices or toilets is outlined later in this document.
- See Section 24 for "Sample Site Response to a Covid 19 suspect / confirmed Case".





### 18 **COVID-19 Suspect / Confirmed Cases** continued

#### **Contact Tracing Log**

The Governement's Work Safety Protocol advises employers to keep a log of contact/group work to facilitate contact tracing. See <a href="https://enterprise.gov.ie/en/Publications/Work-Safely-Protocol.html">https://enterprise.gov.ie/en/Publications/Work-Safely-Protocol.html</a>

According to the HSE, "Close Contact" can mean:

- (a) spending more than 15 minutes of face-to-face contact within 2 metres of someone who has COVID-19, indoors or outdoors
- **(b)** living in the same house or shared accommodation as someone who has COVID-19
- (c) sitting within 2 seats of someone who has COVID-19 on public transport or an airplane

Spending more than 2 hours in an indoor space with someone who has COVID-19 will sometimes count as close or casual contact. This could be an office or a classroom. But it will depend on the size of the room and other factors" (https://www2.hse.ie/conditions/coronavirus/close-contact-and-casual-contact.html)

Any incidences that meet these criteria should be logged by employers.

Various contact tracing systems have been developed that use wearable devices to warning the wearers when in close contact and to electronically log such contacts - this data to be used in the event of a positive case to identify those who were "close contacts" of that positive case - CIF have completed a review of one of these systems and a webinar, explaining how it operates is available at <a href="https://ciftraining.ie/construction-training-courses/?types=cpd">https://ciftraining.ie/construction-training-courses/?types=cpd</a>

You will be a close contact if the person you were in contact with:

- had symptoms of COVID-19 and you were in contact with them up to 48 hours before they developed symptoms and started self-isolating;
- did not have symptoms and you were in contact with them up to 24 hours before they tested positive.

Should an employee become COVID-19 positive, public health officials may request the log as part of the contact tracing process. According to the HSA, the log should include details such as date / names of participants / duration of contact to help contact tracing teams determine who might qualify as a close contact. Logs should be held for 28 days, after which time they can be discarded.

To ensure rapid response to a situation where workers are close contacts, site management should do on site contact tracing and advise "close contacts" to follow HSE guidance: https://www2.hse.ie/conditions//coronavirus/testing/if-you-are-a-close-contact.html









#### Confirmed COVID-19 Case at Work

Experience has shown, that while the below is the official advice from the HSE, this process is slow and can lead to delays in responding. It is advised, if a positive case is identified and is connected to the site / workplace, management should instigate a contact tracing process and advise close contacts identified to follow the HSE advise as outlined in: https://www2.hse.ie/conditions//coronavirus/testing/if-you-are-a-close-contact.html

# Key points for construction industry in responding to a case of COVID-19

Response to an isolated case of COVID-19 on a site:

- When a case of COVID-19 is identified, the case will be contacted by the Public Health Contact Tracing team who will:
  - Inform the case of their diagnosis.
  - Identify and collect contact details of all close contacts from the case, including community contacts and workplace contacts.
  - Collect details of any congregate settings identified which may be contacts; this would include any building sites a construction worker may have worked on during the time period that they would be considered infectious. The case will be asked to provide contact details for their line manager.
- ► The contact tracing team will then contact all close contacts and organise testing for them according to guidelines.
- In the case of a workplace, the line manager will receive a call from Public Health, who will discuss work place practices, undertake a risk assessment and provide advice.

# What to do if an employee informs you that they have tested positive for COVID-19:

- ► If a line manager is informed by their employee that they have tested positive for COVID-19, the line manager should proceed as follows:
  - Carry out a contact tracing exercise for likely "close contacts" to the positive case. Advise these close contacts to self isolate and to contact their GP advising that they believe themselves to be "close contacts".

- If any workers at the site are displaying symptoms of COVID-19 they should be advised to self-isolate and to contact their GP to arrange testing, however testing of asymptomatic co-workers is not required unless they have been identified as close contacts by Public Health.
- It is not necessary to close a site or part of a site in response to an isolated case of COVID-19, unless it is not possible to continue operating - for example in a situation where an entire team have been deemed to be close contacts and therefore will need to restrict their movements, thus necessitating closure due to insufficient staffing levels.
- The line manager of the case may receive a call from the Public Health contact tracing team if their work place is deemed to have been exposed to the case during their infectious period.

# What to do if you have been informed of multiple cases of COVID-19 amongst your workers:

- If a line manager is informed of multiple confirmed cases of COVID-19 on their site and has concerns that there may be a cluster of cases linked to the site:
  - The line manager should contact Occupational Health or their local Public Health Department (see attached contacts) in a situation where multiple laboratory-confirmed cases of COVID-19 occur on a site.



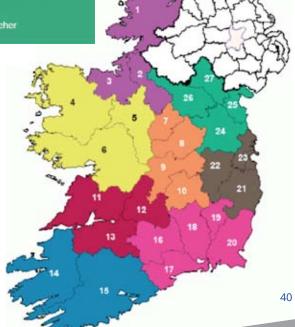






		Donegal	Department of Public Health, Health Service Executive,	
North-West	2	Leitrim Sligo	Iona House, Upper Main Street, Ballyshannon, Co. Donegal. Tel: (071) 9852900, Fax: (071) 9852901 A/Director of Public Health: Dr Anthony Breslin	
5	Roscommon	Tel: (091) 775200; Fax: (091) 758283		
6	Galway	Email: public.health@hse.ie A/Director of Public Health: Dr Breda Smyth		
Midlands		Longford	Department of Public Health, Health Service Executive,	
		Westmeath	HSE Area Office, Arden Road, Tullamore, Co. Offaly.	
		Offaly	Tel: (057) 9359891; Fax: (057) 9359906; ID Fax: (057) 935990 Email: public-health@hse.ie	
		Laois	Director of Public Health: Dr Phil Jennings	
Mid-West	11	Clare	Department of Public Health, Health Service Executive,	
	12	Tipperary - North	Mount Kennett House, Henry Street, Limerick Tel: (061) 483337; Fax: (061) 464205	
	13	Limerick	Director of Public Health: Dr Mai Mannix	
South	14	Kerry	Department of Public Health, Health Service Executive, Floor 2 - Block 8, St. Finbar's Hospital, Douglas Road, Cork Tel: (021) 4927601, Fax: (021) 4923257	
	15	Cork	ID Fax Cork: (021) 4923257; ID Fax Kerry: (066) 7184542 Email: dph@hse.ie Director of Public Health: Dr Augustine Pereira	
South-East	16	Tipperary - South		
	17	Waterford	Department of Public Health, Health Service Executive, Dublin Road, Lacken, Kilkenny	
	18	Kilkenny	Tel: (056) 7784124; Fax: (056) 7784393;	
	19	Carlow	ID Fax: (056) 7784599 A/Director of Public Health: Dr John Cuddiny	
	20	Wexford		
East	21	Wicklow	Department of Public Health, Health Service Executive, Dr. Steevens' Hospital, Dublin 8.	
	22	Kildare	Tel: Main Switch (01) 6352000, ID Notifications: 01 6352145 Fax: (01) 6352103	
	23	Dublin	Email: dph east@hse ie Director of Public Health: Dr Deirdre Mullholland	
North-East	24	Meath		
	25	Louth	Department of Public Health, Health Service Executive Railway Street, Navan, Co. Meath Tel: (046) 9076412, Fax: (046) 9072325 A/Director of Public Health: Dr Kevin Kelleher	
	26	Cavan		
	27	Monaghan	A Director of Public Health. Dr Never Neilerlet	

**Note:** Further information on getting tested for COVID-19 is available on the HSE website: https://www2.hse.ie/conditions/coronavirus/testing/how-to-get-tested.html







### 19 Return to Work Process - Worker

To return to work following a positive case diagnosis, an employee must follow this protocol and the HSE guidance at <a href="https://www2.hse.ie/conditions/coronavirus/returning-to-work-safely.html">https://www2.hse.ie/conditions/coronavirus/returning-to-work-safely.html</a>

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 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.

The employee should complete the return to work form: https://www.hsa.ie/eng/topics/covid-19/return\_to\_work\_safely\_templates\_checklists\_and\_posters/return\_to\_work\_form.pdf

The Health and Safety Authority has published very useful resources on 'Fitness for Work Guidance and Checklists following COVID-19 Absence'. The guidance details the steps involved in determining/assessing 'Fitness for Work' of any worker, after an absence due to COVID-19 Infection or suspected infection.

These are available at: https://www.hsa.ie/eng/topics/covid-19\_coronavirus\_information\_and\_resources/covid-19\_business\_supports/business\_supports/fitness\_for\_work\_following\_covid-19\_absence/

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. 10 days since the onset of their symptoms and 5 days since their last fever (high temperature) https://www2.hse.ie/conditions/coronavirus/self-isolation/how-to-self-isolate.html or
- **3.** Close contacts have a negative test (i.e. COVID-19 not detected) 10 days after they were last in contact with the person who tested positive and do not have any symptoms of COVID-19.

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 an acknowledgement that GP's don't currently have capacity to be issuing return to work certificates.
- [2] Close contact can mean:
  - (a) spending more than 15 minutes of face-to-face contact within 2 metres of someone who has COVID-19, indoors or outdoors
  - **(b)** living in the same house or shared accommodation as someone who has COVID-19
  - **(c)** sitting within 2 seats of someone who has COVID-19 on public transport or an airplane

Spending more than 2 hours in an indoor space with someone who has COVID-19 will sometimes count as close or casual contact. This could be an office or a classroom. But it will depend on the size of the room and other factors (https://www2.hse.ie/conditions/coronavirus/close-contact-and-casual-contact.html)





### 20 Cleaning Spaces with 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), wear 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, a mask, and an apron. Hands should be washed with soap and water for 20 seconds after all PPE has been removed.

#### **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:





# 20 Cleaning Spaces with Suspected / Confirmed Cases continued

 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

Source: Public Health England - COVID-19: cleaning in non-healthcare settings outside the home. Available at: https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings

#### 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. HSE recommend washing at 60 degrees 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.





### 21 Statutory Training Updates

#### **Safe Pass**

On the 31st of March 2020, the Minister Pat Breen signed a Statutory Instrument that extends the expiry date of Safe Pass cards, that expired since the 1st March 2020. This facilitates a temporary dispensation for those whose Safe Pass cards expired since 1st March 2020 and who cannot undertake the Safe Pass programme owing to the pandemic. The CIF would still encourage construction workers to schedule attendance on Safe Pass courses as we may expect an end date to this dispensation in the near future.

SOLAS' Safe Pass courses are now fully operational; however, the maximum numbers permitted on Safe Pass courses are currently limited and course timings have been extended to facilitate extra breaks and social distancing. All queries pertaining to Safe Pass (or CSCS/QSCS) may be directed to SOLAS at (01) 5332500 or by email to: CSUInfo@solas.ie

Please note, site personnel for which there is a mandatory requirement for Safe Pass are – "General Construction Workers / Craft workers and on-site security personnel". It is recommended that companies review their own company policies that might extend beyond this at this time.

Should it be a client requirement that "everyone" on site must have Safe Pass – this requirement should be revisited.

## Construction Skills Certification Scheme (CSCS) card renewal

The Safety, Health and Welfare at Work (Construction) Regulations 2013 still apply on construction projects and therefore, the categories of workers carrying out operations listed on Schedule 5 of the Regulations, must be in possession of current cards – the renewal of these cards does not require the attendance at a training / renewal programme and can be achieved by following the instructions below;

#### Renewal of CSCS Card

To renew a CSCS Experienced Operator Registration Card, complete the online form at:

https://cardrenewals.solas.ie/#/cscs/renew and attach a current passport-quality photograph together with an online payment.

#### Replacement CSCS Card

If a CSCS Registration Card has been lost, stolen or damaged, the owner can apply for a replacement, attaching a current passport-quality photograph together with an online payment.

See: https://cardrenewals.solas.ie/#/cscs/replace

#### **First Aid Responder Training**

The following information was issued by the Pre Hospital Emergency Council (PHECC). PHECC are very aware of the pressures that the current Covid-19 restrictions are placing on RI/ATIs who deliver PHECC responder level courses, and on organisations who are looking to access places on those courses for their staff.

PHECC acknowledged in March 2020 that if a Responders certification had lapsed, an RI/ATI may allow an extended grace period before a full course would be required to maintain FAR certification.

PHECC Council, at their meeting on January 21st 2021, determined that if a Responders certification expired between March 2020 and July 31st 2021, a Responder may complete the 2 day FAR refresher course to maintain FAR certification.

PHECC have confirmed that they are not in a position to extend the expiry date on FAR certificates, which certifies a minimum level of competence in First Aid Response and neither are PHECC recognised RI/ATIs.

See: https://www.phecit.ie/PHECC/Publications\_ and\_Resources/Newsletters/Newsletter\_ Items/2020/Update\_on\_PHECC\_Responder\_level\_ recertification\_\_21\_01\_21\_.aspx





### 22

### **Government's Work Safety Protocol**

On 20th November 2020, the Government launched a 'Work Safety Protocol', which is a revision of the 'Return to Work Safely Protocol' published in May 2020. The revised Protocol incorporates the current advice on the Public Health measures needed to reduce the spread of COVID-19 in the community and workplaces and is issued by the National Public Health Emergency Team (NPHET), the Department of Health and the Government. The updated advice included information on the management and control of outbreaks, selection of hand sanitisers, wearing of masks and ventilation of workplaces to reflect knowledge gained since the start of the pandemic. On 14th May 2021, the Government launched a second revision of the Work Safety Protocol, which included guidance on ventilation and vaccinations as part of the range of measures to prevent the spread of COVID-19. Additionally, information is provided on how to approach the use of antigen testing in the workplace is provided, should an employer choose to do so. The latest Work Safety Protocol may be found here: https://enterprise.gov.ie/en/Publications/Work-Safely-Protocol.html

#### Some key highlights/changes include:

#### Page 2 & 3 - How COVID-19 Spreads

"Current evidence suggests that the virus spreads mainly between people who are in close contact with each other, typically within 1 metre (short-range). A person can be infected when aerosols or droplets containing the virus are inhaled or come directly into contact with the eyes, nose, or mouth. That is why keeping a 2-metre distance and wearing masks are effective in reducing the spread of the virus.

Current information suggests that infected people can transmit the virus both when they are symptomatic (showing symptoms) and asymptomatic (showing no symptoms). This is why it is essential that anyone who is showing symptoms suggestive of COVID-19, or anyone who has been in close contact with a confirmed case, should be tested".

# Pages 23-26 - Antigen Diagnostic Tests (ADTs) and Rapid Antigen Diagnostic Tests (RADTs)

"Some employers, with the agreement of their workers, have sought to implement additional checks as a way of strengthening their COVID-19 response and providing reassurance to their workers and customers. This is not an easy decision and requires careful consideration on a range of issues, both from a technical perspective and in terms of maintaining good workplace relations.

RADTs are tests that detect the presence or absence of specific antigens or proteins on the surface of the virus. The key reason to use such tests is as an aid to public health in "finding" cases of COVID-19; they should not be used to give a "green" light for a workplace to operate or an individual to behave in a particular way. More importantly, if such tests are being used in any setting, be it the workplace or other location, public health advice regarding hand washing, mask wearing, respiratory etiquette, physical distancing and ventilation, all still need to be adhered to in full. Notwithstanding any local antigen diagnostic testing arrangements it is essential that symptomatic individuals contact their GP to arrange for a free SARS-CoV-2 PCR test".

Guidance is provided for "Setting up a RADT Testing Regime in a Workplace Setting".

#### Pages 27 & 28 - Vaccination

"Irrespective of the vaccination roll-out, Public Health infection prevention and control measures (such as physical distancing, hand hygiene, face coverings, adequate ventilation), and working from home unless an employee's physical presence in the workplace is necessary, will all need to remain in place. In that regard, employers and workers should continue to adhere to the requirements set out in the Work Safely Protocol and ensure that their COVID-19 response plan and workplace risk assessments are kept up to date.





### 22 Government's Work Safety Protocol continued

The decision to get a vaccination against COVID-19 is voluntary and workers will therefore make their own individual decisions in this regard. However, employers working together with their workers and their representatives, including the Lead Worker Representative(s), may wish to provide advice and information on the vaccination programme so that workers have the necessary information to make an informed decision. As with other Public Health advice provided in relation to COVID-19 in the workplace, employers should consider specific communication measures for those whose first language is not English.

If a worker decides not to avail of the offer of a vaccination, the employer must review their risk assessment and decide whether the worker can carry out the work task without vaccination, and what other protective measures are needed. There may be certain circumstances where it is deemed that an unvaccinated worker is not safe to perform certain work tasks and in such circumstances the employer may have no option but to redeploy the worker to another work task. This decision would need to be agreed between the employer and a medical practitioner in consultation with the worker".

# Pages 35-41 - Heating, Ventilation and Air Conditioning (HVAC)

"The spread of the virus is most likely when infected people are in close contact so the risk of getting COVID-19 is higher in crowded and poorly ventilated spaces where infected people spend long periods of time together in close proximity. It is important to maximise ventilation in areas where people are in close contact. This applies whether the location is a workplace, a residence or other community setting. While large droplets containing the virus will settle onto the surrounding surfaces within seconds, smaller particles can stay suspended for longer. Dilution of indoor air by opening windows and doors or using mechanical ventilation systems can lower the airborne concentration and remove these smaller particles from the air.

Ventilation, refers to the movement of outdoor air into a building, and the circulation of that air within the building or room while removing stale air to improve the air quality. This can be achieved through natural means (e.g. opening a window) or by mechanical means e.g. HVAC systems. While ventilation reduces the amount of virus in the air and the aerosol risk, it will have minimal impact on droplet transmission where people are within 2 metres of each other, or contact transmission (touching surfaces), which is why it is not a standalone measure and continued adherence to other public health advice is absolutely essential.

The Safety, Health and Welfare at Work (General Application) Regulations 2007, requires employers to make sure there's an adequate supply of fresh air (ventilation) in enclosed areas of the workplace.

Desk or ceiling fans should not be used in poorly ventilated areas as they may only recirculate the virus droplets rather than remove them from the area. Fans should only be used in areas where there is a single occupant.

There is no need to switch off air conditioning to manage the risk of COVID-19."

General Advice is provided in relation to 'Mechanical ventilation'.





### 23 Additional Reading

#### **CIF GUIDANCE ON COVID-19**

https://cif.ie/coronavirus/

#### **COVID-19 (CORONAVIRUS) ADVICE FROM HSA**

https://www.hsa.ie/eng/topics/covid-19/

#### LATEST INFORMATION FROM HEALTH SERVICES EXECUTIVE:

For the most up to date information, from health care professionals, members are advised to monitor the HSE website: https://www2.hse.ie/coronavirus/

#### **HSE' ANTIGEN TESTING GUIDANCE & TRAINING MATERIALS:**

https://healthservice.hse.ie/staff/coronavirus/testing/antigen-testing-guidance.html

#### **GOVERNMENT'S WORK SAFETY PROTOCOL**

https://enterprise.gov.ie/en/Publications/Work-Safely-Protocol.html

#### **RESILIENCE AND RECOVERY 2020-2021: PLAN FOR LIVING WITH COVID-19**

https://www.gov.ie/en/campaigns/resilience-recovery-2020-2021-plan-for-living-with-covid-19/

#### **NSAI COVID-19 WORKPLACE PROTECTION AND IMPROVEMENT GUIDE**

https://www.nsai.ie/covid-19workplaceprotection/\_

#### **POSTERS**

The HSE has prepared a package of resource materials that may be displayed in all workplaces and sites. See: https://www.hse.ie/eng/services/news/newsfeatures/covid19-updates/partner-resources/

#### **TRAVEL ADVICE**

Travel advise is available on the website of the Department of Foreign Affairs at:

www.dfa.ie/travel/travel-advice/coronavirus

#### **HEALTH PROTECTION SURVEILLANCE CENTRE (HPSC)**

The HPSC provide advice for the general public and for specific groups and settings including employers, healthcare professionals, education settings and religious settings at:

www.hpsc.ie

#### STATUTORY INSTRUMENTS RELATED TO THE COVID-19 PANDEMIC

The Government has detailed essential services permitted to operate in January 2021 under level 5 restrictions. This, and other pertinent legislation is available here:

https://www.gov.ie/en/collection/1f150-view-statutory-instruments-related-to-the-covid-19-pandemic/





### 23 Additional Reading continued

#### **WORLD HEALTH ORGANISATION (WHO)**

www.who.int

#### CENTRE FOR DISEASE CONTROL (CDC)

www.cdc.gov

#### **WORKPLACE RELATIONS COMMISSION (WRC):**

https://www.workplacerelations.ie/en/

#### **GUIDE TO MANAGING AN OUTBREAK IN THE WORKPLACE**

https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/ outbreakmanagementguidance/Guidance%20of%20work%20place%20outbreaks.pdf

#### FITNESS FOR WORK GUIDANCE AND CHECKLISTS FOLLOWING COVID-19 ABSENCE

https://www.hsa.ie/eng/topics/covid-19\_coronavirus\_information\_and\_resources/covid-19\_business\_supports/business\_supports/fitness\_for\_work\_following\_covid-19\_absence/

#### **PUBLIC HEALTH ENGLAND (GOV.UK)**

COVID-19: cleaning in non-healthcare settings outside the home.

<a href="https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings">https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings</a>

19-decontamination-in-non-healthcare-settings





### 24 Reference Documents

#### CIF AND TRADE UNION FEDERATION AGREEMENT (FEB'21) 1 of 5

#### AGREEMENT BETWEEN TRADE UNION FEDERATION (TUF) AND CIF

**COVID-19: RETURN TO WORK SAFETY PROTOCOL** 

Version 2: February 2021

#### 1. BACKGROUND

On the 9 May 2020 Government published the "National Return to Work Safely Protocol". This protocol was developed in conjunction with the Irish Congress of Trade Unions and the Construction Industry Federation. The Protocol is mandatory, requires employers and workers to co-operate to ensure workplaces are safe and requires strict adherence to public health guidelines. The Protocol is to be continuously reviewed in light of public health advice. The National Protocol encourages the development of sectoral agreements to further ensure safe workplaces.

The agreement reached between the Construction Industry Federation and the Trade Union Federation supports the National Protocol and provides for clauses specific to the construction industry. The Trade Union Federation comprises of BATU, Connect and SIPTU. This Protocol was originally agreed in May 2020 and was updated in February 2021 to reaffirm both sides' commitment to ensuring COVID safety on construction sites.

#### 2. BEFORE RETURNING TO WORK

The National Protocol requires that before returning to work each worker must be provided with a short questionnaire. Workers are required to complete this questionnaire before returning to work. Before a worker commences work the employer is required to provide induction training on measures that have been put in place on that site to comply with public health advice.

#### 3. INDIVIDUAL WORKER CONSIDERATIONS

In accordance with normal custom and practice in the industry, workers will be recalled to-work from temporary lay-off when work becomes available. The National Protocol obliges employers to take into account workers' individual risk factors (e.g., older workers, presence of underlying medical conditions, etc) and to ensure that an





#### CIF AND TRADE UNION FEDERATION AGREEMENT (FEB'21) 2 of 5

at risk or vulnerable worker is preferentially supported to maintain a physical distance of 2 metres.

While recognising all national regulations in place, where individual issues arise, these can be dealt with on a case-by-case basis.

#### 4. RETURN TO WORK CRITERIA

Lockdowns in the industry in accordance with government regulations could result in a blanket or partial shutdown of construction sites. Where this occurs, workers will be selected in the normal way for lay-off. In accordance with traditional custom and practice, workers are selected for lay-off on a site-by-site basis; where all things are equal relative to skills and experience, service will be the determining criteria.

The following criteria will be used when selecting workers to return to work:

Workers will be recalled to work on a site-by-site basis in accordance with the needs of the site. While it is the prerogative of the employer to take a decision in any particular case, where all things are equal having regard to experience and skills, those with the longest service on site will be recalled first. Where possible, direct employees will be recalled before sub-contractors or agency workers.

#### 5. ALTERNATIVE WORKING ARRANGEMENTS OUTSIDE TERMS OF SEO

The parties recognise that work patterns outside the normal working hours provided for in the SEO may be temporarily required to ensure safety on site. Section E3 of the national Return to Work Safety Protocol provides that employers "should agree through negotiation with workers/trade union officials any temporary restructuring of work patterns that may be required to implement the Covid-19 prevention measures in the workplace"





#### CIF AND TRADE UNION FEDERATION AGREEMENT (FEB'21) 3 of 5

#### 6. COVID-19 TESTING

Workers will be encouraged to co-operate with Covid-19 testing where testing is required by employers. This includes temperature checks, PCR testing and antigen testing. The cost of testing will be covered by the employer.

#### 7. VACCINATIONS FOR COVID-19

The health and safety of all Workers and Employers in the industry is paramount. To ensure that the industry can return to normal, that sites remain open and workers can return to work free from concerns about contracting the virus, the parties to this agreement urge workers to avail of vaccinations as it will enhance the Safety of all on site.

#### 8. WORKER REPRESENTATIVE

The National Protocol provides that employers must appoint a worker representative in each workplace and the worker representative must receive the necessary training to ensure Covid-19 safety on site. The cost of providing training will be borne by the employer. Site personnel may raise concerns with the worker representative who is required to raise these and all safety concerns with management.

#### 9. TUF / CIF / HSA FORUM

Ongoing and regular engagement between TUF and CIF is required to ensure adherence to the National Protocol. Where a complaint has not been dealt with locally it should be referred to TUF who will engage with CIF where relevant. It is agreed that every effort will be made to deal with all complaints promptly. In the event that the complaint cannot be satisfactorily resolved in a timely manner, the matter will be referred, jointly or individually, by TUF/CIF to the COVID 19 department of the HSA. A record of the complaints notified and what action taken will be kept jointly by TUF/CIF.





#### CIF AND TRADE UNION FEDERATION AGREEMENT (FEB'21) 4 of 5

#### 10. ACCESS TO UNION MEMBERS ON SITE

Access to site is under the control of the main contractor who has responsibility for ensuring the safety and security of all workers and contractors on site. Accordingly, access must be controlled. The exceptions to this are those with statutory authority such as Health and Safety Inspectors, etc. The TUF union officials must have the express permission of the main contractor prior to accessing their members on site. All reasonable requests will be given serious consideration by the main contractor. Where permission has been granted, the main contractor will provide a suitable facility for meetings in the following circumstances:

- To attend a pre-arranged meeting with the main contractor management and subcontractor management where a concern relating to Covid-19 has been clearly stated.
- To attend meetings with union members who raise a grievance associated with Covid-19 on the site.
- Each signatory trade union to this agreement will designate an official of that union as the relevant official for the purpose of this clause.

#### 11. BREACHES OF NATIONAL PROTOCOL - COMPLAINTS

The parties are supportive of all efforts to ensure a safe working environment in the current circumstances as set out in the Standard Operating Procedures and the National Protocol. Workers who have concerns regarding compliance with Covid-19 safety protocols on site should raise them with the appointed worker representative whose role will be to deal with safety issues as they arise. Ongoing engagement on site between workers and employers is also provided for in the National Protocol and it is anticipated that any issues arising will be dealt with speedily and promptly. No worker should be penalised for raising a concern regarding compliance with the National Protocol. Any worker who believes he/she has been penalised as a result of raising a complaint may invoke their rights under health and safety legislation, and/or may report it to their trade union under clause 10 above.





#### CIF AND TRADE UNION FEDERATION AGREEMENT (FEB'21) 5 of 5

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	nes on COVID safety are ever-changing.	
	ted to ensuring the most up-to-date inf	·
membe	ers. To this end, the following websites are	e recommended:
	COVID-19 (Coronavirus) (www.gov.ie)	
	COVID-19 Travel Advisory - Department of Fo	
	www.hsa.ie/eng/topics/covid-19 coronavirus	s information and resources/
	e.ie/coronavirus	
www.ba	: Trade Union   Trade Union Ireland (connectu	union io)
	nstructionfacebook.ie	<u>amon.ie)</u>
www.sij		
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Signed:	On Behalf of BATU	
Signed:	On Behalf of BATU  On Behalf of Connect Trade Union	
Signed:	On Behalf of BATU	
Signed:	On Behalf of BATU  On Behalf of Connect Trade Union	Date:
Signed:	On Behalf of BATU  On Behalf of Connect Trade Union	Date:
Signed: Signed:	On Behalf of BATU  On Behalf of Connect Trade Union	Date:
Signed: Signed: Signed:	On Behalf of BATU  On Behalf of Connect Trade Union  On Behalf of SIPTU	Date:
Signed: Signed: Signed:	On Behalf of BATU  On Behalf of Connect Trade Union  On Behalf of SIPTU	Date:
Signed: Signed: Signed:	On Behalf of BATU  On Behalf of Connect Trade Union  On Behalf of SIPTU	Date:





#### **SAMPLE - SITE RESPONSE TO SUSPECTED COVID -19 CASE**

	Person presents as having been identified as a Close Contact with a confirmed Covid-19 case by the HSE	Person presents with symptoms of Covid-19  Notify Company/Project Management and EHS of the individual.  Individual is told to go home to isolate and contact their GP.  Check if the individual with symptoms has been working closely with others on site. Consider removing these others as well, until the individual with symptoms condition has been confirmed.	
Pre-Testing	Notify Company/ Project Management and EHS of the individual. Individual is told to go home and isolate. Check if the individual identified as a Close Contact has been working closely with others on site. Consider removing these others as well, until the Close Contacts test result has been confirmed.		
	Confirmation of Positive Covid-19 Test	Negative test for Close	Negative test for
Post-Testing	Notify Company Management and EHS. Notify Clients and Project Managers. Notify all project stakeholders, including subcontractors, design teams and any other regular visitors to site. Arrange additional cleaning resources with cleaning contractor with immediate effect to focus on any suspected contaminated areas. Hold a briefing with all site personnel to update them of the communication that was issued to their employers and give them an opportunity to raise concerns or queries. If it is a single isolated case, send email to HSE point of contact. HSE may or may not contact the site. Where there is more than one Covid-19 positive case, engage with the HSE by phone and email for further guidance.  Prepare to discuss the following with HSE: Contact tracing Access control to site Contact tracing Existing cleaning protocol on site Welfare facilities Individuals work activities Travel to work, commuting/walking to site Individual can return to work when they have been: S days without a temperature, and Individuals' symptoms are improving. If a close contact, they can stop self-isolating 10 days from the date of their test. Continue with communications to all site personnel includes. Continue to wash hand.	Test results for both day 1 and 7 (where a second test is completed) must be sent to Company/Project Management confirming negative result.      Continue to isolate as per HSE guidelines. Once the 14-day isolation/restricted movement period is complete, and no symptoms appear during this time, the individual can return to work.	Test results must be sent to Company/Project Management confirming Covid-19 negative.  Individual can return to work when they have no symptoms of illness.





# Feedback from the Health and Safety Inspectorate - May 2021

Feedback obtained from the Health and Safety Authority following recent workplace inspections (not limited to construction) include the following:

#### **Recurring Issues / Observations**

- No isolation area provided
- No isolation procedure
- Isolation procedure not sufficiently detailed
- Social distancing not observed in break areas
- Face mask etiquette inadequate during breaks or face masks not being worn at all
- ► Hygiene standards slipping

#### **COVID 19 Response Plan**

- Does the COVID Response plan cover the COVID-19 symptoms and what to do if have a person who shows symptoms?
- ► Workers should be consulted on the plan
- ► 'At risk/vulnerable workers' should be identified
- Posters/signage should be displayed to inform workers of social distancing, correct respiratory etiquette and hand hygiene

#### **Covid-19 Induction Training**

- COVID-19 Induction Training should have been provided to employees
- ▶ Break areas and times should be established to comply with physical distancing (e.g. placing tables and chairs further apart, workers pods/ staggering breaks)
- Should cover alternative arrangements to be used (e.g. additional canteen space or bringing own lunch)
- Supports should be available for workers suffering from anxiety or stress
- Need to demonstrate evidence that this training has taken place (e.g. training records, sign in sheets etc.)

#### **Covid-19 Control Measures**

- Control measures outlined in the Response Plan must be implemented (e.g. safety signage, 2m social distancing, hand sanitizer stations, welfare/ hand washing facilities, cleaning of surfaces regularly)
- ► Is a contacts log maintained?
- ► Has the need for workers to travel to/from work & working together been minimised/eliminated? If not, are there arrangements in place to facilitate as much physical distancing as possible?
- Have job procedures been changed in order to minimise close contact?
- Is the wearing of masks/face coverings being implemented?
- Is guidance for shared worker accommodation available?
- Is working from home facilitated where possible?

#### **Covid-19 Worker Representative**

- Should be evidence of this appointment (i.e. in writing)
- Has the COVID-19 worker representative received briefing/training and are they familiar with the COVID-19 Response Plan?
- Is there a system for workers to raise issues or concerns and have them responded to?
- Is the COVID-19 worker representative aware of their responsibilities?

#### **Welfare Facilities**

- Look for evidence that canteens / break areas have been risk assessed
- Maximum occupancy signs on doors
- Completed check sheets for cleaning of frequent touch points
- Pedal operated (no touch) waste bins
- No sharing of crockery or cutlery if no dishwasher provided
- Social distancing.



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