NSSA COVID-19 GUIDELINES





GUIDELINES FOR PROTECTION OF WORKERS IN THE WORKPLACE FROM COVID-19

1. Introduction

Coronavirus Disease 2019 (Covid -19) is a respiratory disease caused by SARS-CoV-2 virus which is a new strain of coronavirus. The cases of COVID-19 were first identified in Wuhan China in December 2019 and the virus was first isolated in January 2020. The WHO declared COVID-19 outbreak a pandemic on 11 March 2020. As of 26 March 2020, there were 465,915 confirmed cases with 21,013 deaths. On the same day, Zimbabwe had 7 confirmed cases and one death.

The fight against COVID-19 is everyone's responsibility including employers and workers. The workplace is an important place to fight the disease where initiatives should be put in place to reduce exposure to the virus and stopping the spread of the disease. It is, therefore, important for workplaces to institute comprehensive management systems which respect the tenets of social dialogue between workers and employers to control the disease.

The employer is required to provide and maintain as far as reasonably practicable a working environment that is safe and without risks to the employees. A comprehensive plan to mitigate the effects of COVID-19 should be put in place and shared with all employees. For employers with emergency preparedness plans, these can be adapted taking into consideration the characteristics of the virus and evolution of the pandemic, which has been observed so far.

Employers who have not prepared for pandemic events are strongly advised to prepare themselves and their workers as far in advance as possible of potentially worsening outbreak conditions.

This guideline places importance on the basic principles of occupational safety and health which are Hazard Identification and Risk Assessment and the Hierarchy of Control for occupational hazards.

The guidelines aim to assist employers to protect the health of their workers and prevent the spread of the virus by:

- Ensuring that every worker has adequate and accurate information on COVID-19;
- · Implementing measures to prevent the spread of COVID-19;
- Guiding what to if someone with suspected or confirmed COVID-19 has been in the workplace ensuring business continuity throughout the pandemic.

THIS GUIDELINE IS FOR NON-MEDICAL WORKPLACES.



2. Information Dissemination

The employer should keep everyone updated on actions being taken to reduce the risk of exposure to COVID-19 in the workplace. In addition, they should ensure that every worker has adequate and accurate information on COVID-19. Basic information about the nature of the virus; signs and symptoms of the disease; and how to avoid contracting or spreading the virus should be given to all workers. Information given to workers must be scientific and in keeping with the national (Ministry of Health and Child Care and NSSA) and international Guidelines (World Health Organisation).

Emphasis should be made on social/physical distancing, hand washing, coughing etiquette and avoiding touching the eyes, nose and mouth.

3. Hazard Identification and Risk Assessment

Risk assessment is central to the plan any employer is going to institute. The hazard is a biological agent SARS-CoV-2. The virus is spread from person to person via droplet transmission and through contact with contaminated surfaces. The virus survives on different surfaces for different lengths of time. Different workplaces and work stations have different risk of exposure. The risk of exposure varies from very high to low.

- Low risk: these are jobs that do not require contact. There is no contact with known suspected or confirmed cases. These jobs do not require being within 2 metres of general public members
- Medium risk: these jobs require frequent and close contact within 2 metres. This category includes people in frequent contact with travelers from areas with high numbers of COVID-19 cases for example at ports of entry, high-density workplaces, schools, consulting offices and retail shops;
- High risk: Jobs with high potential for exposure to known or suspected cases these include health workers that do not perform aerosol producing procedures. It also includes hospital porters, ambulance technicians and drivers:
- Very high risk: Jobs with high potential for exposure to known or suspected cases performing special medical, laboratory and postmortem procedures. Those performing aerosol producing procedures are at very high risk.

It is important that workplaces also recognise the psychosocial effect of the pandemic in planning their response. It is also important to include in the risk assessment the non-occupational risk factors at home and in community settings.

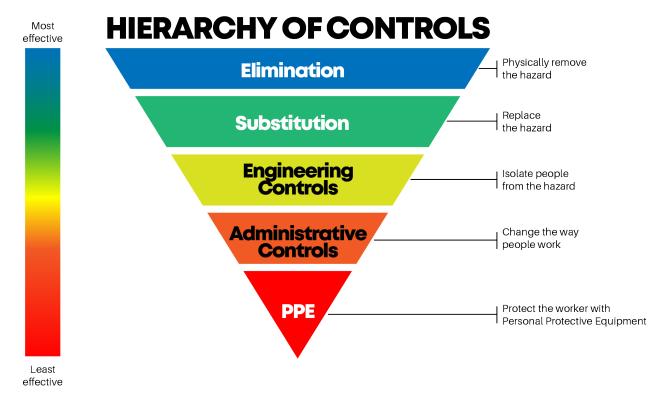






4. Hazard Control

Using the best OSH practice, the control measures to prevent exposure to SARS-CoV-2 should be explored.



The SARS-CoV-2 cannot be eliminated or substituted as a hazard. There are, however, engineering, administrative and personal protective equipment which can be used to reduce the risk of exposure.

5. Measures to Prevent the Spread of COVID-19

There is a need to develop a contingency and business continuity plan that allows the business to run with a limited number of employees. It is important to decongest the workplace thus promoting social distancing.

Adequate plans to address sick leave and the mental health and social consequences of Covid-19 in the community should be made. Absenteeism may increase as workers are encouraged to work from home or take caregiving roles for sick family members and minors who may be affected by school closures. Companies need to make arrangements with Occupational Medical doctors during this time for advise in case of emergencies or sickness leave.

The employer should:

- Place posters that encourage staying home when sick, cough and sneeze etiquette, and hand hygiene at the entrance to the workplace and in other areas where they will be seen;
- Provide workers with tissues and waste bins lined with a plastic bag so that they can be emptied without contacting the contents;
- Instruct workers to clean their hands frequently, using soap and water for at least 20 seconds or with an alcohol-based hand sanitiser that contains at least 60-95% alcohol;
- · Discourage workers from using other workers phones, desks, offices and other work tools and equipment;
- Discourage workers from having non-business visitors;
- Provide soap and water and alcohol-based hand rubs in the workplace in multiple locations and in common areas to encourage hand hygiene;
- · Continue routine environmental cleaning;



- Brief the workers, contractors and customers that anyone with even a mild cough or low-grade fever (37.3 C or more) needs to stay at home. They should also stay home (or work from home) if they have had to take simple medications, such as paracetamol/acetaminophen, ibuprofen or aspirin, which may mask symptoms of infection;
- Offer temperature screening for all workers at the entrance to the workplace.

Any workers who develop flu-like symptoms (i.e. cough, shortness of breath, fever) should go home immediately and contact the public health service.

The employer should apply the standard hierarchy of control and the following can be considered:

1. Engineering Controls

- · Installing high-efficiency air filters;
- · Increasing ventilation rates;
- · Installing physical barriers such as clear plastic sneeze guards;
- · Installing a drive-through window for customer service;
- Special negative pressure ventilation in some settings.

2. Administrative Controls

- · Encourage sick workers to stay at home
- Minimise contact among workers and clients by replacing face to face meetings with virtual communications, if feasible:
- Establish shifts that reduce the total number of employees on-site at a given time;
- · Discontinue nonessential travel:
- · Education and training of workers on risk factors and prevention;
- Training workers who need to use PPE on how to put it on, use it and take it off correctly.

3. Personal Protective Equipment (PPE)

Recommendations for PPE specific to occupations or job tasks may change depending on geographic location, updated risk assessments for workers and information on PPE effectiveness.

All types of PPE must be:

- · Selected based upon the hazard to the worker;
- · Properly fitted and periodically refitted as applicable;
- · Consistently and properly worn;
- · Regularly inspected, maintained and replaced, as necessary;
- · Properly removed, cleaned and stored or disposed of as applicable;

Gloves, gowns, aprons, face shields/goggles, boots and respirators may be used as PPE.

On the use of masks and respirators for COVID-19 prevention refer to the Ministry of Health and Child Care as well as the WHO guidelines.

6. Routine Cleaning

Routine cleaning of all workplaces should be done more frequently if possible. Special attention should be taken for commonly-used places such as doorknobs, service counters and remote controls and other control panels, which should be cleaned regularly preferable with disposable wipes.



7. Steps to take if Someone Suspected or Confirmed to have COVID-19 has been in the Workplace

Should someone in the workplace fall ill, have a temperature of more than 37.3 or have any reason to suspect that they have come into contact with COVID-19, they must be removed from other workers into an isolated area which is ventilated like a closed room with an opened window. The employer must seek advice from a Medical Practitioner or contact the local Covid Response Team. Should the final decision be to send the suspected person home, they should be given full details, self-quarantine, self-monitoring and indication for seeking further medical treatment and contacting the Response Team.

When staff members come into contact with a confirmed case of COVID-19, they are not considered cases but contacts and if they are feeling well, they are very unlikely to have spread the infection to others. The following should be done for such workers:

- They should self-isolate at home for 14 days from the last time they had contact with the confirmed case. They will be actively followed up by the local Response Team
- If they develop new symptoms, or their existing symptoms worsen within the 14-day observation period, they should call the local COVID-19 Response Team for reassessment
- If they are unwell at any time within their 14-day observation period and they test positive for COVID-19, they will become a confirmed case and will be treated for the infection. If testing is not available, but the symptoms are consistent with COVID-19, they may nonetheless be considered as a confirmed case.
- Staff who have not had close contact with the original confirmed case do not need to take any precautions other than monitoring their health for symptoms and can continue to attend work.

A confirmed case of COVID-19 in the workplace will cause anxiety among co-workers and some may become stressed. Clear communication is important, directing workers to reliable sources of information about COVID-19. Managers should be supportive and understanding and as far as possible flexible on work arrangements.

8.Cleaning offices and public spaces where there are suspected or confirmed cases of COVID-19

Coronavirus symptoms are similar to a flu-like illness and include dry cough, sore throat, fever, tiredness or shortness of breath. Once symptomatic, all surfaces that the person has come into contact with must be cleaned including:

- · all surfaces and objects which are visibly contaminated with body fluids;
- · all potentially contaminated high-contact areas such as toilets, door handles, telephones.

Public areas where a symptomatic individual has passed through and spent minimal time in (such as corridors) but which are not visibly contaminated with body fluids do not need to be specially cleaned and disinfected. If a person becomes ill in a shared space, these should be cleaned using disposable cloths and the usual detergents. The Local Response Team can assist with special decontamination procedures. Precautionary measures should be taken to protect cleaners.

PERSISTENCE OF COVID-19 ON SURFACES





All waste that has been in contact with the individual, including used tissues, and masks if used, should be put in a plastic rubbish bag and tied when full. The plastic bag should then be placed in a second bin bag and tied. It should be put in a safe place and marked for storage until the result is available. If the individual tests negative, this can be put in the normal waste. Should the individual test positive, you will be instructed what to do with the waste by public health authorities.

9. Occupational Health Services in the COVID-19 era

Health and safety legislation and best practice require that employers always take all practicable steps to mitigate risk and protect workers from workplace hazards. All employers need to consider how best to decrease the spread of COVID-19 among employees whilst maintaining healthy business operations and a healthy work environment. Occupational health services departments are the industry's drivers in maintaining and promoting the health of the worker. If the companies are operational, occupational health services departments must find a safe way of rendering their support to the industry.

Certain occupational health services practices put the workers and health workers at risk of contracting COVID-19. During this COVID-19 pandemic, routine spirometry and breathalyser tests should be suspended together with all other aerosol producing procedures. The other medical examinations which involve breaching the social distance rule should be done only on strict per need basis. Additional sanitisation should be used in such cases.

Should a medical examination be deemed necessary, the workers should be screened for the risk of COVID-19 before examination including a temperature check and appropriate history taking. The examiner should be provided with adequate and appropriate PPE.

10. Further OSH guidance

Further general advice on work place occupational safety and health measures and responses to COVID-19 to employers and workers will be made available through, circular instructions and the NSSA website. For specific queries kindly contact your nearest NSSA office.





ALIFElong Promise

For more information







