



# ▶ Prevention and Mitigation of COVID-19 at Work

## ACTION CHECKLIST

Date: 09/04/2020

**This checklist is a management tool to implement practical actions to mitigate the spread of COVID-19 pandemic at the workplace. The successful implementation of the tool is dependent on the cooperation between employers, supervisors and workers to make positive changes in the workplace to improve response to and preparedness for COVID-19. Employers should involve workplace safety and health committees or safety delegates in the process.**

### How to use this checklist:

- ▶ 1. Appoint a team including senior management, supervisors, workers' representatives, and responsible enterprise safety and health personnel.
- ▶ 2. Brief and train the team on the steps to implement the checklist.
- ▶ 3. Complete the checklist and write your check results.
- ▶ 4. Plan, as the team, what action should be taken, by whom and when. Look for a way to apply the measure, if necessary, ask the area manager or workers for advice.
  - If the measure has already been applied or is not needed, mark **No** under "**Do you propose action.**"
  - If you think the measure would be worthwhile, mark **Yes**.
  - Use the space under Remarks to add comments, describe a situation or add a suggestion.
- ▶ 5. Look again at the items you have marked Yes. Choose the items that you consider to be most important and mark them as **Priority**.<sup>1</sup>
- ▶ 6. Immediately after completion of the **checklist, organize a group discussion** with the team to prepare suggestions to management (Experience has shown that this step is essential for promoting positive change).
- ▶ 7. Present the results of the group discussion to management for planning the continuous implementation of the improvements.<sup>2</sup>

The team should not hesitate to seek clarification from Occupational Safety and Health authorities, labour inspectorates, national safety organizations or national OSH professional associations, Employers and Workers organisations.

This is not an exhaustive list of all necessary measures. The team should add to the checklist any additional items they consider appropriate to improve response to COVID-19 at the workplace. Management needs to comply with national legal obligations in establishing their workplace COVID-19 prevention and control plan.

<sup>1</sup> Priorities should be decided according to the greater or lesser probability of a given situation affecting the health of workers, its seriousness and urgency.

<sup>2</sup> Annex I

## ► I. POLICY, PLANNING AND ORGANIZING

**1** Develop and post a statement of management's commitment and responsibilities to reduce the risk of exposure to the virus and transmission of COVID-19 at the workplace in consultation with worker representatives.

**Do you propose Action?**

NO YES PRIORITY

Remarks:

**2** Develop a preparedness and response plan for COVID-19 prevention at workplace, considering all work areas and tasks performed by workers and potential sources of exposure.

**Do you propose Action?**

NO YES PRIORITY

Remarks:

*According to the 2001 ILO Guidelines on occupational safety and health systems (§3.10.3.) **arrangements for emergency prevention, preparedness and response** should be made according to the size and nature of activity of the organization. They should be established in cooperation with external emergency services and other bodies where applicable and: ensure that the necessary information, internal communication and coordination are provided to protect all people in the event of an emergency at the worksite; provide information to, and communication with, the relevant competent authorities and the neighbourhood and emergency response services; address first-aid and medical assistance, firefighting and evacuation of all people at the worksite; and provide relevant information and training to all members of the organization, at all levels, including regular exercises in emergency prevention, preparedness and response procedures.*

**3** Regularly consult your occupational health services, local public health authority or other partners, which may have developed information materials to promote workplace prevention of risk of exposure to the virus and other technical advice.

**Do you propose Action?**

NO YES PRIORITY

Remarks:

**4** Establish a workplace system for providing up-to-date reliable information to workers on the emerging situation on COVID-19, with reference to information released by national or local health authorities.

**Do you propose Action?**

NO YES PRIORITY

Remarks:

**5** Map the hazards of all operations and covering all jobs.

**Do you propose Action?**

NO YES PRIORITY

Remarks:

**6** Integrate safety and health into your contingency and business continuity plan and consider other labour related requirements including where operations must be done with a reduced workforce.

**Do you propose Action?**

NO YES PRIORITY

Remarks:

**7** Promote teleworking for non-critical workers to minimize the spreading of COVID-19 in your workplace.

**Do you propose Action?**

NO YES PRIORITY

Remarks:

## ► II. RISK ASSESSMENT, MANAGEMENT AND COMMUNICATION

**8** If teleworking is not feasible introduce shifts to avoid large concentrations of workers in the facilities.

Do you propose Action?

NO YES PRIORITY

Remarks:

**9** Develop a plan of what to do if a confirmed or suspected case of COVID-19 is identified at the workplace that includes among others reporting, monitoring, and disinfection in line with the national guidelines.

Do you propose Action?

NO YES PRIORITY

Remarks:

**10** In line with national standards, expand access to paid sick leave, sickness benefits, and parental/care leave and inform all workers.

Do you propose Action?

NO YES PRIORITY

Remarks:

**11** Establish a monitoring and evaluation mechanism of the COVID-19 prevention strategies and plans.

Do you propose Action?

NO YES PRIORITY

Remarks:

**12** Assess the risk of potential for interaction with workers, contractors, customers and visitors at the workplace and contamination of work environment, and implement measures (see section III).

Do you propose Action?

NO YES PRIORITY

Remarks:

**13** Train management, workers and their representatives on the adopted measures to prevent risk of exposure to the virus and on how to act in case of COVID-19 infection. For high-risk workers, the training should include the correct use, maintenance and disposal of personal protective equipment (PPE).

Do you propose Action?

NO YES PRIORITY

Remarks:

**14** Inform workers that each has a right to remove from a work situation that poses imminent and serious danger for life or health, in accordance with national law and laid out procedures and immediately inform their immediate supervisor of the situation.

Do you propose Action?

NO YES PRIORITY

Remarks:

**15** Assist delivery workers, truck drivers and other transportation workers to minimize the direct contact with customers and ensure personal hygiene practices such as hand washing and use of hand sanitizers. Consider providing personal protective equipment if workers are in direct contact with clients.

Do you propose Action?

NO YES PRIORITY

Remarks:

**16** Travel should be avoided if not essential. Assess risk of COVID-19 infection when business travels are planned (for all the phases of travel and job assignments).<sup>3</sup>

Do you propose Action?

NO YES PRIORITY

Remarks:

**17** Maintain regular communication with workers and workers' representatives, including over the internet, or when not possible, over the phone.

Do you propose Action?

NO YES PRIORITY

Remarks:

**18** Assist workers to manage any emerging psychosocial risks, new forms of work arrangements, and in the promotion and maintenance of healthy lifestyles including diet, rest and sleep, exercise and social contacts with friends and family.

Do you propose Action?

NO YES PRIORITY

Remarks:

### ► III. PREVENTION AND MITIGATION MEASURES

**19** Organize work in a way to allow for physical distancing of at least 2 meters (6 feet) from other people or another distance as prescribed by the relevant competent authority.

Do you propose Action?

NO YES PRIORITY

Remarks:

**20** Avoid face-to-face meetings, giving preference to phone calls, email or virtual meetings. If you need to organize meetings, organize the space to allow for physical distancing.

Do you propose Action?

NO YES PRIORITY

Remarks:

**21** Provide staff, customers and visitors with ample and easily accessible places where they can wash their hands with soap and water, disinfect hands with sanitizers, and in addition, promote a culture of hand washing.

Do you propose Action?

NO YES PRIORITY

Remarks:

**22** Put sanitizing hand rub dispensers in prominent places around the workplace and make sure these dispensers are regularly refilled.

Do you propose Action?

NO YES PRIORITY

Remarks:

**23** Promote a culture of regular wiping of desks and workstations, doorknobs, telephones, keyboards and working objects with disinfectant and regularly disinfect common areas including rest rooms. Surfaces frequently touched should be cleaned more often. Depending on the operations, consider hiring cleaning and disinfecting services.

Do you propose Action?

NO YES PRIORITY

Remarks:

<sup>3</sup>For more information: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/travel-advice>

**24** Improve exhaust ventilation and provide more clean make-up air to rooms and operations with high risk of exposure to the virus.

Do you propose Action?

NO YES PRIORITY

Remarks:

**25** Promote and communicate good respiratory hygiene at the workplace, such as covering your mouth and nose with your bent elbow or tissue when you cough or sneeze.

Do you propose Action?

NO YES PRIORITY

Remarks:

**26** Ensure social distance at the workplace and remain out of "congregate settings"<sup>4</sup> as much as possible.

Do you propose Action?

NO YES PRIORITY

Remarks:

**27** Provide appropriate facemasks and make available paper tissues at worksites, for use by those who develop a runny nose or cough, along with closed bins for hygienically disposing of them.

Do you propose Action?

NO YES PRIORITY

Remarks:

## ▶ IV. ARRANGEMENTS FOR SUSPECTED AND CONFIRMED COVID-19 CASES

**28** In line with the local authorities guidance, encourage your workers with suspected symptoms of COVID-19 not to come to the workplace and to follow the guidance of the local authorities.

Do you propose Action?

NO YES PRIORITY

Remarks:

**29** Advise workers to call their healthcare provider or the local public health department when they have serious health condition including trouble breathing, giving them details of their recent travel and symptoms.

Do you propose Action?

NO YES PRIORITY

Remarks:

**30** Arrange for isolation of any person who develops COVID-19 symptoms at the work site, while awaiting transfer to an appropriate health facility. Arrange for disinfection of the work site and health surveillance of persons who have close contact.

Do you propose Action?

NO YES PRIORITY

Remarks:

<sup>4</sup>Places where people meet and gather, like cafeterias.

**▶ ANNEX I**

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**ACTION PLAN & FOLLOW-UP FORM**

**1. Action Planning**

Department/Section/Operation:

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Date: \_\_\_\_\_

Group: \_\_\_\_\_

Technical area:

- Policy, planning and organizing
- Risk assessment, management and communication
- Prevention and mitigation measures
- Arrangement for suspected and confirmed covid-19 cases
- Others \_\_\_\_\_

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Description of expected improvement

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Location

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Description

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Approximate date of completion

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• Separate sheets should be used for the improvements of different technical areas.

**2. Action Follow-up: (Information about the improvement/s done)**

Date: \_\_\_\_\_

Group: \_\_\_\_\_

Dept/Section/Operation: \_\_\_\_\_

Title of the improvement done/in progress:

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Technical area:

- Policy, planning and organizing
- Risk assessment, management and communication
- Prevention and mitigation measures
- Arrangement for suspected and confirmed covid-19 cases
- Others \_\_\_\_\_

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**Date of implementation of the improvement:**

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**Name of the responsible person/s:**

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**Duration necessary for completing the improvement:** \_\_\_\_\_

**Skills and techniques necessary for the implementation:**

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**Improvement possibilities:**

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**Strong points for making the improvement:**

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**Necessary support for implementing the improvement (including from OSH authority/ies):**

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