Ministry of Foreign Affairs of the Netherlands

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OCCUPATIONAL HEALTH AND SAFETY TOOLKIT – COVID19

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The Programme is funded by the Dutch Ministry of Foreign Affairs, and aims to accelerate economic development in Iraq.

SPARK provides access to higher education and supports entrepreneurship development in fragile states so that young, ambitious people can lead their societies into stability and prosperity.

SPARK provides a variety of full-service business and entrepreneurship programmes in Europe, the Middle East and Africa. We believe that sustainable, economic growth is essential for the alleviation of poverty. By offering private-sector development services to young people in conflict-affected regions, we believe that the potential for further conflict is significantly reduced.

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THE STATION

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Preamble

In this period of the COVID19 epidemic, it is crucial, more than ever, for companies to adopt preventive measures protecting the health of their employees and to encourage them to watch over their health, safety and that of their entourage. Controlling occupational risks is a greater challenge for SMEs given their more limited human and financial resources than those of large companies.

This tool aims firstly to highlight the importance of integrating the management of occupational risks within an SME at all levels of its activity. A general approach to risk assessment and the implementation of a strategy for the continuous improvement of working conditions within an SME is then detailed.

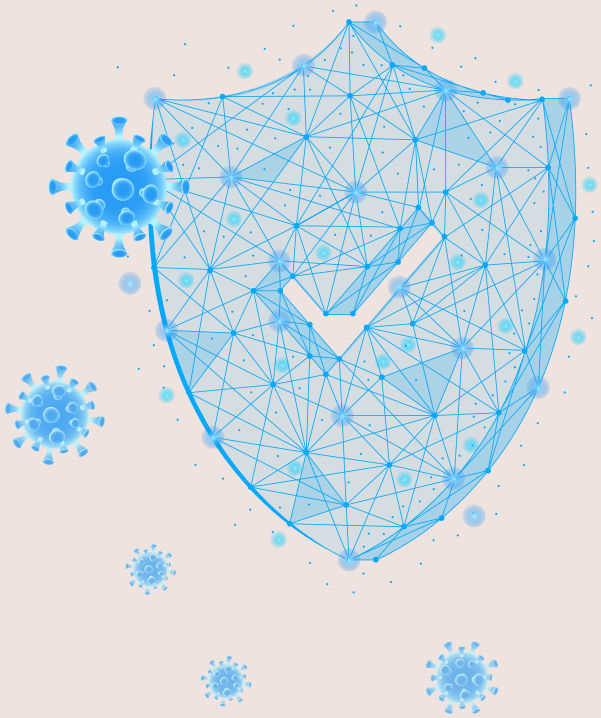
Lastly, specific measures to be implemented during the COVID19 pandemic are listed to ensure that adequate sanitary conditions necessary for the personnel called upon to work in offices, workshops, warehouses and other places, are observed.

In the context of this health crisis of exceptional magnitude, the implementation of these measures is an essential condition for the resumption of economic activity. It is up to each company to assess its ability to comply and to make the necessary arrangements.

These instructions are intended for SMEs participating in the JP project. They can in no way replace the official instructions from the Iraqi government, whether in force now or in the future.

OCCUPATIONAL SAFETY AND HEALTH: WHY?

According to the International Labour Organization, more than 2.78 million people die yearly as a result of work-related accidents or illnesses. Moreover, more than 370 million non-fatal work-related accidents are recorded each year, resulting on average in more than 4 days of absence from work. The human impact of this phenomenon is colossal, and inherent economic burden amounts to 3.94 per cent of global Gross Domestic Product each year.



Records of work-related deaths, injuries and illnesses are particularly worse in developing countries, where larger numbers of people are engaged in risky activities combined with poor enforcement of occupational safety and health standards. The most affected are women, children and migrants, who are usually the poorest and least protected. Fatalities and infirmities resulting from work-related accidents are a major cause of poverty, affecting entire families.

Compared with larger companies, small and medium-sized enterprises face a number of difficulties in complying with occupational health and safety standards and regulations due to scarcer human and financial resources and less awareness of the risks and inherent costs to the non-compliance with OSH standards.

The effect of work-related injuries and the subsequent absence from work has the potential to make a substantial impact on the SME by

virtue of the actual absence from the business. Some examples of the direct consequences to the business of work-related injuries include:

- the financial cost on the SME when paying out statutory sick pay and overtime to other workers or hiring substitutes;
- the effect on the SME's productivity, exacerbated by the limited manpower, which may negatively impact the quality of the product or service delivered;
- the impact of unexpected employee absence on the SME's turnover due to potential loss of product or service delivery;
- reallocation of manpower and resources resulting in longer shifts to compensate the backlog of work.

In addition to the direct impacts of absences related to occupational accidents or sickness, there are a number of perceived indirect consequences on the SMEs profitability and image including:

- job loss and redundancy;
- altered relationship with clients or customers; leading to
- loss of business reputation; which leads to
- liquidation or loss of business.

Thus, occupational health and safety can play an important role in maintaining and improving the profitability of an SME, its image and the motivation of its employees. This is often achieved by the simple understanding and proper assessment of the needs of the SME in matters of occupational health and safety, and by the implementation of guidelines already developed and readily available for each type of activity and each category of risk.

OCCUPATIONAL SAFETY AND HEALTH: HOW?

A crucial step in the implementation of any safety management system is the assessment of risks associated with the company's activity. A risk assessment is a systematic investigation of all risks associated with workstations, work equipment and work methods. The aim of risk assessment is to eliminate, rule out or at least reduce existing risks and determine the measures essential to guarantee the safety and health of employees at their workstations.

First, it is important to differentiate the concepts of Danger, Risk and Risk factors. The risk is not a danger: it is the consequence if there is exposure to the danger.

- Danger: A danger is a property or a capacity of an object, a person, a process ... of causing harmful consequences, also called damage.
- Risk: A risk is the probability that the negative consequences of a danger, the damage, will actually materialize. A danger only becomes a risk when there is exposure and therefore the possibility of adverse consequences.
- Exposure: In this context, exposure means contact between a danger and a person, which can therefore lead to a damage.
- Risk factors: Risk factors are elements that can increase or decrease the probability of an accident occurring or the severity of an event.

5 steps of risks assessment

It goes without saying that in all stages of the risk assessment, consultation with the employees remains an important element that should not be overlooked.

Risk assessment cycle

Step 1: Identify risks and exposed people

This step involves screening the workplace, processes, tools, machines and products for possible sources of accidents and identifying people who may be exposed to them. In addition, for each of the detected dangers, the people at risk must be identified. It is as crucial to identify those directly exposed to a danger, as those who are indirectly exposed.

In addition to own employees, it is also necessary to consider other groups who may come into contact with the danger, such as, for example, customers or employees from another company who have to access to the workplace or are affected by the company's activity.

In addition, there are groups of people who are likelier to be at risk, such as young workers, temporary workers without specific training, disabled workers, pregnant and breastfeeding women, convalescent employees, etc.

Step 2: Assess the risks and prioritize them

In this second step, the risks associated with the exposure to each danger are assessed. Therefore, the level to which the employee is exposed to danger is evaluated. It is necessary to assess the extent to which the danger can cause an accident or illness, the level of seriousness of this accident or illness and the frequency with which employees are exposed to it.

A risk assessment will always prove difficult as it is always subject to subjective interpretation which can lead to either an overestimation or an underestimation of the risk. To remedy the subjectivity of an individual analysis, different methodologies or strategies can be used (HEEPO, KENNEY… etc.) or have the analysis carried out through teamwork.

Step 3: Define prevention measures

The third step is to determine the measures to eliminate the risks or at least to control them. It must be possible to determine whether a risk can be eliminated completely or, if not, put in place measures to contain it and ensure that it does not compromise the safety and health of employees.

The general principles of prevention are:

1. avoid / eliminate the risk;
2. adapt new methods / equipment;
3. improve the level of protection.

It is very important to avoid preventive measures which only shift the risk or create a new one.

Step 4: Adopt prevention measures and implement them

The fourth step is to implement the preventive measures determined in the previous step. It goes without saying that all the measures cannot be implemented simultaneously: it is therefore necessary to establish an order of priority taking into account the seriousness of the risk and its consequences. It is also necessary to designate people who are accountable for the implementation and an inherent timeframe and budget.

Among the measures to be implemented, we can thus distinguish:

- the measures applicable immediately and at a low cost;
- provisional measures to be enforced pending costlier measures applicable in the longer term;
- measures applicable in the long term and representing higher costs.

Step 5: Control

After the preventive measures have been implemented, a control should be carried out to check whether they have been properly applied and whether the deadlines for the execution of the measures

have been respected. It is not only a matter of verifying whether the risks have been eliminated or completely ruled out or whether they have been reduced so as to be able to control them, but also whether no new risk has been created following the application of the measures. In addition, it is recommended to carry out a new risk assessment on a regular basis, in order to determine whether the risks could have been eliminated definitively or whether other risks have arisen since the last assessment.

It is essential to perform a new risk assessment whenever there has been a change in the company. This change can be at the organizational level, at the personnel level or be of a technical nature. It may be, for example, the creation of a new position, the hiring of new employees, the installation of a new machine, the introduction of a new process or the introduction of a new product.

Finally, having the outcomes of risk assessments recorded is always advantageous during future checks and examinations. A good recording can serve as:

- basis for future reviews and risk assessments;
- proof intended for official control bodies;
- information to be transmitted to the concerned persons.

In order to serve as a good basis for future evaluations, it is recommended that the records contain:

- the names and functions of the persons carrying out the checks and examinations;
- the date of the check:
- the risks that may have been detected;
- the groups of people who may be affected by the risks identified;
- the preventive measures implemented;
- information concerning future controls and reviews;
- information concerning the participation of employees in the risk assessment.

Occupational health and safety assessment checklists (cf. Annex I & II)

To carry out an assessment of OSH performance, and to identify the corrective measures to be implemented if necessary, multiple tools can be deployed, depending on the complexity of the organization and risks assessed. OSH assessment checklists are easy-to-use tools that help considering multiple OSH aspects in a workplace and develop ideas for improvement.

While using a checklist, it is important to keep in mind some guidelines:

- A checklist can help identify hazards and adequate prevention measures and, used in the right way, forms part of a risk assessment cycle.
- A checklist may not cover all the risks of every workplace. Therefore, it is important to adapt checklists accordingly and regularly when needed.
- A checklist is only a first step in carrying out a risk assessment. For more complex risks (e.g. risks related to very specific machinery, chemical products… etc.), further information may be needed to assess more complex risks and in some circumstances, you may need an expert's help.
- Checklists present hazards separately, while in workplaces they may be intertwined. Therefore, the interactions between multiple risks should be taken into account. Some corrective measures can be effective in addressing multiple risks. Analogically, some measures aiming at reducing exposure to one risk, could increase the exposure to another risk.
- It is important that checklists outcomes are translated into concrete actions, and not simply used as tick-the-box sheets.
- The inspection is to be carried out in an identified perimeter. In the case of an SME, the control zone can include all the premises of the company. For larger organizations, or organizations with multiple sites, fragmentation of the control by zone is more effective. In the case of a company providing logistic services, such as deliveries, means of transport are to be included in the work area. In all cases, all the areas where an employee is called upon to intervene must be considered.

Checklists in Annex I and II of this toolkit can serve as a first step for risk assessment. Adaptations may be necessary depending on the activity of each organization.

COVID-19: OVERVIEW

Information and figures provided by Robert Koch-Institut as of July 2020

What are the sources of Covid-19's contagion?

The main source of contagion is saliva droplet, which size exceeds 5 microns, or aerosol (<5microns) transmission. Droplets are emitted while talking, coughing and sneezing. Aerosols are rather emitted by singing, shouting or breathing deeply as during physical exercise. If the droplets fall quickly to the ground, the aerosols remain suspended in the air for up to three hours and can be inhaled by another person. It is therefore essential to protect oneself:

- by the social distancing of 2m. The droplets are barely projected further;
- by the interposition of a physical barriers which stop the droplets;
- by vigorously ventilating enclosed spaces to eliminate aerosol clouds;
- by wearing a mask to prevent the emission;
- by avoiding places where people shout (stadiums), sing (parties) or breathe deeply (sports).

Contamination in the open air is unlikely due to the dispersion of aerosols by the circulating air. Transmission through contaminated surfaces is much less likely and can be effectively prevented by frequent and thorough hand washing and/or disinfection and by avoiding touching faces.

What is Covid-19's incubation period?

The incubation period is the time that elapses between contact with the sick person (contagion) and the development of symptoms. In most cases this period lasts 5-7 days, sometimes up to 14 days. The person becomes infectious 1-2 days before the onset of symptoms, i.e. between the 3rd and 7th day of the contagion.

What are Covid-19's symptoms?

Covid-19 is a very non-specific disease and may present with a variety of clinical patterns ranging

Symptom	Frequency
Cough	48%
Fever	41%
Cold	21%
Loss of smell	15%
Pneumonia	3%

from a completely asymptomatic form to severe life-threatening pneumonia, passing through coughs and colds with or without fever. The most common symptoms are a dry cough, fever, cold and/or loss of taste or smell.

Other less common symptoms are sore throat, headache, body aches, loss of appetite, nausea, vomiting, diarrhea, conjunctivitis, rash.

Who are the Vulnerable persons?

It is essential to make personal assessment of complications risk because there are too many factors involved and there is no way to generalize. Severe cases are fortunately rare and can also occur in people who have no vulnerability factors and who are young.

Severe cases are likely to be more frequently aggravated in the following situations:

- elderly: Severity increases with age from 50-60 years of age;
- smokers;
- obese people;
- heart insufficiency;
- respiratory insufficiency;
- hepatic insufficiency;
- diabetics;
- cancer in the treatment process;
- immunosuppressed.

What are the risks for pregnant women?

Current studies do not suggest an increased risk of contamination or complications.

What are the manifestations, complications and after-effects of a covid-19 infection?

Approximately 81% of infected people will have mild symptoms, 14% will have severe symptoms and 5% will have critical, life-threatening symptoms. As there is still insufficient evidence, there is no possible conclusion regarding the long-term after-effects of Covid-19.

How does immunity to covid-19 develop?

Antibodies appear in the second week of symptoms. At the present time it is not yet known how effective these antibodies are or how long they persist. It is also not clear how cellular immunity plays in the development of the immunity.

What is the infectivity of coronavirus (SARS-CoV2) leading to Covid-19?

Generally, infectivity begins 2 days before the onset of symptoms and is maximal 1 day before the onset of symptoms, then gradually decreases and disappears 8-9 days after the onset of symptoms.

By convention it is assumed that the person is no longer infectious two days after the symptoms have disappeared.

How tenacious is the coronavirus (SARS-CoV2)?

In one study, the presence of the virus in aerosols was demonstrated 3 hours after their emission. This highlights the importance of wearing a mask as soon as a person moves from a workstation and the importance of adequate ventilation to dilute the aerosol clouds. On surfaces the virus can survive between 4 and 48 hours. This underlines the importance of hands hygiene, exclusivity of the workplace and cleaning with a virucidal detergent.

What about research and vaccine development?

Currently there are more than 160 different vaccines in development. 21 of these vaccines are already in human clinical trials. Their medium and long-term effectiveness are yet to be confirmed.

GENERAL BARRIER GESTURES TO BE ADOPTED BY EMPLOYERS AND EMPLOYEES

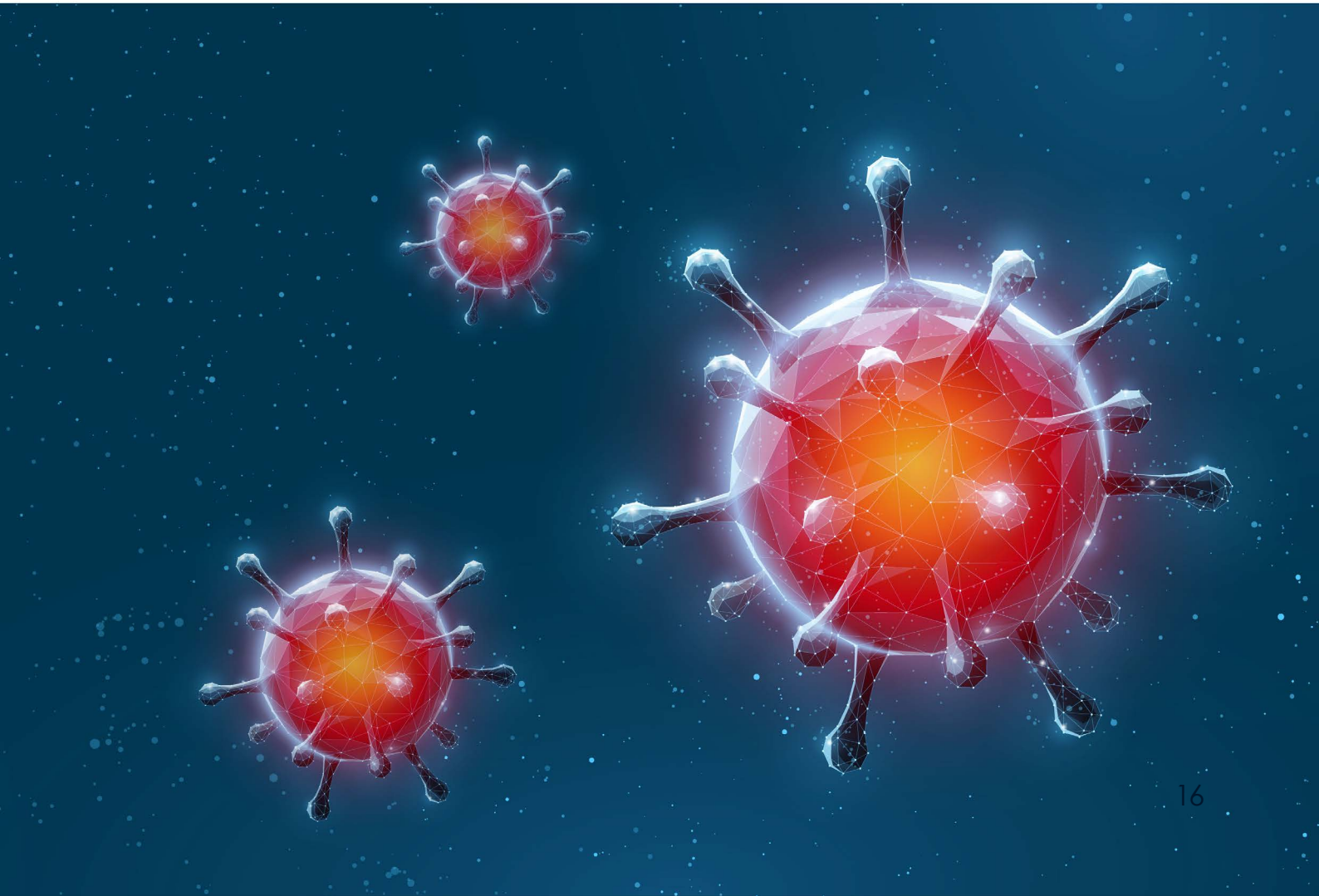
- Apply the principles of social distancing: employees are required to maintain a distance of at least two meters between themselves and between their customers;
- Wearing a mask or any other respiratory protection device should be rendered compulsory in all circumstances in shops open to public;
- Regularly disinfect your hands, respectively wash your hands with soap and water, in any case before starting your shift and at the end of it;
- Cough or sneeze into your elbow or a tissue;
- Use disposable tissues and dispose of them in a dustbin featuring a pedal for a non-manual use;
- Greet your colleagues and your customers without shaking hands and without any physical contact;
- Do not share any material or office equipment (tablet, pencils, communication devices, etc.);
- Limit outdoor activities and trips to what is strictly necessary;
- Avoid touching customers' payment cards;
- Regularly use a hydro-alcoholic solution at the beginning and after any commercial transaction.

MEASURES TO BE ADOPTED BY THE EMPLOYER

SMEs operating a commercial service are encouraged to adopt a prevention policy that may include measures such as:

- Allow access to a water point, soap and disposable paper towels so that employees can wash their hands. If the employer is unable to provide access to a water point, he must provide hydro-alcoholic solutions to employees;
- In the vicinity of any water point, display an effective method for washing hands like the one prescribed by the World Health Organization (https://www.who.int/gpsc/tools/Five_moments);
- For a correct disinfection using hydroalcoholic solutions, display posters near gel dispenser, like the one provided by the World Health Organization (https://www.who.int/gpsc/5may/How_To_HandRub_Poster.pdf);
- Posters reminding the importance of hand hygiene, respiratory etiquette and social distancing should be placed in strategic locations in the store, like:
  - At store entrances, either for customers, personnel or for deliveries,
  - At checkouts,
  - At the toilets' entrance,
  - At the employees' dining room,
  - In the employees' locker room,
  - In the vicinity of the store parking lots;
- Reorganize workstations and allocate employees, so that a distance of at least two meters separates them. To achieve such a separation, consider simple reorganization designs, like:
  - if several cashiers are available, space them out sufficiently, otherwise block some so as to keep an empty cashier desk between each two in service;
  - Alternate the orientation of juxtaposed workstations;

- Cut down conference rooms density by keeping just enough seats sufficiently spaced;
- Define traffic flow in the store. Circulation in the store (e.g. between aisles) must follow a single direction clearly displayed by means of floor signage;
- If possible, keep interior doors open to avoid the use of handles, except for fire doors which must be kept closed;
- When possible, provide physical barriers between individuals. For example, at checkouts, if keeping a distance of two meters between the employee and the customer is not possible, install a physical separation with a transparent material that can be easily cleaned and disinfected frequently (e.g.: acrylic panel "Plexiglas" or similar) to protect employees and customers;
- Limit the maximum number of people simultaneously admitted in the shop (employees and customers) to be able to permanently observe the 2-meter distance between people;



- Ensure that in waiting queues, a distance of at least two meters is respected between each two persons by adding floor signage;
- Avoid all physical contact between employees and customers;
- As much as possible, avoid hand-to-hand exchange of money, credit cards, loyalty cards, discount coupons, merchandise, etc.;
- If possible, favor payment by cards ideally on fixed terminals, which do not need to be handled, and payments by mobile phones;
- During employee meal breaks:
  - Wash hands before and after meals or set up a dispenser of hydro-alcoholic solutions at the entrance to the space where employees can take their meals;
  - Ensure a distance of at least two meters between employees who eat their meals (seats organization);
  - If the available space in the dining room does not allow observing a distance of 2 meters between each employee, modify the break schedules in order to have a limited number of employees in the dining room simultaneously;
  - Do not exchange cups, glasses, plates, utensils; provide disposable cutlery and wash dishes in hot water with soap.
- Organize tasks so that suppliers can leave deliveries at the entrance of the shop to avoid the comings and goings of workers from other companies in the premises;
- Keep handling operations (unboxing, shelving... etc.) away from customers, whenever possible.

CLEANING AND SANITIZING OPERATIONS - PREMISES

Regardless of the sector of activity, a certain number of machines, equipment and tools are available to several employees. The virus survival times being from a few hours to one or several days depending on the infected material, specific disinfection measures should be added to the regular cleaning. It is necessary to adapt a plan for cleaning and disinfecting surfaces by:

- Listing all potentially contaminated elements that are common or specific to the activity carried out (think of everything that is regularly touched by workers or customers: door handles, toilets, furniture, phones, keyboards, mops, etc.);
- For each of these elements, defining a cleaning and disinfection plan including:

- Cleaning frequencies;
- Products to be used (see what is already used by the company, list and obtain the missing products). The products must be compatible with the type of surface to be cleaned and be the least aggressive for the user. For disinfection, the WHO recommends the use of products containing at least 70% alcohol and bleach diluted to 0.5%;
- Necessary equipment (gloves, masks, etc.). Cleaning tools must be disposable (disposable cloth, wipe, paper towels, etc.) ;
- If a cleaning product is transferred to another container, ensure that the recommended PPE are worn and that the new container is correctly labeled;
- A schedule clearly stating who does what and when in terms of cleaning;

- Posters stating the frequency of cleaning and disinfection must be placed in strategic places to inform and reassure the customer;
- As a preventive technical measure, it is recommended in functional buildings which are equipped with older ventilation systems (CMV), i.e. which do not automatically work with 100% fresh air, to change the setpoint to switch to 100% fresh air (this change of setpoint is to be done by the maintenance technician).

CLEANING AND SANITIZING OPERATIONS – VEHICLES

Similarly, to premises, professional vehicles are usually shared and need to be cleaned and disinfected regularly to reduce the risk of contagion. The ideal solution remains the allocation of a single driver per vehicle. Since this solution is often difficult to implement and / or expensive, it is necessary to regularly disinfect vehicles in accordance with certain guidelines:

- Alcohol is the most effective agent against the coronavirus. Some other sanitizers effective against Coronavirus (like bleach, hydrogen peroxide and ammonia) are too toxic and not suitable for interior use in addition of being too harsh for a car's interior surfaces. Agents like bleach, hydrogen peroxide and ammonia aren't suitable for interior use. Alcohol vapors

shouldn't be inhaled either, but they tend to dissipate quickly, and if you keep the windows open while applying it, the risk should be minimal and short-lived.

- Many antibacterial wipes and some hand sanitizers claim to kill 99,99% of germs. Coronavirus is however not a germ. Though, many of these products, which usually contains benzalkonium, are not as effective against coronavirus as alcohols.
- Extended saturation of alcohol on leather and porous vinyl, two materials commonly found on steering wheels or shift knobs, may eventually damage it. It is recommended to first test the cleaning product on an unobtrusive location.
- Microfibers or cotton are best suited to clean an interior of a car. Avoid using paper towels, facial tissue or other paper products for cleaning screens, plastics and other interior surfaces, because they can leave scratches.
- The common areas that should be regularly sanitized, and mandatory sanitized after any driver's change are:
  - Keys,
  - Door handles,
  - Trunk release handle,
  - Seat adjustment controls,
  - Rearview mirror,
  - Side mirror controls,
  - Whole steering wheel, buttons and tilt adjustment,
  - Turn signal and wiper stalks,
  - Seat belt buckle (receptacle and tongue),
  - Shifter,
  - All dashboard controls,
  - Grab handles,
  - Armrests, center console latch,
  - Glove box, vents, etc.
- wearing a mask inside vehicles must be compulsory in the presence of passengers.

PERSONAL PROTECTIVE EQUIPMENT

Protective masks

Note that masks or any other device used to cover the nose and mouth do not protect the wearer effectively but protect other people from the droplets emitted by the wearer of the mask (cough, sneezing). If an interpersonal distance of at least two meters cannot be respected, wearing a mask or any other device covering the nose and mouth of a natural person is mandatory. Wearing is compulsory in all circumstances for activities involving interaction with external public.

Types of masks

Medical/surgical masks: made from a minimum of three layers of synthetic nonwoven materials, and configured to have filtration layers sandwiched in the middle. These masks are available in different thicknesses, have various levels of fluid-resistance and two levels of filtration. These medical masks reduce the respiratory droplets from the wearer to others and to the environment. They also prevent transmission of the virus from others to the wearer.

Filtering facepiece respirators (FFP): available at different performance levels such as FFP2, FFP3, N95, N99. These are specifically designed for healthcare workers who provide care to COVID-19 patients.

Fabric masks: act as a barrier to prevent the spread of the virus from the wearer to others. They can be purchased commercially or handmade and are generally not standardized like medical masks. They are washable and reusable. Fabric masks are not as efficient as medical ones.

Proper wearing of a mask

Masks should cover the nose, mouth, and chin and be secured with elastic loops or ties, include multiple layers, be washable and reusable.

Before putting on a clean mask

and after removing it, hands should be cleaned with alcohol-based hand rub or soap and water. Masks should not be loose but tightly worn on the face. The mask should not be touched while being worn. It should be directly replaced if it becomes moist or too loose. In parallel of wearing a mask, other preventive measures should be observed, including regular hand sanitization and physical distancing.

Cleaning a fabric mask

The WHO recommends using hot water (at least 60°) and soap or detergent to wash fabric masks at least once a day. If not possible to wash the masks in hot water, then

Wash the mask in room temperature water, with soap or detergent, and then either:

- boil the mask for 1 minute,

or,

- Soak the mask in 0.1% chlorine for 1 minute and rinse it thoroughly with room temperature water till no chlorine residue is left on the mask.

Hand sanitizers

Alcohol-based hand sanitizers can quickly reduce the number of microbes on hands in some situations, but sanitizers do not eliminate all types of germs.

Soap and water are more effective than hand sanitizers at removing certain kinds of germs. Although alcohol-based hand sanitizers can inactivate many types of microbes very effectively when used correctly, people may not use a large enough volume of the sanitizers or may wipe it off before it has dried.

Hand sanitizers may not be as effective when hands are visibly dirty or greasy. Hand sanitizers work well in settings like hospitals, where hands come into contact with germs but generally are not heavily soiled or greasy. Hand sanitizers may work well against certain types of germs on slightly soiled hands. However, hands may become very greasy or soiled in community settings, such as after people handle food, play sports, work in the garden, or go camping or fishing. When hands are heavily

soiled or greasy, hand sanitizers may not work well. Handwashing with soap and water is recommended in such circumstances.

Hand sanitizers might not remove harmful chemicals, like pesticides and heavy metals, from hands. If hands have touched harmful chemicals, wash carefully with soap and water (or as directed by a poison control center).

If soap and water are not available, use an alcohol-based hand sanitizer that contains at least 60% alcohol. Sanitizers with an alcohol concentration between 60–95% are more effective at killing germs than those with a lower alcohol concentration or non-alcohol-based hand sanitizers. Hand sanitizers without 60-95% alcohol may not work equally well for many types of germs; and merely reduce the growth of germs rather than kill them outright.

When using hand sanitizer, apply the product to the palm of one hand (read the label to learn the correct amount) and rub the product all over the surfaces of your hands until your hands are dry. The steps for hand sanitizer use are based on a simplified procedure recommended by WHO.

GLOVES

For the general public, wearing gloves is not necessary in most situations, and not recommended by the WHO. Wearing gloves can lead to a false sense of safety and contamination from contact with multiple surfaces without the gloves being changed. Wearing gloves does not eliminate the need for regular hand washing. It is recommended to wear gloves when cleaning or caring for someone who is sick.

When cleaning, follow precautions listed on the disinfectant product label, which may include wearing gloves and/or having a good ventilation. Wash your hands after you have removed the gloves.

Occupational Health & Safety toolkit - Conclusion

This occupational health & safety toolkit is designed to assist employers and workers in small and medium enterprises, and similar-sized organizations of other categories, in creating safe and healthy workplaces. In this toolkit, employers and workers will find many useful and practical information to improve key aspects of safety and health in their workplace, in addition to handy measures to keep employees and customers safe during the COVID19 pandemic. The emphasis of this toolkit it to help implementing a health and safety management system with easy-to-apply and low-cost solutions, and to promote OSH culture among employers and workers.

The scope of this toolkit is meant to be the broadest possible without being vague. Therefore, tools and guidelines provided may need adaptation corresponding to each organization's peculiarities.

Annex I: OSH inspection checklist

Company/Organization:			
Unit/department:			
Inspected by:		**Date:**	

Management	**Yes**	**No**	**n/a**	**Comments / Actions**
Is the OSH Policy for the company defined and prominently displayed on a local noticeboard?				
Is there a designated Safety Coordinator?				
Are there written safe operating procedures or risk assessments?				
Are employees aware of specific safety guidelines & procedures?				
Are key safety rules displayed in work areas?				
Are checks made on qualifications of operators?				
Are incidents and accidents reported and recorded?				
Is there an effective system for reporting & correcting hazards?				

Training	Yes	No	n/a	Comments / Actions
Are all workers required to complete a general workplace safety introduction?				
Are all workers required to complete a periodic fire safety training?				
Is training provided specific to individual workstations?				

Work Environment	Yes	No	n/a	Comments / Actions
Do the general ventilation appear sufficient?				
Are local exhaust systems installed to remove harmful gases, vapors, fumes & dusts?				
Are local exhaust systems regularly checked and cleaned?				
Is exposure to noise sufficiently limited?				
Are workers protected from vibration risk?				
Is lighting sufficient?				

Ergonomics	Yes	No	n/a	Comments / Actions
Is layout of work area suitable for tasks?				
Are workers aware and trained in appropriate manual handling?				
Are excessively repetitive tasks avoided?				
Is appropriate mechanical handling equipment provided?				
Is appropriate mechanical handling equipment regularly tested?				
Do workers using mechanical handling equipment have suitable operator's licenses?				

Amenities	Yes	No	n/a	Comments / Actions
Are separate and clean meal-rooms provided?				
Is drinking water provided?				
Are washing facilities available and sufficient?				
Are toilets available and sufficient?				
If required, are lockers or hangers provided?				
Are staff amenities kept clean?				
Are prayer rooms provided and regularly cleaned?				

Personal protective equipment (PPE)	Yes	No	n/a	Comments / Actions
Has the need for personal protective equipment been assessed by workstation?				
If PPE is required, has it been provided?				
Is PPE meeting conformity standards?				
Is training provided in the use of PPE?				
Is PPE maintained and stored correctly?				
Does each worker have a personal set of PPE for his/her personal use only?				

Waste management	Yes	No	n/a	Comments / Actions
Are sufficient wastebins provided?				
Is there a system for the safe disposal of general waste?				
Is there a system for the safe disposal of chemical waste?				
Is training provided on waste disposal procedures?				
Are waste disposal procedures prominently displayed?				
Are ashtray stands available and regularly cleaned?				

Floors & aisles	Yes	No	n/a	Comments / Actions
Is the flooring structurally stable?				
Is the floor surface even?				
Is the floor clear of waste, oil or water?				
Is the area free of tripping hazards?				
Are aisles of sufficient width?				
If needed, are aisles properly marked? e.g., walkways?				

Special work procedures	Yes	No	n/a	Comments / Actions
Are there specific safety guidelines to external contractors? E.g., cleaners, maintenance personnel				
Are there special procedures for work in high temperatures? E.g., welding, metalsmithing				
Are special procedures in place for confined spaces?				
Are special procedures in place for working at heights?				
Are there procedures for lone and/or out-of-hours working?				

Mechanical hazards	Yes	No	n/a	Comments / Actions
Is machine securing adequate?				
Are there adequate guard rails on ramps & walkways?				
Do ladders and steps appear adequate?				
Are safety systems (kill switch…) regularly controlled?				
Is maintenance carried out by adequately trained staff with proper safety guidelines?				

Electrical equipment	Yes	No	n/a	Comments / Actions
Do multi-outlet boards have residual current devices?				
Do multi-outlet boards have individual switches?				
Are trailing leads eliminated?				
Is electrical equipment periodically tested in accordance with legislative/ technical requirements?				

Chemicals	Yes	No	n/a	Comments / Actions
Is there a register of stored chemicals?				
Are Safety Data Sheets (SDS) available for all chemicals in language(s) understood by workers?				
Are containers and their labels in good condition?				
Is the use of chemicals subject to specific safety guidelines, including dealing with chemical spills?				
Is storage for chemicals sufficient, including retention trays?				
Are incompatible classes of chemicals stored in segregated spaces?				

Combustible materials	**Yes**	**No**	**n/a**	**Comments / Actions**
Are quantities of combustible materials kept to within the storage limit?				
Is combustible materials storage properly marked?				
Is combustible materials use and storage separated from heat and ignition sources?				

Fuel/gases cylinders	Yes	No	n/a	Comments / Actions
Is the number of cylinders inside premises kept to a storage limit?				
Is cylinders storage properly marked?				
Are incompatible gases segregated?				
Are cylinders securely locked?				
Are empty cylinders properly evacuated?				

Emergency equipment	Yes	No	n/a	Comments / Actions
Are emergency procedures available?				
Are emergency contact numbers prominently displayed?				
Is a safety shower and appropriate eye-wash unit provided?				
Are regular trainings in the use of safety equipment provided?				
Is all safety equipment periodically tested?				
Are first aid kits available, sufficient and regularly checked?				
Are there trained first aid officers?				
Are names of trained first-aid officers prominently displayed?				

Evacuation	Yes	No	n/a	Comments / Actions
Are evacuation procedures displayed?				
Are emergency plans displayed by floor/ zone?				
Are emergency coordinator appointed and trained?				
Is fire and emergency training provided?				
Are regular emergency exercises conducted?				
Are emergency exits kept clear?				
Are emergency assembly points properly indicated?				
Is there emergency lighting?				
Is emergency lighting periodically tested?				

Fire protection	Yes	No	n/a	Comments / Actions
Are extinguishers provided in sufficient numbers?				
Are extinguishers annually controlled?				
Are extinguishers properly hung and marked?				
Is access to extinguishers kept always free from obstacles?				
Is there a fire detection system?				
Is the fire alarm audible in all rooms?				
Is the push-button alarm accessible?				
Is the push-button alarm location prominently marked?				
Is there clear access for the Fire Service?				

Annex II: OSH inspection checklist – Teleworking

Employee:	
Workplace:	
Date:	

	Yes	No	n/a	Comments / Actions
Is microclimate appropriate (temperature) in the workroom?				
Does the room have sufficient natural lighting?				
Does the teleworker have a separate room at his/her disposal so as to isolate himself/herself from others and from noise while teleworking?				
Are earphones adequate and meeting safety standards? Does the employee suffer from any discomfort using them?				
Is the working space properly cleaned and maintained?				
Is the chair stable and adjustable to ensure free movement and a comfortable body posture?				
Does the desk's height ensure the mobility of the legs?				

	Yes	No	n/a	Comments / Actions
Are the keyboard and the mouse properly disposed to ensure supporting teleworker's wrists?				
Is the electrical wiring safe and in good condition?				
Are there any damaged plugs or sockets?				
Is there any risk of slips, trips or falls because of cables and congested walking spaces?				
Is the screen correctly positioned without any glare or reflection causing visual fatigue?				
Is the work organized in such a way that each teleworker has regular breaks?				
Does the teleworker manage to separate his/her professional and private life?				
Has the teleworker noticed symptoms of 'workaholism'?				
Is the teleworker informed about the risks regarding health and safety inherent to teleworking?				

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