



# Safe return and restart

EXPANDED GUIDELINES TO UNDERPIN CONSTRUCTION  
SCOTLAND'S SAFE OPERATING GUIDANCE

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## DISCLAIMER

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**The Construction Industry Coronavirus Forum (which shall include their servants and agents and any policy committees of the CICV Forum) has devised a plan the intention of which is to provide a standardised approach to commencing construction projects in Scotland which incorporates the coronavirus (COVID-19) public health requirements (“the plan”). The use of the plan is subject strictly to the following:**

- 1.** The CICV Forum does not give any warranty representation or undertaking as to the efficiency, usefulness, safety or commercial or technical viability of the plan.
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- 6.** The Return to Work Questionnaire is designed to inform you about the need to fully understand the associated risks and mutual responsibilities when returning to work during this pandemic. The questionnaire is provided only as a guide and is not intended to form or attempt to vary collective or individual conditions of employment.

Careful consideration should be given to any questions asked in the circumstances, as to comply with current employment and health and safety legislation and their requirements.

If you choose to use this document or any part thereof, we strongly advise that you should seek independent legal or medical advice prior to its use within your business.

Abstract: This document has been developed by the CICV Forum Safety and Health Subcommittee mindful of the best available guidance, nationally and internationally, and serves as a guide for the management of COVID-19 on a construction site for the duration of the pandemic. The actions set out in this document should be implemented in tandem with an amended Construction Phase Health and Safety Plan. The purpose of this document is to protect workers, their families and the community, while also recognising the need to protect livelihoods. Users should refer to the Health Protection Scotland website to ensure they are referring to the most current guidance.

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## 1. INTRODUCTION

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**It is paramount that construction projects operating during the coronavirus (COVID-19) pandemic ensure they are protecting their workforce and minimising the risk of spread of infection.**

This guidance document is intended to introduce standardisation on sites of all sizes in line with the Scottish Government and Health Protection Scotland recommendations on the management of COVID-19. Every project should devise a plan considering this guidance, for implementation on site in consultation with all affected parties.

The normal health and safety requirements of any construction activity must not be compromised at this time – there is no derogation to the usual health and safety legislative requirements.

If an activity cannot be undertaken safely, it should not take place.

Site management should monitor the implementation of this guidance in tandem with site-specific health and safety procedures and remind the workforce at every opportunity that their purpose is to protect the workers, their colleagues, their families and the Scottish population.

## 2 WHAT IS CORONAVIRUS / KEY CONTROL MEASURES

**COVID-19 is a new illness that can affect your lungs and airways. It is caused by a new (novel) coronavirus called coronavirus SARS-CoV-2. Current evidence suggests that the virus is significantly more infectious than the flu that circulates every winter. Viruses can be easily spread to other people and patients are normally infectious until all the symptoms have gone. COVID-19 may survive on surfaces for up to 72 hours. A combination of good personal hygiene and management of physical distancing can protect from infection. This is at the core of this document.**

### Key control measures

The following are key control measures required for managing the spread of the virus on construction projects:

#### ● Symptoms

Ensuring no person with symptoms attends site – fever (high temperature), cough, shortness of breath, breathing difficulties and a loss of taste/smell.

Persons displaying symptoms and living alone must self-isolate for seven days.

If someone lives in a household and is the first to have symptoms, they must self-isolate for seven days. Everyone else in their household must self-isolate for 14 days.

If anyone else in the household starts displaying symptoms, the person with the new symptoms must self-isolate for seven days. This is regardless of where they are in the 14-day isolation period. It should be noted that recent studies have suggested that COVID-19 may be spread by people who are not showing symptoms.

#### ● General health

Personnel living with 'at risk groups', as defined by Health Protection Scotland, must consider if there is a heightened risk from attending work.

#### ● Travel

Persons returning to Scotland should refer to national advice issued by Health Protection Scotland/the Department of Foreign Affairs.

#### ● Hand hygiene

Ensuring everyone is washing hands regularly and thoroughly or sanitising and sufficient facilities are provided and maintained to allow this to happen.

#### ● Physical distancing

Ensuring workers maintain 2-metre (2m) separation insofar as possible while working, when using toilets, canteens, drying rooms, etc. Also, to promote physical distancing when travelling to and from work (public transport, vans etc), and in their daily lives, in order to limit exposure.

#### ● Cough etiquette/Respiratory hygiene

Ensuring people cough/sneeze into their sleeve or elbow, always cover up, dispose of tissues.

#### ● Cleaning

Ensuring that all frequently touched objects and surfaces are regularly cleaned and disinfected.

The above-mentioned control measures are elaborated on throughout this document and all individuals need to take personal responsibility to advise their employer of any symptoms immediately.

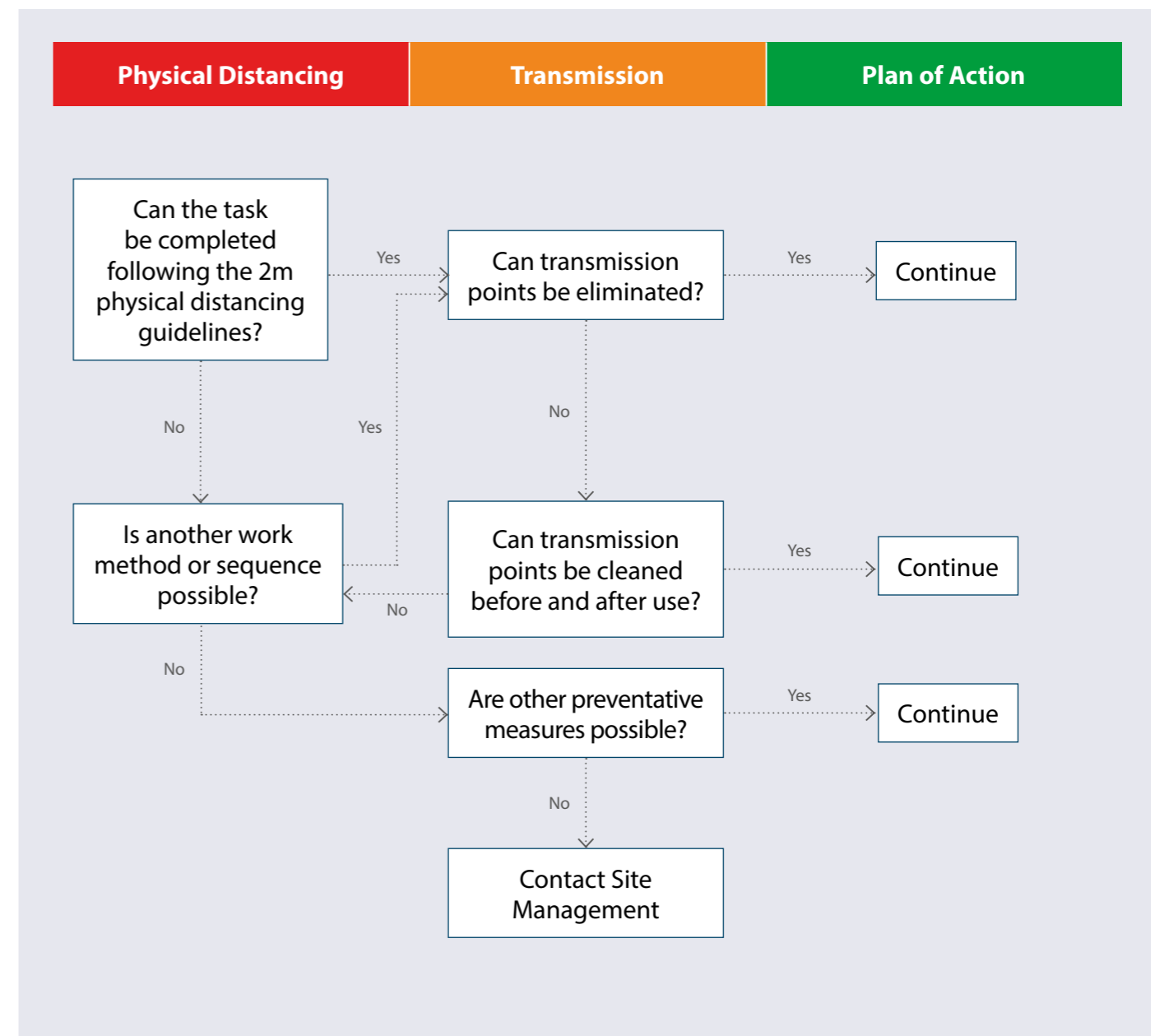
## 3 PHYSICAL DISTANCING

### What is physical distancing?

Physical distancing, or social distancing, is a set of interventions or measures taken to prevent the spread of COVID-19 by maintaining a physical distance between people and reducing the number of times people come into close contact with each other.

To slow the transmission rate of COVID-19, a physical distancing of minimum 2m is recommended by Health Protection Scotland.

The flow chart below is provided to assist in the review of work processes with physical distancing in mind.



## 4 ROLE OF THE CLIENT

The construction industry is largely a service industry. Contractors work for clients under a construction contract. In most instances, compliance with this guidance involves changes to the schedule or delivery programme for construction projects. Therefore, the implementation of this guidance must have the support of the client and be implemented in accordance with the necessary contractual instructions from clients. A contractor cannot operate unilaterally, and each site and project are unique in terms of their design and the tasks associated with their construction.

It is recommended that before construction resumes on any site, a revised risk assessment is conducted by the client and contractor to ensure the project can recommence, revised delivery schedules are agreed, revised work programmes are agreed and/or any necessary contractual instructions are issued by the client which make it possible to comply with this guidance.

On certain projects where the client and the builder are the same entity (such as housing projects) it is still recommended that a revised risk assessment is carried out before implementing this guidance.

## 5 HEALTH AND SAFETY DOCUMENTATION

**Prior to construction projects commencing after the COVID-19 shutdown period, all project health and safety documentation should be reviewed to ensure that the documentation is aligned with the measures as outlined in this guidance and general/standard health and safety requirements, considering the constraints of COVID-19.**

It is recommended that each PC/contractor/developer should document a specific COVID-19 plan in line with this document and in consultation with the client. The resulting plan should consider and address the level(s) of risk associated with the project and tasks that workers perform on site. On each project, the PC, in consultation with other contractors, will appoint COVID-19 Compliance Officer(s) as necessary depending on the size, scale and complexity of the project.

### Insurance

Before commencing activities on-site, contractors are advised to contact their insurance broker or insurance advisor for direction.

### Health and Safety Policy statement

It is advised that contractors review their Health and Safety Policy, Construction Phase Health and Safety Plan and associated risk assessments, considering COVID-19.

### Risk Assessments/Method Statement (RAMS)

Risk assessments and method statements for all work on site should be reviewed to address the risk of COVID-19 and the associated control measures required. Emphasis will be required on 'close working', i.e. where persons work within 2m of each other (2m being the Scottish Government's recommended separation for physical distancing).

Section 18 of this document deals with 'close working'.

### Daily briefings documents

It is recommended that daily briefing documents such as SSWPs, SPAs, Daily Safe Starts, Task Briefings or equivalent should be updated to reference COVID-19 and specifically physical distancing and hand hygiene.

Basic COVID-19 control measures are to be highlighted on all such documents, as per the illustrated example below.

Daily Safe Start

## 6 SITE MANAGEMENT

### Site management and supervision

For the purposes of the document, anyone with supervisory responsibilities is classified as site management.

### Responsibilities of site management for COVID-19

Site management must risk assess and manage safety and health hazards in the workplace. In the context of the application of the requirements of this guidance, responsibilities include managing and instructing site workers on the various control measures and compliance. This guidance identifies several key management responsibilities during the implementation of this plan. These responsibilities are elucidated hereafter.

**Note:** Project teams must stay agile as new information becomes available that may change approach in procedures, processes or PPE.

### Pre-planning for works

Site management are responsible for ensuring that all personnel on site, including sub-contractor management/staff have been made aware of the specific requirements of the site-specific Construction Phase Health and Safety Plan. Specifically:

- To ensure that a member(s) of the management team is appointed as the COVID-19 Compliance Officer.
- To ensure that appropriate personnel from the PC/contractor and the sub-contractors are appointed as COVID-19 Compliance Officer(s).
- COVID-19 induction must be done, at latest, immediately on arrival to site. Ensuring that non-compliant personnel are not permitted on site.
- The inclusion of COVID-19 as a hazard in their Risk Assessment and Method Statement (RAMS) for their work activities.
- To ensure that this RAMS is effectively reviewed, approved and communicated.
- To ensure that all site facilities are sufficient to allow for the physical distancing and hygiene requirements of this guidance and to take appropriate immediate action where they are not.

### On site

Site management responsibility includes assessing various work scenarios to ensure that the key requirements, such as worker distancing and hygiene/PPE controls, are being implemented. This may involve discussions with client and PD. It will involve conducting regular site walks and inspections. Continuity of work crews is to be encouraged for ease of contact tracing purposes.

### Site workers

It is vital that each worker knows how to work safely during this COVID-19 pandemic and understands the requirements of their task-specific RAMS. Site management should coach and guide workers during the workday to ensure that they are fully compliant with the requirements.

### Management approach

Site management's main priority is ensuring that their plan is implemented at all levels and at all times with the co-operation of all stakeholders – clients, PD, contractors, workers and suppliers.

**Note:** Based on the level of communication involved and requirement to implement social distancing, each site should consider a phased return to work, advance communication and online briefings as appropriate.

### General site work activities

1. **Reduce** – the number of persons in any work area to comply with the 2m physical distancing guideline recommended by the Scottish Government (e.g. relocate workers to other tasks, review work schedule and task sequence, consider starting and finishing times etc).
2. **Review** – work practices, mindful of close-working arrangements. Coach site personnel to self-assess their task for physical distancing and transmission points.
3. **Supervise** – or mentor appointment of COVID-19 Compliance Officer to specifically monitor adherence to physical distancing and hygiene etiquette.

## 7 HYGIENE

### Good hygiene and hand washing

All site personnel should follow this advice and encourage others to follow this advice too.

#### DO:

Wash your hands properly and often with soap and water or a hand sanitiser (60% alcohol content).

Hands should be washed:

- after coughing or sneezing
- before and after eating
- before and after preparing food
- if you were in contact with someone who has a fever or respiratory symptoms (cough, shortness of breath, difficulty breathing)
- before and after being on public transport if you must use it
- before and after being in a crowd (especially an indoor crowd)
- when you arrive and leave buildings including your home or anyone else's home
- before having a cigarette or vaping
- if your hands are dirty
- after toilet use.
- Cover your mouth and nose with a tissue or your sleeve when you cough and sneeze.
- Put used tissues into a bin and wash your hands.
- Clean and disinfect frequently touched objects and surfaces.

#### DON'T:

- Do not touch your eyes, nose, or mouth if your hands are not clean.
- Do not share objects that touch your mouth – for example, bottles or cups.

### Disposable gloves

Do not wear disposable gloves in place of washing hands. The virus can get on gloves in the same way it gets on hands. Also, hands can become contaminated when gloves are taken off.

Disposable gloves are worn in medical settings. They are not as effective in daily life. Wearing disposable gloves can give a false sense of security.

A person might potentially:

- sneeze or cough into the gloves – this creates a new surface for the virus to live on
- contaminate themselves when taking off the gloves or touching surfaces
- not wash their hands as often as they need to and touch their face with contaminated gloves.

### Respiratory protective equipment, commonly known as face masks

- Using masks is unlikely to be of any benefit if the wearer is not showing any symptoms.
- People with symptoms should contact their doctors for advice and avoid attending the workplace until they have completed the quarantine period or have been tested.

Current guidelines from Health Protection Scotland recommend the wearing of face masks/coverings and/or the undertaking of temperature testing at work; the preferred approach is to ensure physical distancing and good hygiene measures.

Site management should consider additional measures to ensure the containment of the virus; these include posters and/or leaflets to advise workers of the hazards associated with COVID-19 and the measures to be taken to prevent the spread of the disease.

A selection of posters should be displayed in all workplaces and sites.

## 8 RETURN TO WORK PROCESS – WORKER

**In the event of a worker either being a suspected/confirmed case of COVID-19 or a known 'close contact' of a confirmed or suspected case, this protocol must be followed to ensure they are fit to return to work by means of self-declaration [1].**

Fitness for work should be considered from two perspectives:

1. Does their illness pose a risk to the individual themselves in performing their work duties?
2. Does their illness pose a risk to other individuals in the workplace?

The following steps should be followed, in line with current public health advice in Scotland:

**Any worker who has displayed symptoms consistent with COVID-19 must stay away from work, self-isolate and contact their GP by phone as part of the triage process.**

They must also notify their line manager/employer. An individual will be classified as either a suspected or confirmed case, based on Health Protection Scotland's decision to test/outcome of test.

An individual who is a known 'close contact' of a confirmed or suspected case will be contacted by

Health Protection Scotland through its contact tracing process. Advice regarding self-isolation for a period of 14 days since their last 'close contact' with a confirmed/suspected case must be followed.

An individual must only return to work if deemed fit to do so and upon approval of their medical advisor and having coordinated with their line manager/designated HR/employer contact.

When an individual is symptom-free and is deemed fit to return to work, the key criteria are:

1. 14 days since their last 'close contact' with a confirmed/suspected case and have not developed symptoms in that time, or
2. 14 days since the onset of their symptoms and five days since their last fever (high temperature), or
3. They have been advised by a GP/healthcare provider to return to work.

The line manager/designated employer/HR should confirm the relevant criteria above with the individual and write down their responses.

[1] Individual must self-declare their fitness for work in the absence of having a fitness for work certificate from their GP/healthcare provider. This is in acknowledgement that GPs do not currently have capacity to be issuing return to work certificates.

## 9 RETURN TO WORK REQUIREMENTS – SITES

**In advance of sites commencing following the COVID-19 shutdown period, all construction companies must consider the following, in conjunction with communications and briefings that will be required:**

- Updates to Construction Phase Health and Safety Plans, H&S policies and other relevant documents will have to be communicated to all staff members.
- The revised site Construction Phase Health and Safety Plan must be communicated to all site management.
- All site personnel must complete a Covid-19 induction.
- All persons returning to site must complete a COVID-19 questionnaire/self-declaration. It is recommended that this be completed and submitted by each main contractor/contractor/developer at least two days in advance of persons returning to site – **if conditions change at any time, resulting in a re-appearance of symptoms, workers should be advised not to come to work.**
- The questionnaire/self-declaration (see template in Section 23) is designed to seek confirmation that the individual has no symptoms of COVID-19.



Example of toolbox talk while applying physical distancing. TBT examples see Appendix

## 10 TRAVEL TO/FROM WORK

Where a worker exhibits any signs of COVID-19 or has been exposed to a confirmed case, they should not travel to work.

Wherever possible, workers should travel to site alone using their company vehicle or their own means of transport.

Where public transport is the only option for workers, regular toolbox talks outlining how to reduce the possibility of infection should be considered.

Site management must consider the following:

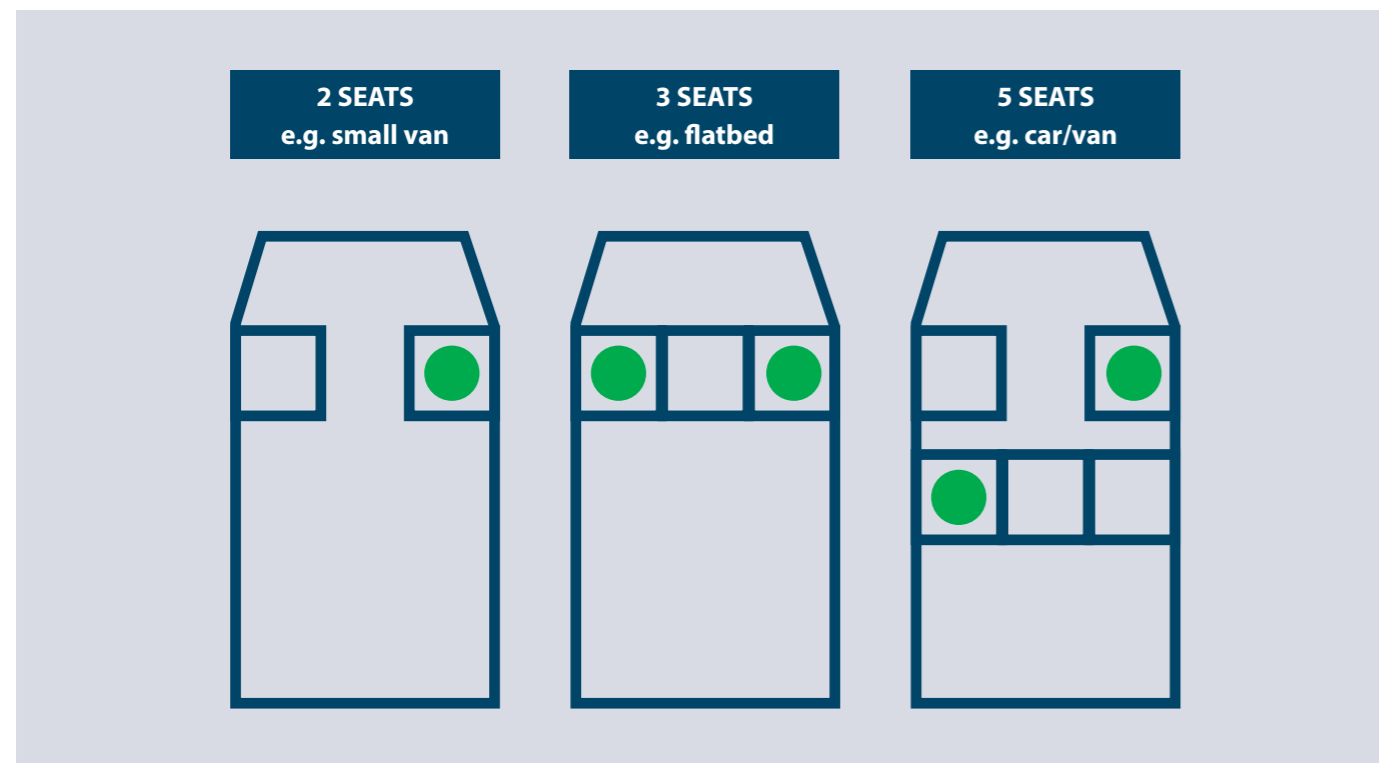
- Parking arrangements for additional cars/vans and bicycles
- Providing hand cleaning facilities at entrances and exits. This should be soap and water wherever possible or hand sanitiser if water is not available
- How someone taken ill would get home.

### Physical distancing in vehicles

Physical distancing is advised when travelling in vehicles to/from work and when in site vehicles and operating mobile plant.

Suggested arrangements are as follows:

- **Single occupancy of vehicles is preferable**
- Sit as far apart as the vehicle allows.



Recommended maximum road vehicle occupancy

### Other control measures for vehicle use

Workers should not enter a work vehicle with others if they have any symptoms or have had contact with a confirmed case of COVID-19.

General guidance for minimising the potential transmission of COVID-19 is:

- Employers should consider requesting personnel to use personal transport to reduce numbers travelling in work vehicles.
- It is advisable to limit the 'churn' of people travelling together (i.e. try to ensure the same crew members travel and work together day after day after day).
- When entering (and leaving) all vehicles the driver should clean all common areas that are liable to be touched, including the external door handles, keys, and other internal furnishings.
- Keep windows at least partially open.
- Keep personal items (PPE, clothes, lunch boxes etc) separate.
- Wiping/cleaning down of contact points should be done using antibacterial wipes or a wet cloth with soap application, or equivalent.
- Dispose of used wipes/cleaning materials in a designated bin/sealed bag and wash hands for at least 20 seconds.

- If availing of public transport, sit down to minimise contact with frequently touched surfaces, handles, roof straps, isolation bars etc. While those who can avoid taking public transport should do so, the Department for Transport has issued guidance for those who must use trains, buses, and trams.
  - Keep 2m apart from others wherever possible
  - Wear a face covering if you can
  - Use contactless payment where possible
  - Avoid rush hour travel where feasible
  - Wash or sanitise your hands as soon as possible before and after travel
  - Follow advice from staff and be considerate to others
  - Carry hand sanitiser (at least 60% alcohol) and use it regularly throughout your journey.

**Note:** It is noted that it is commonplace in the construction sector for family members to travel together or workers who lodge together to travel together (i.e. essentially a 'family unit').

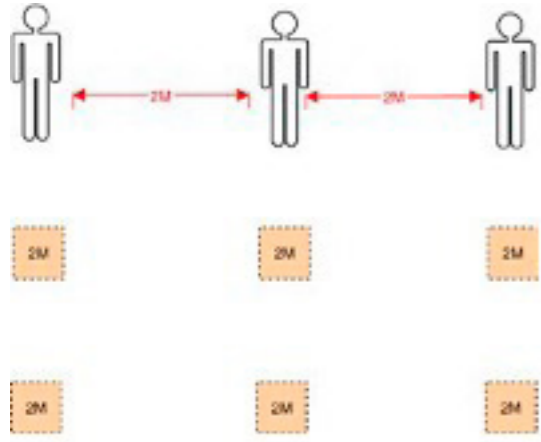
Recommended maximum road vehicle seating arrangements		
No. of seats	Max no. of occupants	Seating arrangement
2	1	1 driver
3	2	1 in the driving seat 1 in the far passenger seat
5	2	1 in the driving seat 1 in the far passenger seat



# 11 PREVENTION OF CROSS CONTAMINATION

## Site entry

The potential for cross contamination is higher at site entry and exit points and where there are high levels of surface contact points such as in welfare areas, site walkways, stairs access etc.



Site sign-in supervisors

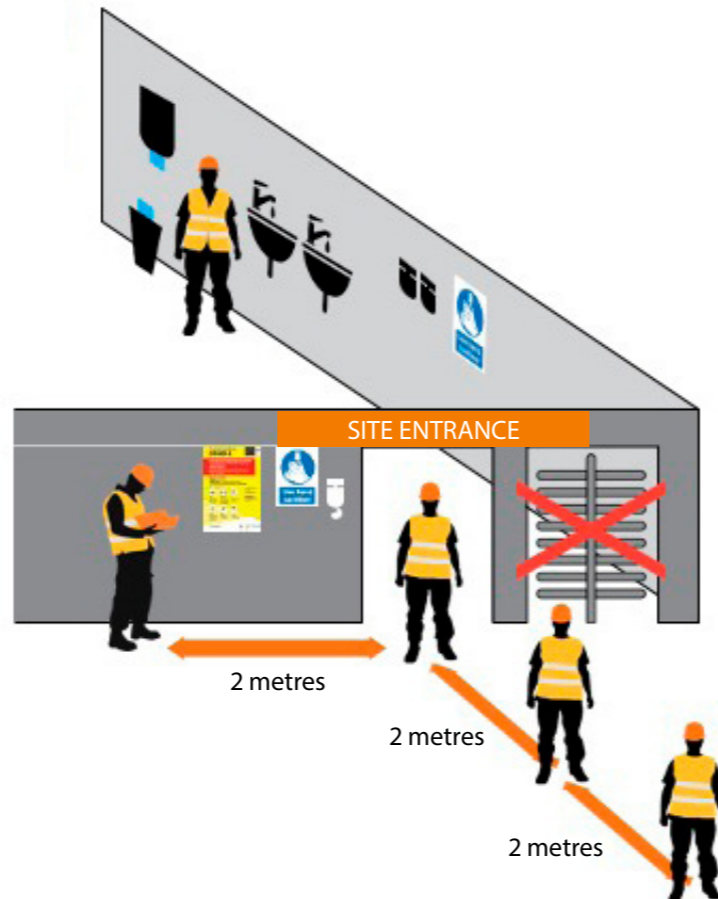
drivers must be permitted to use welfare facilities where necessary

- All persons entering site must be directed to wash their hands and additional hand washing stations should be provided where possible
- Touch points should be minimised with a 'hands-free' approach where possible
- On access routes throughout site, one-way systems should be implemented where possible, barrier gates should be wedged open, and touch points should be cleaned regularly.

## Recommended control measures

The following are recommended control measures at access points to all construction sites:

- Turnstiles to be by-passed with open door access to site
- Thumb access devices should be by-passed/ turned-off
- Stagger site's start times/finishing times to reduce queues
- Multiple entry points depending on site numbers
- Security guards to record all names rather than having multiple persons signing in using shared pen/booklet
- Restrict entry to workers and essential visitors only
- Sanitising stations in position at all site entry points
- Regularly clean common contact surfaces in reception, office, access control and delivery areas (e.g. scanners, turnstiles, screens, telephone handsets, desks, particularly during peak flow times)
- Reduce the number of people in attendance at site inductions and consider holding them outdoors wherever possible
- Delivery drivers should remain in their vehicles if the load will allow it and must wash or clean their hands before unloading goods and materials. Delivery



Controlled site access for COVID-19

## Cleaning to prevent contamination

Enhanced cleaning procedures should be in place across all sites to prevent cross contamination, particularly in communal areas and at touch points including:

- Taps and washing facilities
- Toilet flush and seats
- Door handles and push plates
- Handrails on staircases and corridors
- Lift and hoist controls
- Machinery and equipment controls
- Food preparation and eating surfaces
- Communications equipment
- Keyboards, photocopiers, and other office equipment
- Rubbish collection and storage points should be increased and emptied regularly throughout and at the end of each day
- Regular cleaning of site welfare facilities, handrails and touch points should be undertaken.



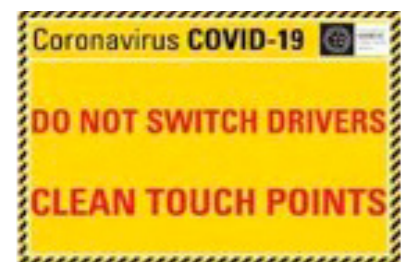
Contact points within a vehicle

- Steering wheel
- Gearstick
- Handbrake
- Door handles
- Radio and infotainment controls
- Steering column (indicators, windscreen wipers, cruise control)
- Elbow rests
- Seat position controls
- Door frame

## 11 PREVENTION OF CROSS CONTAMINATION (CONT)

### Tools, equipment and plant

- All tools and equipment should be properly sanitised to prevent cross contamination.
- Arrangements should be made for one individual to use the same tool, equipment and plant as much as possible. Make available cleaning material for all.
- Tools to be wiped down with disinfectant between each user. Organise work practices to reduce, eliminate or reduce transmission points and coach site personnel on the same.
- Cabs and touch points of site vehicles and plant (MEWPS, excavators, cranes, etc) to be thoroughly cleaned and a cleaning regime by plant operatives should be maintained daily thereafter.
- Consider provision of stickers for tools, equipment and mobile plant to encourage disinfection.



Contact points within a mini digger

Examples of stickers to promote controlled use of mobile plant/equipment

## 12 COVID-19 COMPLIANCE OFFICER

**This section is intended to outline the role and duties of a COVID-19 Compliance Officer for sites of all sizes in line with the Scottish Government's recommendations to monitor physical distancing.**

It is important that the right candidate is appointed/ selected as a COVID-19 Compliance Officer.

Projects must assess how many COVID-19 Compliance Officers are required depending on size, environment, number of personnel and the work activity to be monitored. COVID-19 Compliance Officer's duties should be shared among all contracting companies on a project.

**Physical distancing compliance is the responsibility of everyone.**

A back-up must be available in the event of a COVID-19 Compliance Officer going on training, annual leave or being off sick.

Details of the assigned COVID-19 Compliance Officer to be communicated on site safety notice boards.

### Role of a COVID-19 Compliance Officer

- The role of a COVID-19 Compliance Officer is to monitor the site activities to ensure physical distancing and hygiene rules are being maintained to protect health and reduce the spread of the COVID-19 virus.
- These key personnel should be clearly identifiable on-site with a distinguishable high-vis vest with COVID-19 Compliance Officer written on it, similar to the illustration provided.
- The person undertaking the role must receive training in what the role will entail.
- Ensuring compliance to the 2m physical distancing rule and good hygiene is not the sole responsibility of the COVID-19 Compliance Officer. Their role is supported by all site management and workers.
- Site management must communicate to all on-site details of the appointed COVID-19 Compliance Officer(s).
- A COVID-19 Compliance Officer must not put themselves at risk while carrying out their duties.
- COVID-19 Compliance Officers must have a



structure or framework to follow within the organisation to be effective in preventing the spread of COVID-19. This structure must be regularly audited and managed to ensure it works and protects all on-site. Failure to take it seriously could result in an outbreak of COVID-19 on-site.

### Responsibilities of a COVID-19 Compliance Officer

COVID-19 Compliance Officer's responsibilities and duties fall broadly into two categories:

1. Proactive day-to-day duties
2. Reactive emergency duties

## 12 COVID-19 COMPLIANCE OFFICER (CONT)

### Proactive day-to-day duties of a COVID-19 Compliance Officer

- Ensure personnel on-site complete relevant COVID-19 questionnaires/declarations.
- Being a constant on-site presence to monitor compliance with physical distancing of 2m between all personnel on-site (with the exception of planned close working). In instances where there is non-conformance with physical distancing, the COVID-19 Compliance Officer is to intervene.
- Maintain a log of regular monitoring of COVID-19 controls on-site, completing inspection checklist.
- Ensure there is sufficient up to date signage erected onsite to educate all personnel about the COVID-19 controls on-site.
- At all times promote and coach good hygiene practices to all personnel on-site.
- Ensure regular cleaning of welfare facilities, handrails, door handles, etc is undertaken. Ensure hand wash liquid/soap and hand sanitisers are replenished as required.
- Check hot water and hand drying facilities are available on-site.
- Make representations to site management with regards to any COVID-19 concerns raised by site personnel to the COVID-19 Compliance Officer.
- Ensure site personnel are adhering to staggered break time schedules and limiting numbers in canteens, drying rooms, and smoking areas cognisant of the 2m physical distancing guideline.
- Ensure site personnel leaving site at designated breaks remove their site PPE and continue to adhere to physical distancing guidelines.

- Report any areas of non-compliance to site management and ensure these are addressed.
- Consider provision of additional controls for exceptional circumstances.
- Keep up to date on Scottish Government guidelines.

### Reactive COVID-19 Compliance Officer duties

While the main role of the COVID-19 Compliance Officer is to prevent the spread of COVID-19 on-site, there is the potential situation where an individual on-site may experience COVID-19 symptoms and where the COVID-19 Compliance Officer needs to react.

In a reactive position, their responsibilities include:

- Informing site management if there is a confirmed case or if they have been made aware of an individual with COVID-19 symptoms.
- Isolating an individual with symptoms in an isolation room/segregated area away from other personnel.
- Following site protocol for individuals with COVID-19 symptoms. (i.e. send home, inform them to contact prevention).
- Assisting in contact tracing should there be a confirmed case of COVID-19.

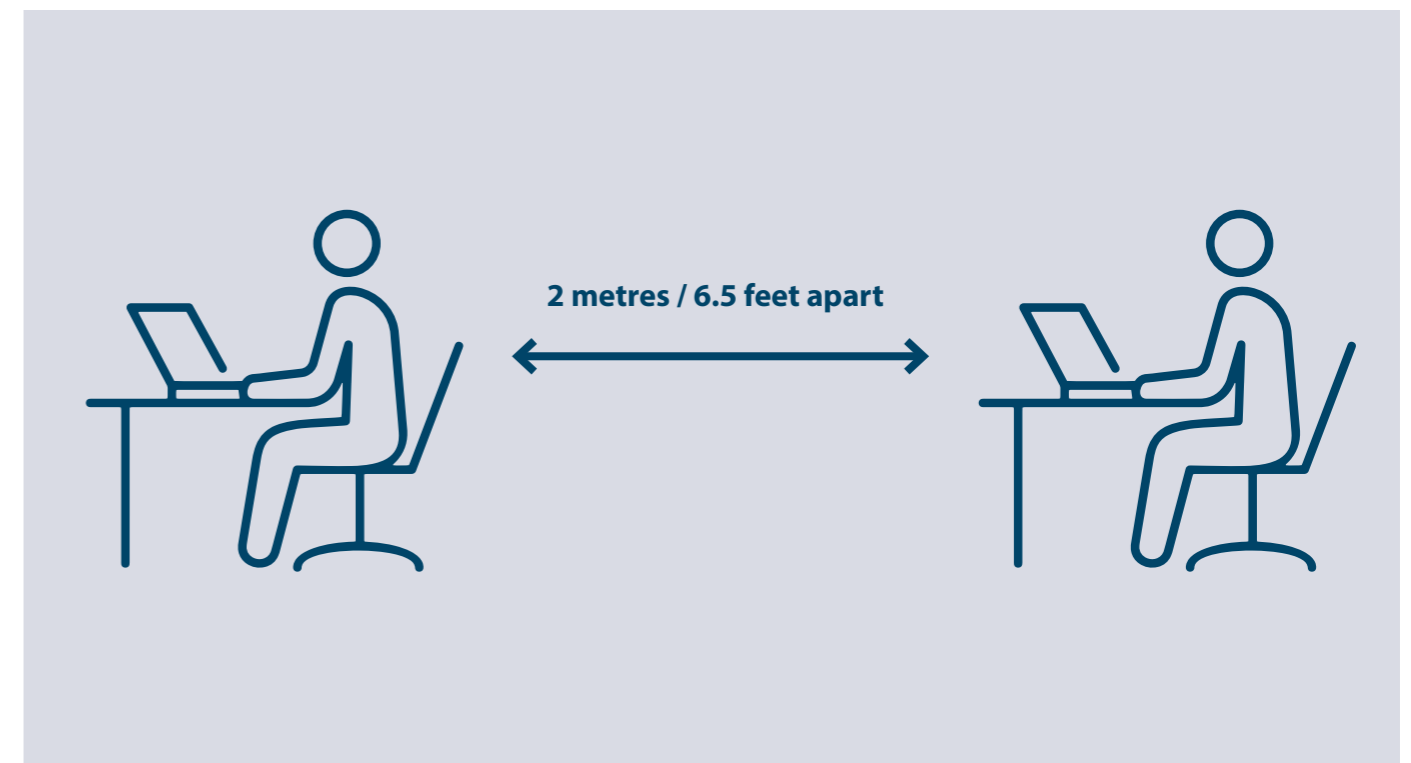
## 13 COMMUNAL AND WELFARE AREAS

### Office arrangements

- All non-essential site personnel should be encouraged to work from home where possible – usual supports required.
- Personnel working in site offices should be dispersed so there is always a physical distance of 2m.
- Eliminate non-essential visitors attending offices.
- Use IT software to support online meetings both in and out of the office.
- Keep workstation surfaces clear and wipe with disinfectant regularly.
- Hand sanitiser should be made available at main entry and exit points.
- Keep main doors open where possible to reduce persons touching door handles etc.
- Increase the cleaning regimes including a wipe down with disinfectant on door handles, stair rails etc at regular intervals throughout the day.

### Toilet facilities

- Restrict the number of people using toilet facilities at any one time. Ensure there is a physical distance of 2m maintained while using the toilet facility.
- Implement appropriate COVID-19 hygiene regime.
- Ensure soap and hand washing pictorial guides provided for washing hands are clearly visual and in a form, manner and language understood by all.
- Enhance the cleaning regimes for toilet facilities, particularly door handles, locks and the toilet flush handle.
- Provide suitable and sufficient rubbish bins for hand towels with regular removal and disposal.



Office space

## 13 COMMUNAL AND WELFARE AREAS (CONT)

### Canteens and eating arrangements

The following is suggested to ensure a physical distancing of 2m.

- While there is a requirement for construction sites to provide a means of heating food and making hot drinks, a pandemic is an exceptional circumstance and workers attending site canteens should be advised where possible to bring a packed lunch and flask to help eliminate transmission points on microwaves and water pour points etc.
- Break times should always be staggered to reduce congestion and contact.
- Site personnel must be encouraged to wash their hands before eating.
- Hand cleaning facilities or hand sanitiser should be available at the entrance and exit of any room where people eat and should be used by all personnel when entering and leaving the area.
- Ensure a seating arrangement where workers sit 2 metres apart from each other while eating and avoid all physical contact with co-workers.
- Where catering is provided on-site, consider the provision of pre-prepared and wrapped food only.
- Payments should be taken by contactless card wherever possible.
- Tables should be cleaned between each use and sitting based on rota.
- All rubbish should be disposed of in a suitable bin.

- Tables should be clear when finished eating.
- All areas used for eating must be thoroughly cleaned after each use, including chairs, door handles, vending machines and payment devices etc.
- Provide illustrations of 2m spacing to clearly demonstrate social distancing.
- Handles on kettles, microwaves, fridges, etc should be cleaned regularly or between each use.

### Drying rooms

The following is suggested to ensure a physical distancing of 2m.

- Introduce staggered start and finish times to reduce congestion and contact at all times.
- Introduce enhanced cleaning of all facilities throughout the day and at the end of each day.
- Consider increasing the number or size of facilities available on site if possible.
- Based on the size of each facility, determine how many people can use it at any one time to maintain 2m.
- Provide suitable and sufficient rubbish bins in these areas with regular removal and disposal.
- Identify 2m physical distancing areas.
- Remove all unnecessary items.

## 14 SITE WALKWAYS AND GENERAL ACCESS

To assist with physical distancing, consider the following:

- A one-way system on access routes throughout the site where possible. Increasing access points can help establish a one-way system (e.g. an additional HAKI stair to allow for one-way traffic up and down).
- Where a one-way system is not possible, consider widening pedestrian routes so physical distancing can be maintained on main site walkways.
- Marked up walkways can help give an indication of what 2m spacing looks like.



Physical distancing on-site

## 15 FIRST AID RESPONDER GUIDANCE

- COVID-19 infects people through contact with the mucous membranes. First Aid Responders must think of these as being the mouth, nose, and eyes. **It does not infect through the skin.**
- The greatest element of risk for a First Aid Responder is transfer of the virus to the mucous membranes by contact of contaminated hands (including contaminated gloved hands) with the eyes, nose, or mouth.
- The key interventions to manage this risk are to minimise hand contamination, avoid touching your face and clean your hands frequently with soap and water or alcohol-based hand gel.
- There is also a significant risk of direct transfer of the virus on to mucous membranes by droplet transmission, that is, by direct impact of larger infectious virus droplets generated from the person's respiratory tract landing directly in your eyes, nose, or mouth. This risk is managed by use of appropriate PPE (mask and eye protection) and by providing the ill person with a mask to cover their nose and mouth when coughing or sneezing (respiratory hygiene and cough etiquette).
- If, as a First Aid Responder, you can avoid close contact with a person who may require some level of first aid, do so. This, of course, will not be possible in the event of having to provide emergency life-saving measures such as an incident of cardiac arrest, heart attack, choking or stroke.
- First Aid Responders should be familiar with the symptoms of COVID-19. You will need to perform a 'dynamic risk assessment' based on the scenario you are presented with.

### Key Control Measures

- Standard infection control precautions to be applied when responding to any first aid incident in the workplace. Hand washing with warm water and soap or an alcohol-based hand gel must be performed before and after providing any first aid treatment.
- Any person presenting with symptoms consistent with COVID-19 should be treated as a suspected case.
- In such cases, move individual to a first aid room/ isolated room to minimise risk of infection to others.
- Only one First Aid Responder to provide support/ treatment, where practical.
- Additional PPE (enclosed eye protection and FFP3 mask if available) should be worn by First Aid Responders when responding to all first aid incidents where close contact cannot be avoided. Please also have a mask available to give to the person if they are displaying symptoms consistent with COVID-19 to limit droplet dispersion.
- If you suspect a person has experienced a cardiac arrest, do not listen, or feel for breathing by placing your ear and cheek close to the person's mouth. If you are in any doubt about confirming cardiac arrest, the default position is to start chest compressions only until help arrives. To iterate the point, a person in cardiac arrest should have **compression only CPR** applied.
- Persons with minor injuries (cuts, abrasions, minor burns) – where practical, a First Aid Responder should avoid close contact and advise the injured party what steps to take in treating their injury.
- No reusable equipment should be returned to service without being cleaned/disinfected appropriately.

### PPE Requirements

The following PPE must be available for responding to first aid incidents:

1. **Disposable gloves (nitrile/latex)**
2. **FFP3 or FFP2 face masks**
3. **Disposable plastic aprons**
4. **Enclosed eye protection**

First Aid Responders must ensure that the mask covers both the mouth and nose and is fitted correctly to create an adequate seal to the face.

Following first aid treatment, disposable PPE and any waste should be disposed of appropriately and reusable PPE cleaned/disinfected thoroughly.

Wash hands thoroughly with warm water and soap before putting on and after taking off PPE.

Replenish PPE stock as appropriate. Liaise with your Project Lead or designated person to ensure any issues with first aid PPE are resolved in as timely a manner as possible.

## 16 MANAGEMENT OF MEETINGS

All meetings, where possible, are to be conducted virtually using online systems for remote meetings unless it is absolutely necessary to meet face-to-face. In these circumstances, keep the numbers attending as small as possible, ensuring the mandatory 2m distance apart. The meeting time should be kept as brief as possible.

### Site meetings

- Only 'absolutely necessary' meeting participants should attend.
- Attendees should be 2m apart from each other.
- Rooms should be well ventilated/windows open to allow fresh air circulation.
- Consideration to be given to hold meetings in open areas where possible.

## 17 MANAGEMENT OF DELIVERIES

### Site management should:

- Ensure that all delivery transactions enforce physical distancing.
- Agree a delivery protocol with suppliers and haulers.
- All deliveries must be planned with allocated times for collections/appointments/deliveries.
- Plan for paperless delivery acceptance and acknowledgements with suppliers to ensure materials management and material reconciliations are accurate.
- Ensure that hand washing facilities are available and convenient to set down and goods inward locations.
- Ensure there are appropriate sanitising arrangements at points of site access, egress and set down areas for raw materials and stock.

## 18 CLOSE WORKING

### Once stage 4 of the Construction Leadership Forum phasing has been met, the following guidance should be considered.

This section outlines guidance relating to COVID-19 Particular Risks for short-term work that must be completed where workers are less than 2 metres apart (<2m).

### Elimination of close working

Elimination of close working is preferable and should be investigated.

### For all companies and management putting personnel to work, it is critical that you explore every available option possible before putting personnel to work in < 2m close contact tasks.

Stages of the construction process where <2m tasks can be eliminated/mitigated (including a non-exhaustive list of examples):

- Design – Sections of materials are:
  - 2.5m long or longer, or
  - materials can be installed by an individual (lightweight/ fixings are simplified
  - mechanical means for lifting and access can be used while keeping construction personnel >2m apart
- Planning for work: RAMS/Planning/Sequencing/Coordination/Communication – All tasks planned via a pre-planned safe system of work shall consider eliminating <2m work.
- RAMS must consider elimination of work within 2m as the priority. Where this is not possible, the RAMS must detail the control measures for persons working <2m on the task.

- There are 2 types of work in the <2m transmission zone:
  - A) no physical contact between colleagues
  - B) physical touching will occur (manual handling/pushing-pulling side by side, shared tools and equipment).
- Scenario B is of higher risk than scenario A.
- Scenario A – preferably, personnel shall wear full face shields and gloves. Alternatively, FFP3/FFP2/ surgical masks with eye protection and gloves.
- Scenario B – preferably, personnel will wear full face shields (alternatively, FFP3, FFP2 or surgical masks with eye protection) and should wear gloves and disposable suits. On completion, dispose/make safe any contaminated PPE with specific procedures to be agreed on site.
- If it is possible to erect a physical barrier/safety signage that does not impede the work between colleagues and does not increase work safety hazards (lack of communication/ visibility), please consider your options (e.g. hanging clear plastic/mobile frame with plexiglass).

**Note:** The full-face visor replaces plexiglass as a physical airborne barrier between colleagues provided there is adequate air circulation.

- At the end of the task, all tools and equipment for scenario A and B work must be sanitised properly – as should any surfaces safe to wipe down.
- Forced ventilation internally could be considered for restricted confined spaces.

## 18 CLOSE WORKING

### Why do tasks where personnel are <2m apart require additional focus and daily oversight?

Health Protection Scotland has recommended a 2m safe distance between individuals to avoid transmission hazards. Where a risk assessment identifies work where 2m separation cannot be maintained, additional safety precautions are required to manage the risk.

Requirements for personnel working within 2m of each other:

- No worker has symptoms of COVID-19.
- The close contact work cannot be avoided.
- PPE is present in line with the RAMS/risk assessment.
- An exclusion zone for <2m work will be set up pre task commencement.
- Prior to donning appropriate gloves, personnel shall wash/sanitise their hands thoroughly.

### Oversight:

Following assessment that the task must be completed within the 2m zone and review of controls, the contractor's supervisor may issue a permit, which could be in the form of a checklist or other agreed format.

## 19 COVID-19 SUSPECTED/CONFIRMED CASES

### Suspected COVID-19 case at work

What to do if an employee or a member of the public becomes unwell and believes they have been exposed to COVID-19.

- If someone becomes unwell in the workplace with symptoms such as cough, fever or difficulty breathing, the unwell person should be removed to an area which is at least 2m away from other people. If possible, find a room or area where they can be isolated behind a closed door, such as a staff office. If it is possible to open a window, do so for ventilation. Request the individual to wear a face covering to prevent contamination of area and close by personnel.
- The individual who is unwell should call their doctor and should outline their current symptoms. While they wait for advice, ideally, they should be in isolation or as a minimum remain at least 2m from other people. They should avoid touching people, surfaces and objects and be advised to cover their mouth and nose with a disposable tissue when they cough or sneeze and put the tissue in a bag or pocket then throw the tissue in the bin. If they don't have any tissues available, they should cough and sneeze into the crook of their elbow. If they need to go to the bathroom while waiting for medical assistance, they should use a separate bathroom if available.
- Closure of the workplace is not recommended.
- The management team of the office or workplace will be contacted by Health Protection Scotland to discuss the case, identify people who have been in contact with them and advise on any actions or precautions that should be taken.
- A risk assessment of each setting will be undertaken by Health Protection Scotland with the lead responsible person. Advice on the management of staff and members of the public will be based on this assessment. Health Protection Scotland will also be in contact with the case directly to advise on isolation and identifying other contacts and will be in touch with any contacts of the case to provide them with appropriate advice.
- Advice on cleaning of communal areas such as offices or toilets is outlined later in this document.

### Confirmed COVID-19 case at work

If a confirmed case is identified in your workplace, Health Protection Scotland will provide the relevant staff with advice.

These staff include:

- any employee in close face-to-face or touching contact
- talking with or being coughed on for any length of time while the employee was symptomatic
- anyone who has cleaned up any bodily fluids
- close friendship groups or work groups
- any employee living in the same household as a confirmed case.

**Contacts are not considered cases and if they are well, they are very unlikely to have spread the infection to others.**

- Those who have had close contact will be asked to stay at home for 14 days from the last time they had contact with the confirmed case and follow the home isolation information sheet.
- They will be actively followed up by Health Protection Scotland.
- If they develop new symptoms or their existing symptoms worsen within their 14-day observation period, they should call their doctor for reassessment.
- If they become unwell with cough and/or fever they will be tested for COVID-19.
- 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. Staff who have not had close contact with the original confirmed case do not need to take any precautions and can continue to attend work.

Ref: <https://www.gov.scot/news/coronavirus-covid-19/>

## 20 CLEANING SPACES WITH SUSPECTED/CONFIRMED CASES

- It is recommended that cleaning an area with normal household disinfectant after a suspected COVID-19 case has left will reduce the risk of passing the infection on to other people.
- If an area can be kept closed and secure for 72 hours, wait until this time has passed for cleaning as the amount of virus living on surfaces will have reduced significantly by 72 hours.
- For cleaning purposes, wear a face mask and disposable or washing up gloves. These should be double-bagged, then stored securely for 72 hours before being thrown away in the regular rubbish after cleaning is finished.
- Using a disposable cloth, first clean hard surfaces with warm soapy water. Then disinfect these surfaces with the cleaning products you normally use. Pay particular attention to frequently touched areas and surfaces, such as bathrooms, grab-rails in corridors and stairwells and door handles.
- If an area has been heavily contaminated, such as with visible bodily fluids, from a person with COVID-19, consider using protection for the eyes, mouth and nose, as well as wearing gloves and an apron
- Wash hands regularly with soap and water for 20 seconds and after removing gloves, aprons and other protection used while cleaning.

### Principles of cleaning after the case has left the area

#### Personal protective equipment (PPE)

- The minimum PPE to be worn for cleaning an area where a person with possible or confirmed COVID-19 is disposable gloves and an apron. Hands should be washed with soap and water for 20 seconds after all PPE has been removed.
- If a risk assessment of the setting indicates that a higher level of virus may be present (for example,

where unwell individuals have slept such as a hotel room or boarding school dormitory) or there is visible contamination with body fluids, then the need for additional PPE to protect the cleaner's eyes, mouth and nose might be necessary.

#### Cleaning and disinfection

Public areas where a symptomatic individual has passed through and spent minimal time, such as corridors, but which are not visibly contaminated with body fluids can be cleaned thoroughly as normal.

All surfaces that the symptomatic person has come into contact with must be cleaned and disinfected, including:

- objects which are visibly contaminated with body fluids all potentially contaminated high-contact areas such as bathrooms, door handles, telephones, grab-rails in corridors and stairwells.

Use disposable cloths or paper roll and disposable mop heads, to clean all hard surfaces, floors, chairs, door handles and sanitary fittings, following one of the options below:

- use either a combined detergent disinfectant solution at a dilution of 1,000 parts per million available chlorine
- or*
- a household detergent followed by disinfection (1000 ppm av.cl.). Follow manufacturer's instructions for dilution, application and contact times for all detergents and disinfectants
- or*
- if an alternative disinfectant is used within the organisation, this should be checked to ensure that it is effective against enveloped viruses.

#### Additionally:

- Avoid creating splashes and spray when cleaning.
- Any cloths and mop heads used must be disposed of and should be put into waste bags as outlined below.
- When items cannot be cleaned using detergents or laundered, for example upholstered furniture and mattresses, steam cleaning should be used.
- Any items that are heavily contaminated with body fluids and cannot be cleaned by washing should be disposed of.
- If possible, keep an area closed off and secure for 72 hours. After this time the amount of virus contamination will have decreased substantially, and you can clean as normal with your usual products.

#### Laundry

- Wash items in accordance with the manufacturer's instructions. Use the warmest water setting and dry items completely. Dirty laundry that has been in contact with an unwell person can be washed with other people's items.
- Do not shake dirty laundry, this minimises the possibility of dispersing virus through the air.
- Clean and disinfect anything used for transporting laundry with your usual products, in line with the cleaning guidance above.

#### Waste management

Waste from possible cases and cleaning of areas where possible cases have been (including disposable cloths and tissues):

1. Should be put in a plastic rubbish bag and tied when full.
2. The plastic bag should then be placed in a second bin bag and tied.
3. It should be put in a suitable and secure place and marked for storage until the individual's test results are known.

Waste should be stored safely and kept away from children. You should not put your waste in communal waste areas until negative test results are known or the waste has been stored for at least 72 hours.

- If the individual tests negative, this can be put in with the normal waste.
- If the individual tests positive, then store it for at least 72 hours and put in with the normal waste.



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## 21 STATUTORY TRAINING UPDATES

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### **Construction Skills Certification Scheme (CSCS) card renewal**

The Construction, Design & Maintenance Regulations 2015 still apply on construction projects and therefore, the categories of workers carrying out operations.

### **Renewal of CSCS card**

To renew a CSCS Experienced Operator Registration Card, complete the online form at: [www.cscs.uk.com/applying-for-cards/renew-a-card/](http://www.cscs.uk.com/applying-for-cards/renew-a-card/) and attach a current passport-quality photograph together with an online payment.

### **Replacement CSCS card**

If a CSCS registration card has been lost, stolen or damaged, the owner can apply for a replacement, attaching a current passport-quality photograph together with an online payment. See [www.cscs.uk.com/applying-for-cards/lost-or-stolen-cards/](http://www.cscs.uk.com/applying-for-cards/lost-or-stolen-cards/)

### **First Aid Responder training**

If a First Aid at Work certification has lapsed and they are unable to complete a refresher course, their certification will remain valid until such time that the situation is rescinded. This departure from normal standards shall be limited to the duration of the current COVID-19 outbreak.

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## 22 ADDITIONAL READING

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### **Latest information from health services executive:**

For the most up to date information from health care professionals, members are advised to monitor the PHS website: [www.hps.scot.nhs.uk](http://www.hps.scot.nhs.uk)

### **Posters**

Health Protection Scotland has prepared a package of resource materials that may be displayed in all workplaces and sites. See: [www.hps.scot.nhs.uk/web-resources-container/personal-protective-equipment-ppe-posters-a3](http://www.hps.scot.nhs.uk/web-resources-container/personal-protective-equipment-ppe-posters-a3)

### **World Health Organization (WHO):**

[www.who.int](http://www.who.int)

**Public Health England** **Cleaning and disinfection guidance**

If you have a  or  **stay at home for 7 days**, if you live alone  
**stay at home for 14 days**, if you live with others, including all household members

Only use **NHS 111** if your symptoms get worse or are no better after home isolation

**new and continuous cough** or **high temperature**

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**Stop the spread of coronavirus**

**Wash your hands more often and for 20 seconds**

Use soap and water or a hand sanitiser when you:

- Get home or into work
- Blow your nose, sneeze or cough
- Eat or handle food

Cover your mouth and nose with a tissue or your sleeve (not your hands) when you cough or sneeze and throw the tissue away straight away

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**Cleaning an area with regular household disinfectant** after someone with suspected coronavirus has left will reduce the risk of passing the infection on to other people

The amount of virus living on surfaces will reduce significantly after **72 hours**

If an area can be kept closed and secure, wait until this time has passed before cleaning

Wherever possible, wear disposable or washing up gloves and aprons for cleaning. These should be double bagged, then stored securely for 72 hours then thrown away in the regular rubbish after cleaning is finished

If an area has been heavily contaminated, such as with visible bodily fluids, from a person with coronavirus, **consider using protection for the eyes, mouth and nose** as well as gloves and apron

Using a disposable cloth, first clean hard surfaces with warm soapy water  
 Then disinfect these surfaces with the cleaning products you normally use. Pay particular attention to **frequently touched areas and surfaces**, such as bathrooms, grab-rails in corridors and stairwells and door handles

**Wash hands regularly** with soap and water, **and after removing** gloves, aprons and other protection used whilst cleaning

Site awareness poster

<b>Name</b>				
<b>Date of birth</b>				<b>Age</b>
<b>How do you travel to work? (please circle)</b>	Car	Cycle	Public Transport	Walk
<b>Do you have any of the following? (Please tick)</b>	Moderate to severe asthma (received steroid treatment in last 6 months)			
	Cardiovascular disease			
	Diabetes			
	Chronic respiratory disease or COPD/emphysema			
	Hypertension			
	Problems with your spleen – for example, sickle cell disease or if you have had your spleen removed			
	Chronic liver disease			
	Chronic neurological conditions, such as Parkinson's disease, motor neurone disease, multiple sclerosis (MS), a learning disability or cerebral palsy BMI over 40			
	A weakened immune system as the result of conditions such as HIV and Aids, or medicines such as steroid tablets or chemotherapy			
	Undergoing or recently had cancer treatment			
Are you pregnant (Over 27 weeks)				
<b>How many people do you live with? (please circle)</b>	1 person	2-3 People	4-5 People	6+ People
<b>If you live with people, are any over the age of 70? (Please tick)</b>	Yes		No	
<b>If you live with people, do any of them have the following? (please tick)</b>	Moderate to severe asthma (received steroid treatment in last 6 months)			
	Cardiovascular disease			
	Diabetes			
	Chronic respiratory disease or COPD/emphysema			
	Hypertension			
	Problems with your spleen – for example, sickle cell disease or if you have had your spleen removed			
	Chronic liver disease			
	Chronic neurological conditions, such as Parkinson's disease, motor neurone disease, multiple sclerosis (MS), a learning disability or cerebral palsy			
	BMI over 40			
	A weakened immune system as the result of conditions such as HIV and Aids, or medicines such as steroid tablets or chemotherapy			
Undergoing or recently had cancer treatment				
Are pregnant (Over 27 weeks)				
<b>Have you been in contact with anyone that has shown symptoms or has since</b>	<b>If you answer Yes, you must follow COVID-19 self-isolation advice</b>			
<b>Duress</b>	<b>All operatives should not be returning to site under duress</b>			

Return to Work Questionnaire

## 23 REFERENCE DOCUMENTS (CONT)

Operatives to pass back to internal head office to complete the below:

<b>Is the operative over 65?</b>	Yes = 5 points		No = 0 points	
<b>How do you travel to work? (please circle)</b>	Car	Cycle	Public Transport	Walk
	Minus 1 point	0 points	Plus 2 points	Plus 1 point
<b>Does the operative have any underlying health conditions?</b>	Yes = 5 points		No = 0 points	
<b>How many people do they live with?</b>	1 person		0	
	2 - 3 people		+1 point	
	4 - 5 people		+2 points	
	6+ people		+3 points	
<b>If you live with people, are any over the age of 70?</b>	Yes = Plus 2 points		No = 0 points	
<b>If you live with people, do any of them have the following?</b>	Yes = Plus 2 points		No = 0 points	
<b>Have you been in contact with anyone that has shown symptoms or has since become unwell in the 14 days?</b>	Yes = 11 points – <b>Must follow Covid-19 self-isolation advice</b>			
<b>Final Score</b>				
<b>Low risk</b>	<b>0-6</b>			
<b>Medium risk</b>	<b>7-10</b>			
<b>High risk</b>	<b>11 +</b>			

In the interests of the safety of the people of this site, their families and the community, Site Management ask that you complete the following questionnaire/self-declaration. Your co-operation and support are appreciated. You will be requested to leave the site if you answer YES to questions 1, 2 or 3.

Question	Yes	No
1. Have you been in close contact with anyone who has been confirmed as having COVID-19?		
2. Do you live in the same household with someone who has symptoms of COVID-19 who has been in isolation within the last 14 days?		
3. Do you have any of the following typical COVID-19 symptoms; fever, high temperature, persistent coughing, or breathing difficulties /shortness of breath, loss of taste/smell?		
4. Have you returned to Scotland from another country within the last 14 days?		
If 'YES', where?		

I confirm that I have responded to the questions above truthfully based on my current condition and I commit to advising the site management team and excluding myself from site if this situation changes (i.e. if at a point in the future, I would answer "Yes" to any of the questions).

Name:

Company:

Signature:

Date:

## 23 REFERENCE DOCUMENTS (CONT)

<b>Contract name:</b>		<b>Contract no:</b>			
<b>Inspection undertaken by:</b>		<b>Date / Time</b>			
<b>Location of inspection / Description of works</b>					
Corrective actions are needed please see page 2.					
I confirm that no issues were identified during the inspection					
This topic does not relate to any works taking place.					
Topic		Tick this box	Tick this box	Tick this box	
1	Avoiding public transport - is adequate parking available on site?				
2	Entrance to site - are there hand-washing facilities available?				
3	Has the site stopped all non-essential visitors?				
4	Has the site introduced staggered start and finish times to reduce contact and congestion?				
5	Have signing-in systems been sanitised?				
6	Are site access points being monitored to ensure physical distancing?				
7	Is the 2m physical distancing rule being adhered to at all times and if not, have you considered if the activity needs to continue and if it does, has it been risk assessed?				
8	Does the site regularly clean common contact surfaces in office areas e.g. screens, telephone handsets?				
9	Has the site reduced the number of people in attendance at site inductions holding them outdoors wherever possible?				
10	Are delivery drivers remaining in their vehicles? If not, are they able to wash hands before unloading?				
11	Is soap and hot water readily available?				
12	Is there a monitoring system in place for hand washing facilities to ensure regular cleaning and supplies?				
13	Are there enough rubbish bins for hand towels?				
14	Are all microwaves, kettles and small appliances constantly cleaned in between use?				
15	Has the number of operatives been calculated to use the rest areas and keep 2m apart and have break times been staggered?				
16	Are hand sanitisers available at the entrance to any room where people eat?				
17	Are smoking areas within site available with sanitising and or hand-washing as it is no longer acceptable to smoke on a public road outside of the site due to physical distancing?				
18	Are all tables cleaned in between use?				
19	Is rubbish put straight into bin and not left for others to clear up?				
20	Is there any physical work taking place that requires contact or close proximity? Is a Risk Assessment in place?				
21	Waste management				
22	Is reusable PPE being cleaned at the end of the day?				
23	Is the cleaning regime documented and does it taking into account taps and washing facilities, door handles and push plates, toilet flush and seats, handrails on staircases?				

Section	Observation	Connective section	By whom	By when (Date)	Closed out (Date)

## 23 REFERENCE DOCUMENTS (CONT)

### Coronavirus – A toolbox talk for construction workers

**Reason:** Coronavirus is a highly contagious disease that can have severe effects on people, especially those who are vulnerable. The virus is likely to pass from person to person in communal areas and where it is not possible to maintain safe distances between persons. If a person is infected while working it can be passed on through families and other contacts. You can spread the virus even if you do not have symptoms.

**Outline:** This talk covers the ways to maintain your health while working on construction sites.

#### Getting to work

1. Wherever possible travel to site alone, using your own transport (for example, a car or bicycle).
2. Avoid public transport.

#### On site

1. Wash your hands when you arrive on site, regularly throughout the day (especially if you sneeze or cough and after eating or handling food) and again when you leave site.
2. Always keep at least 2 metres away from other workers. This includes while you are working and during breaks and mealtimes – staggered breaks will help achieve this.

3. Stay on site for your breaks. Do not use local shops. Bring your own meals and refillable drinking bottles. Do not share items (for example, cups).
4. Only hold meetings that are absolutely necessary. Ideally, these should take place outdoors, with the minimum number of people and those people should be kept at least 2 metres apart.

#### Close work

Close working should be avoided.

1. Non-essential physical work that requires close contact between workers should not be carried out.
2. Work requiring skin-to-skin contact should not be carried out.
3. All other work should be planned to minimise contact between workers.
4. Re-usable PPE should be thoroughly cleaned after use and not shared between workers.
5. Single use PPE should be disposed of so that it cannot be reused.
6. Stairs should be used in preference to lifts or hoists.

### Cleaning

Extra cleaning should be carried out on site, particularly in the following areas.

1. Taps and washing facilities.
2. Toilet flush and seats.
3. Door handles and push plates.
4. Handrails on staircases and corridors.
5. Lift and hoist controls.
6. Machinery and equipment controls.
7. Food preparation and eating surfaces.
8. Telephone equipment.
9. Keyboards, photocopiers and other office equipment.

#### What to do if you think you are ill

If you develop a high temperature or a persistent cough while at work, you should:

1. Report this to your supervisor.
2. Avoid touching anything.
3. Cough or sneeze into a tissue and put it in a bin or, if you do not have tissues, cough, and sneeze into the crook of your elbow.
4. Return home immediately.
5. You must then follow the guidance on self-isolation and not return to work until your period of self-isolation has been completed.

### Self-isolation

If you have any one of the following criteria, do not come to site.

1. A high temperature or a new persistent cough – follow the guidance on self-isolation.
2. Are a vulnerable person by virtue of age, underlying health condition, clinical condition or pregnancy.

#### Living with other people

The rest of your household do not need to start shielding themselves, but they should do what they can to support you in shielding and to carefully follow guidance on social distancing.

#### Site policy

Now inform your workers of the site-specific policy on coronavirus.

### Follow the 2 metre rule at all times.

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## CURRENT MEMBERS OF THE CONSTRUCTION INDUSTRY CORONAVIRUS (CICV) FORUM:

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- Association for Consultancy and Engineering (ACE)
- British Construction and Steelwork Association (BCSA)
- Builders Merchants Federation (BMF)
- Building Engineering Services Association (BESA)
- Chartered Institute of Architectural Technologists (CIAT)
- Chartered Institute of Building (CIOB)
- Civil Engineering Contractors Association (CECA Scotland)
- Construction Plant-hire Association (CPA)
- Electrical Distributors' Association (EDA)
- Federation of Master Builders (FMB)
- Finishes and Interiors Sector (FIS)
- Lift and Escalator Industry Association (LEIA)
- National Federation of Roofing Contractors (NFRC)
- Royal Incorporation of Architects in Scotland (RIAS)
- Royal Institution of Chartered Surveyors (RICS)
- Scaffolding Association
- Scottish Building Federation (SBF)
- Scottish Contractors Group
- Scottish Plant Owners Association (SPOA)
- SNIPEF
- SELECT
- Stone Federation (GB)

### Further information



[www.cicvforum.co.uk](http://www.cicvforum.co.uk)



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