

# Coronavirus (COVID-19) Occupational Health, Safety & Wellbeing (OHS&W) Advice

## 1. Maintaining Health and Safety Standards

In these unprecedented times, when there are only essential staff at work, it is important that health and safety standards are maintained especially for the 5 elements listed below:

- Risk Assessments
- Information
- Instruction
- Training
- Supervision

Risk assessments (RAs) are the foundation of ensuring and maintaining a healthy and safety workplace. Existing RAs should be reviewed to ensure that they include any new risks relating to Covid-19 and the risks any new/inexperienced workers may bring. The review should be undertaken by competent persons and the local Trade Union health and safety rep consulted BEFORE the findings are communicated to staff.

In terms of public health, social distancing should be put in place before all other protective measures which should be considered in light of the hierarchy of controls.

- Elimination;
- Substitution;
- Engineering controls;
- Signage/warnings and/or administrative controls;
- Personal protective equipment (PPE).

PPE is the last in the hierarchy and should never be considered as the first, or only, solution. Unless delivering personal/medical care - gloves and masks are not required. Social distancing, regular handwashing/use of 60% alcohol hand gel and reminders not to touch your face should be followed. Supervisors should ensure that this advice is being followed. The HSE now has emergency enforcement powers to take enforcement action on organisations where social distancing is not being maintained.

Additional risk assessments will also be required where staff are lone working – existing controls for lone workers (such as phoning into the office) may have to be reviewed, recorded and communicated.

Prior to undertaking tasks, staff should be briefed with local and specific information and instructions – even if they are workers for another Council workplace/site, in case things are done differently where they have previously worked. This should include information on what to do in an emergency, and how to report accidents. We have had to suspend the accident reporting line for the time being, so staff should be informed of local arrangements for reporting accidents.

Competent supervision is key. Supervisors should:

- be competent to supervise the workers, and know the critical safety aspects of the job;
- have access to sufficient resources (including PPE) to deal with health and safety issues as part of 'getting the job done';
- be included in assessing risks and managing the effects of any changes;
- identify any training needs required for the job to be done safely;
- have a positive attitude to health and safety - they should lead by example and encourage safe systems of work;
- make sure that a good example is being set for other workers;
- involve workers and their TU/staff reps in the development of risk assessments and discussions about changes in the job.

All the above also applies to volunteers – we owe at least the same duty of care to them as we do to our other staff.

Health and safety training must be delivered by a competent person. The OHSW team can continue to provide essential training, as required, whilst still respecting social distancing requirements.

## **2. Accident/Incident Reporting**

Cases of Covid-19 which can be attributable to work processes/environments must be reported to the Health and Safety Executive (HSE).

It should be noted that if guidance around risk assessments, working from home, social distancing, cleaning and good personal hygiene are followed, along with the HR advice to stay at home if feeling unwell, then the overall risk will be low. Please feel free to contact the health and safety team if you need any assistance in this.

You must only make a report under RIDDOR (The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013) when:

- an unintended incident at work has led to someone's possible or actual exposure to coronavirus. This must be reported as a dangerous occurrence.
- a worker has been diagnosed as having COVID 19 and there is reasonable evidence that it was caused by exposure at work. This must be reported as a case of disease.

### **Dangerous occurrences**

If something happens at work which results in (or could result in) the Release or escape of coronavirus you must report this as a dangerous occurrence. An example of a dangerous occurrence would be a lab worker accidentally smashing a glass vial containing coronavirus, leading to people being exposed.

- Report a dangerous occurrence – click [here](#)

### **Cases of disease: exposure to a biological agent**

If there is reasonable evidence that someone diagnosed with COVID-19 was likely exposed because of their work, then you must report this as an exposure to a biological agent using the case of disease report. An example of a work-related exposure to coronavirus would be a health care professional who is diagnosed with COVID-19 after treating patients with COVID-19.

- Report a case of disease – click [here](#)

A copy of the e-form (see link below) must be saved and emailed to:

[healthsafety.andwellbeing@highland.gov.uk](mailto:healthsafety.andwellbeing@highland.gov.uk).

The team will ensure that a copy is shared with the Trade Union health and safety rep.

## **3. Building Security and Safety**

Where buildings are still open, but there is a reduced number of people working there, including staff who have relocated there temporarily, it is very important that the following advice is followed. The Responsible Premises Officer (RPO) may not be available, so other managers should take on this responsibility.

### **Sign in arrangements**

A central sign-in area should be set up for staff to sign in/out (bearing in mind the advice not to share pens).

### **Fire safety**

A senior member of staff should be responsible for liaising with the Scottish Fires and Rescue Services (SFRS) in the event of the fire alarm being activated. Where there is a fire panel, they should be able to interpret it. The sign in sheet should be used to ascertain that everyone has safely evacuated (there may not be enough fire marshals).

Senior management should be aware of whether the alarm is linked to a monitoring station/SFRS or whether a phone call to the SFRS is required. Conversely, a phone call will be required in the case of a false alarm activation.

A quick brief should be constructed on how to deal with fire alarm activations and how to reset the fire alarm system, (codes or keys etc) to allow for resuming operations after fire brigade

investigation as they will not reset alarm fully.) If the RPO is not available, the Maintenance Officer or property Team may be able to assist. All staff should make themselves aware of available emergency exits and know at least 2 escape routes from where they are.

### **Good housekeeping**

All staff are responsible for ensuring that:

- doors and windows are closed and secure before they leave,
- rubbish is not left to accumulate,
- fire doors are not wedged open,
- electrical equipment is switched off at the end of the day, where possible.

(Separate Fire Safety advice has been issued to Hubs.)

## **4. Occupational Health**

### **Attendance management referrals**

Iqarus, the occupational health provider, is still accepting referrals but appointments will be by telephone call only. This is to ensure that advice can still be given, while staying safe. The processes for referral requests, confirmation of appointments and issue of medical reports remain the same, currently. Physiotherapy by telephone is still available (Tuesdays and Thursdays)

### **Health surveillance**

This statutory service will continue, with some amendments. Where health surveillance appointments are due, paper screening will be the normal process. Managers/team leaders should contact occupational health ([Highlandcouncil.gbr@iqarus.com](mailto:Highlandcouncil.gbr@iqarus.com)) and they will be sent the necessary paperwork which should then be completed by individual staff and returned to occupational health. It is understandable that not all staff will be available at the same time, but by issuing the paperwork we will not get into the situation where we have a backlog and maybe fall foul of the HSE.

The HSE is advocating this approach. HSE has advised occupational staff that the above approach is the correct one. Where problems are identified from the paper review, the HSE is advocating telephone reviews at which a judgement will be made on whether to see individuals face to face and, if so, how to do so safely. This will be a medical decision.

We are currently sourcing alternative arrangements for HGV/PSV driver medicals. Managers should contact the health and safety team at [Healthsafety.andwellbeing@highland.gov.uk](mailto:Healthsafety.andwellbeing@highland.gov.uk) if staff fall into this category and require D4 medicals in the next two months. Staff who are self-isolating can defer this medical until they are able to return to work.