

INTERIM ADVICE FOR IFC CLIENTS ON PREVENTING AND MANAGING HEALTH RISKS OF COVID-19 IN THE WORKPLACE

The COVID-19 pandemic is a human tragedy that presents many challenges to employers globally, including IFC clients, who provide key products and services in many countries as well as jobs and livelihoods for workers and their families. Preventing the spread of COVID-19 in the workplace and providing safe working conditions for those still working is of paramount importance for all companies and for society in general.

OBJECTIVE

The main objective of this Interim Advice document is to collate and provide publicly available advice from internationally recognized sources to help IFC clients rapidly identify measures for preventing and managing outbreaks of COVID-19 in the workplace and for responding to community COVID-19 infection. Sources for this document - and additional information - are listed in Annex 1.

This document is not intended to be exhaustive, and it provides generic rather than sector-specific advice. Companies in high-risk sectors should refer to sector-specific procedures and standards. See the full disclaimer at the end of the paper.

This document should be read in conjunction with the following IFC COVID-19 advice documents:

- Interim Advice for IFC Clients on Supporting Workers in the Context of COVID-19, which provides advice on how to support workers during the COVID-19 crisis and how to consider options to retrenchment.
- Interim Advice for IFC Clients on developing a COVID-19 Emergency Preparedness & Response Plan, which is aimed at helping companies identify risks, allocate responsibilities, and plan to effectively respond to COVID-19-related challenges.

PREVENTION AND RESPONSE

Each company is advised to appoint a dedicated team with responsibilities to identify and implement actions that can mitigate the effects of COVID-19 on the company and community. Each section below suggests practical examples on actions the company should take.

Provide information on COVID-19^(1, 3, 16, 20)

Previous outbreaks of diseases have shown that information dissemination and training are an effective way to reduce the risk for both the company and the general public.

The company is advised to develop and provide information on good practices for preventing COVID-19 transmission, particularly observing recommendations on social distancing, and for training staff to recognize the symptoms of COVID-19 and understand their required response, following suggestions provided within this document.

COVID-19 COMMON SYMPTOMS^(11, 22)

Fever, tiredness, difficulty breathing, dry cough, chills, repeated shaking with chills, muscle pain, headache, sore throat, and new loss of taste or smell. Some patients may have nasal congestion, runny nose, or diarrhea. Symptoms may appear two to 14 days after exposure to the virus.

There should be no discrimination against or stigmatization of persons affected by COVID-19 or their families.

The company should identify focal points and communication channels (for example, SMS and email) within the company to address workers' concerns on an ongoing basis, and ensure that such channels are adequately resourced (for example, 24-hour staffing of the emergency response call line).

Ask sick or potentially infected workers to stay at, or work from, home.^(7, 16, 20)

To prevent potentially infected staff from entering the

workplace and infecting co-workers, the company should ask workers to stay away from work in cases where they exhibit any COVID-19 symptoms or have been in close contact with a confirmed COVID-19 patient during the previous 14 days.¹⁶ Workers who do not feel well should seek immediate medical advice. An employee who works while evidencing mild COVID-19 symptoms can risk spreading this infectious disease to others.

The company should review its human resources policies related to sick leave and consider changes, which may be temporary, to ensure that potentially sick staff do not feel pressured to attend work, thereby risking transmitting the virus to the rest of the workforce.

A short questionnaire could be used. Workers should only report to work if they answer “no” to all the questions. The following is an example:

- Have you, in the last two weeks, been in close contact with a person who has COVID-19?
- Have you, in the last two weeks, been in a country/region with a high number of cases of COVID-19?
- Do you have a fever?
- Have you used medications such as paracetamol or aspirin to suppress fever in the last 24 hours?
- Are you coughing (even mildly)?
- Do you currently experience shortness of breath?

Ensure, where possible, that staff have adequate access to medical consultation, including over the telephone, in case they encounter symptoms.

Consider, for all functions, how work can be adapted to make home-based work practical. Facilitate this as much as feasible.

Cough hygiene^(7, 16, 19)

The most common way to spread the virus is by infected persons coughing and sneezing. Workers should be instructed to follow the cough etiquette outlined below to reduce these risks:

- Cover the mouth and nose with a tissue when coughing or sneezing, and dispose of the used tissue in a wastebasket.
- When no tissue is available, cough or sneeze into the upper sleeve or elbow, not into the hands.
- Clean hands after coughing or sneezing, preferably by thorough water-soap handwashing, following the recommendations of health organizations. If soap and water are not available, use a hand sanitizing gel.

The company should ensure that the workforce is well informed on the risks related to coughing and sneezing and cough hygiene measures. It should provide enough water-soap handwashing facilities in all workplaces, and provide disposable

tissues and garbage bins. It should also encourage people to speak up if they encounter nonconforming behavior.

Social distancing^(16, 20)

To prevent person-to-person infection, it is important to minimize direct contact as much as possible. Where people are regularly working or meeting, a safe distance of 2 meters (six feet) between people should be observed.

The company should identify all places where people normally work closer than 2 meters from each other. Adjust workplace design and work processes to minimize this likelihood as much as possible. Some examples to be considered include:

- For stationary workplaces, such as offices, garment factories, packing lines, quality control (QC) rooms, meeting rooms, and so forth, indicate safe distances by, for example, placement of chairs or markings on the floor. Where 2-meter spacing cannot be achieved, consider expanding the workplace into previously vacant areas, or placing (plexiglass) dividers between workplaces. Regularly clean the dividers and the workspace (as described in the next section below).
- Place markers on the floor, indicating safe distances, where people commonly wait, for example in elevator lobbies, factory entrance control areas, canteens, and so forth.
- Provide and use local video conferencing to replace meetings, such as shift handover, toolbox talks, weekly meetings, and so forth.
- Inform people about the hazards of close contacts, including with direct coworkers, and promote alternative behaviors, such as maintaining safe distances and using alternatives for handshakes.
- Postpone nonessential social events, especially for groups larger than 10 persons or as indicated by relevant authorities.
- Reduce national and international travel (for example field work and visits between factories in different regions) to only the absolute minimum during the Pandemic. Where travel is essential observe relevant travel restrictions. Unless travel is medical evacuation, ensure that persons who travel do not have any COVID-19 symptoms and have not been in contact with COVID-19 patients within the period recommended by relevant authorities (Note: the World Health Organization (WHO) recommends the previous 14-days).²²
- Consider establishing alternating work days or adding extra shifts to reduce the total number of employees in a facility at a given time, allowing them to maintain the recommended distance from each other, while maintaining a full onsite work week.

Hand sanitation^(7, 16, 20)

Frequent water-soap handwashing is critical in preventing infection in the workforce. WHO recommends rinsing and washing hands with soap for at least 20 seconds, rinsing again, and then using paper, such as a paper towel, when turning off the faucet.

The company should promote frequent and thorough water-soap hand washing and provide enough places for employees to wash their hands. If soap and running water are not immediately available, provide alcohol-based hand rubs containing at least 60% alcohol. Ensure that these facilities are sufficient in number and are available close to the work area.

Only use disposable (paper) towels or air dryers. Do not use shared hand towels.

Cleaning and disinfecting⁽⁷⁾

To prevent the spread of the virus, frequently – and at least daily - clean touched surfaces, such as tables, doorknobs, handrails, light switches, appliances, countertops, handles, desks, phones, keyboards, toilets, faucets, sinks, and so forth. Use the cleaning agents that are routinely used in these areas and follow the directions on the labels. For multiuse equipment, such as a retailer's shopping carts or baskets, clean after every use.

The company should ensure that enough cleaning staff are available to clean these areas and should check to make sure that this is done.

Instruct staff to clean their work areas and control panels at the end of each shift. Provide equipment and instructions on how to do this.

Provide disposable wipes so that commonly-used surfaces (for example, doorknobs, keyboards, remote controls, and desks) can be wiped down by employees before and after each use.

Provide suitable personal protective equipment (PPE) (see paragraph below) to personnel performing the cleaning activities. Follow the manufacturers' instructions for use of cleaning and disinfection products.

Food preparation⁽⁸⁾

Kitchen staff should help ensure that food served to workers is safe, while also applying the company's food safety measures. Kitchen staff should:

- Strictly not report to work if they have symptoms such as fever, cough, shortness of breath, or have been in close contact with a confirmed COVID-19 patient.¹⁰
- Be trained in common food safety practices including changing clothes and washing hands each time before entering the kitchen area. Kitchen clothes should not be used outside the kitchen. A changing room with a handwashing facility and lockers (gender separated when possible) should be available. Work clothes should be washed at a minimum of 72°C daily.
- Not be involved in any cleaning or disinfection activities outside the food preparation and dining areas.
- Are required to wash hands regularly.
- Prevent cross contamination caused by people sharing the same serving spoons. This can be achieved by avoiding buffet-style food presentation. Instead serve food as much as possible by the kitchen staff or present food on individual serving plates.
- Workers should wash their hands with soap prior to entering the canteen area.

Air quality control measures⁽¹⁶⁾

Increasing ventilation or installing high-efficiency air filters will help remove any viruses in the area and can reduce the risk of infection.

Consider additional air quality control measures for areas where close personal proximity cannot be prevented, such as control rooms, elevators, waiting rooms, and so forth.

Personal Protective Equipment⁽²¹⁾

People, such as healthcare workers, who may come into contact with (possibly) infected persons or with infected material should use (disposable) gloves and breathing protection with a minimum rating of N95 (U.S. standard) or P2 (EU standard) or similar. See also the reference in Annex 1.

Workers' accommodations^(7, 8, 16, 20)

Workers accommodations are areas where typically many people stay close to each other for a long period, posing elevated risks of transmission.

In such cases, follow the same principles discussed above and also consider one or more of the following additional measures:

- Prevent infected persons from entering workers' accommodations areas, and if applicable or necessary, quarantine these persons per local regulations and/or recommendations from relevant international organizations.
- Promote, respect, and enforce the occupancy density limits in workers' accommodations.

- In case new staff is arriving from countries or areas with a high risk of COVID-19, ensure that these persons are adequately quarantined per local regulations and/or recommendations from relevant international organizations.
- Wherever possible, the housing coordinator or the person(s) in charge of managing the accommodations should coordinate taking daily recordings of residents' temperatures. Note: Use a thermometer that prevents cross contamination, and that protects the person taking residents' temperatures from possible infection (see above).
- When accommodations contain people at high risk of developing fatal complications from COVID-19, consider providing them with separate housing. In this context persons aged 65 years or older, or those with high blood pressure, heart disease, lung disease, cancer, or diabetes, are considered at high risk.²²
- Ensure that all workers have access to medical professionals. Remove any language barriers.
- Handwashing soap should be made available for the workers in all bathrooms. Everyone should follow a strict cleaning and housekeeping routine daily.
- Doorknobs, faucets, TV sets / media equipment, kitchen equipment, controls, buttons, and any other object in common areas that are regularly touched must be cleaned several times per day. Frequency is to be determined by each facility.
- Common surfaces, including ones in vehicles transporting workers from their accommodations to the workplace, counters, floors, and walls, should be treated as potentially contaminated and be cleaned regularly as described above.
- Bed linen should be washed at 72°C at least once per week.
- Clean/replace AC filters at least monthly.
- Minimize the number of people in a room and increase, as far as possible, the distance between beds to over 2 meters.
- Maximize natural or forced ventilation within the limitations of comfort, security, and privacy. Consider changes in the facility to allow for ventilation during working hours.
- Allow or prepare additional accommodations for workers who are stranded due to travel restrictions and who cannot be repatriated.

Health care in remote areas⁽²³⁾

Primary health care should always be provided by qualified medical professionals in accordance with local regulations. For persons living in company accommodations with mild symptoms that do not require hospitalization, ongoing care during illness will need to be provided.

Such patients should be provided with good care in an isolated area under medical supervision. Follow the guidance on home care for COVID-19 patients provided by the WHO or other relevant authority. WHO guidance can be found at <https://apps.who.int/iris/handle/10665/331133>.

When people are declared healthy⁹ and return to the workplace, ensure that enough guidance is provided to prevent discrimination or other socially undesirable behavior.

ANNEX 1. SOURCES AND USEFUL LINKS:

- 1: Advisory, Conciliation and Arbitration Service ACAS UK (2020) Coronavirus COVID-19: advice for employers and employees, <https://www.acas.org.uk/coronavirus>
- 2: Canadian Union of Public Employees (2020) General occupational guidelines for COVID-19, <https://cupe.ca/general-occupational-guidelines-covid-19>
- 3: Commonwealth Development Corporation -CDC- Group (2020) COVID-19 Guidance for Employers, <https://assets.cdcgroup.com/wp-content/uploads/2020/03/23093424/COVID-19-CDC-ESG-Guidance.pdf>
- 4: Employment New Zealand (2020) Workplace response to coronavirus (COVID-19), <https://www.employment.govt.nz/about/news-and-updates/workplace-response-coronavirus-covid-19/#guidance>
- 5: EU CDC (March 2020) Coronavirus disease (COVID-19) outbreak and workplace safety and health, <https://osha.europa.eu/en/highlights/coronavirus-disease-covid-19-outbreak-and-workplace-safety-and-health>
- 6: EU CDC COVID-19 page, <https://www.ecdc.europa.eu/en/novel-coronavirus-china>
- 7: EU OSHA COVID guidance for the workplace, https://oshwiki.eu/wiki/COVID-19:_guidance_for_the_workplace#See
- 8: IPIECA (2016) Infectious disease outbreak management in the Oil & Gas industry. This document contains posters showing effective water-soap handwashing and sanitizing techniques and cough etiquette. <http://www.ipieca.org/resources/good-practice/infectious-disease-outbreak-management-a-programme-manual-for-the-oil-and-gas-industry/>
- 9: UK Government (2020) stay at home guidance for COVID-19, <https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection>
- 10: United Nations – COVID-19 page: <https://www.un.org/coronavirus>
- 11: US CDC – COVID-19 page, https://www.cdc.gov/coronavirus/2019-ncov/index.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2Fnovel-coronavirus-2019.html
- 12: US CDC (2020) Interim Guidance for Businesses and Employers to Plan and Respond to Coronavirus Disease 2019 (COVID-19), <https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html>
- 13: US CDC (2003) Guidelines for Environmental Infection Control in Health-Care Facilities, <https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5210a1.htm>
- 14: US Department of Labor (2020) Coronavirus Resources, <https://www.dol.gov/coronavirus>
- 15: US National Institute of Health (2020) Coronavirus (COVID-19). <https://www.nih.gov/health-information/coronavirus> (there is Interim Guidance for Businesses and Employers to Plan and Respond to Coronavirus Disease 2019 (COVID-19))
- 16: US OSHA (2020) Preparing Workplace for COVID-19, <https://www.osha.gov/Publications/OSHA3990.pdf>
- 17: US OSHA (2020) Infectious Diseases Website, https://www.osha.gov/SLTC/healthcarefacilities/infectious_diseases.html#cdc_guidelines
- 18: US OSHA (2020) Pandemic Influenza Guidelines, <https://www.osha.gov/SLTC/pandemicinfluenza/index.html>

- 19: US Small Business Administration (2020) Coronavirus (COVID-19): Small Business Guidance & Loan Resources. <https://www.sba.gov/page/coronavirus-covid-19-small-business-guidance-loan-resources>
- 20: WHO getting your workplace ready for COVID-19, <https://www.who.int/docs/default-source/coronaviruse/getting-workplace-ready-for-covid-19.pdf>
- 21: WHO (2020) COVID-19 advice for the public: When and how to use masks, <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/when-and-how-to-use-masks>
- 22: WHO COVID-19 page: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019>
- 23: WHO (2020) Home care for patients with suspected novel coronavirus (COVID-19) infection presenting with mild symptoms, and management of their contacts: interim guidance, 04 February 2020, <https://apps.who.int/iris/handle/10665/331133>
- 24: Workplace Health and Safety Electrical Safety Office Workers' Compensation Regulator – Government of Queensland, Australia (2020) Coronavirus (COVID-19) workplace risk management, <https://www.worksafe.qld.gov.au/news/2020/coronavirus-covid-19-workplace-risk-management>

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Disclaimer: This document contains advice intended to assist IFC clients in responding to the COVID-19 pandemic. Clients should also refer to COVID-19-related information and recommendations from the World Health Organization (WHO) and other specialized international health and disease control organizations, as well as information from local, regional and national governmental health authorities, noting that such recommendations are subject to change. Relevant information may also be available from international organizations within clients' business sectors. This document is not intended to be exhaustive, and it provides generic and general information rather than sector-specific guidance. Clients in high risk sectors should refer to sector-specific procedures and standards.

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