COVID-19 Walk-through Risk Assessment

(Document prepared by the Risk Assessment Group within the Occupational Health and Safety Workstream of the National Department of Health – Covid-19 Response)

> **Please note: This is an <u>interim guide</u> that may be updated as the outbreak in South Africa intensifies, to guide additional workforce preserving strategies**
> **Version 1, 17 April 2020**

Purpose

This tool is to be used by Occupational Health and Safety professionals at workplaces to assess:
- the potential risk of exposure to SARS-CoV-2 virus;
- current control measures; and
- provides recommendations for their management.

Objectives

i)   To identify and assess the potential risk of exposure to SARS-CoV-2 virus at workplaces
ii)   To identify control measures (or the absence of control measures) and assess their effectiveness to prevent exposure
iii)   To inform the management of the risk of potential exposure to SARS-CoV-2 virus and additional controls that might be required.

Guidance note (example of a health facility)

Anticipated high exposure areas that will need immediate assessment, then others that will require assessment, less urgently include the following areas:

1. Entry points to the workplace
2. Change house facilities
3. On-site canteen and similar dining areas
4. Waiting areas
5. Evacuation and gathering places
6. Etc.

COVID-19 Walk-through risk assessment				
Site:	Sector*:	Date:		
Department:		Risk Assessor:	Name & Surname	Signature
Work Area/s:		Area Supervisor:	Name & Surname	Signature
Occupations in Area:		Health & Safety Representative:	Name & Surname	Signature

*Mining, Agriculture, Fishing, Forestry, Manufacturing, Service

COVID-19 Walk-trough risk assessment summary of non-compliance				
Requirement	**Finding**	**Recommendation**	**Responsible person**	**Due date**

No	Requirement	Status			Comments
		Yes	No	NA	
1.	**Basic education & awareness campaigns**				
1.1	Staff COVID-19 education/communication programme				
1.2	Contractor staff COVID-19 education/communication programme				
1.3	PPE donning and doffing training programme				
1.4	Health status self-monitoring and reporting /or questionnaire for employees				
2.	**Hygiene / cleaning measures**				
2.1	Work surfaces are decontaminated with appropriate disinfectants at appropriate intervals				
2.2	Equipment are decontaminated before and after use				
2.4	Hand washing basin is present (located near room exit)				
2.5	Soap and paper towel available at handwashing basin				
2.6	Hand washing procedure is done, on entering the workplace, after removing PPE, and before leaving the workplace)				
2.9	Additional sanitation facilities (e.g. hand sanitizers, etc.) at door entrances				

3.	**Reduce physical contact (social distancing)**				
3.1	Facility access and visitation is limited or restricted				
3.2	Limits crowds or gatherings (e.g. large groups >10 or groups in restricted spaces)				
3.3	Discourage physical contact of employees (e.g. handshakes, hugs)				
3.4	Closure of communal areas (e.g. gyms)				
3.5	Scatter dining and 1.5-meter distance while dining and not sitting face-to-face. Separate utensils and frequent disinfect.				
3.6	Eliminate frequent contact of surfaces (e.g. leave door open were possible)				
3.7	Stagger tea and lunch breaks to limit employee groupings				
3.8	Working places rearranged to ensure maximum distance between employees				
3.9	No clustering at in elevators. Elevators not to take more than 50% of their carrying capacity.				
3.10	Employees, contractors and visitors entering the facility are screened for COVID-19 symptoms				
3.11	Employees, contractors and visitors entering the facility who screen positive for COVID-19 symptoms are immediately provided with 'patient' masks.				
3.12	PUIs are chaperoned to the next point at the workplace and preferably, a cordoned-off walkway (or at least marked walkway) is present directing the PUI to the next point at the workplace.				
3.13	An isolation zone is provided for PUIs and the isolation zone allows for 1.5 m spacing, presence of barriers, etc.				
4.	**Engineering control measures**				
4.1	Mechanical ventilation is in working order (inward flow, not recirculated to other areas of building, HEPA filtered when reconditioned and recirculated in laboratory, exhausted air discharged through HEPA filters)				
4.2					
4.3					
4.3	Sufficient air changes and indoor air quality of an acceptable standard				

4.4	Physical barriers / screens as a barrier between personnel and visitors				
4.5	If A/C must be used, disable re-circulation of internal air. Weekly clean/disinfect/replace key components and filters.				
5.	**Administrative controls**				
5.1	Reliable and sustainable source for procurement of key components, including PPE				
5.2	Adequate supplies of PPE, sanitary materials and cleaning products				
	Procedures are in place for personnel to self-check and/or supervisors and colleagues to verify that all relevant PPE is used by personnel during all shifts (e.g. checklists, briefing sessions etc.)				
5.3	Emergency communication plans are current and in place				
5.4	Access to psychological support services				
5.5	Is the COVID-19 Infection Prevention and Control Guidelines for South Africa available, and have they been explained to employees?				
6.	**Personal Protective Equipment**				
6.1	PPE is selected based on a documented risk assessment, and should meet the minimum recommendations without using excessive PPE for the setting/task				
6.2	PPE must be available in the appropriate sizes				
6.3	Disposable gloves				
6.4	Disposable plastic apron				
6.5	Closed shoes, non-slip soles and shoe covers				
6.6	Eye protection (goggles/face shield or visors)				
6.7	Respiratory protection (FFP2/N95 or better respirators) for high risk situations (e.g. aerosol-generating procedures), and surgical masks for infectious persons				
6.8	Each employee has been supplied with a minimum of two cloth masks?				
6.9	PPE is consistently and properly worn when required				
6.10	PPE is regular inspected, maintained and replaced, as necessary				

6.11	PPE is properly removed, cleaned, and stored or disposed of, as applicable, to avoid contamination of self, others, or the environment.				
6.12	Documented respiratory fitment programme that includes fit testing, training, and medical assessments				
6.13	Facial hair (clean shaving) policy for areas where respirators are mandatory.				
7.	**Safe work practices**				
7.2	Eating, drinking, application of cosmetics and smoking in workplaces is prohibited				
7.3	No storage of food or drink or personal items (coats, bags) in work area				
7.4	Materials (pens, pencils, gum, etc.) is not placed in the mouth while in the laboratory or clinical setting				
7.7	Mobile electronic devices kept in areas where they cannot be contaminated, if not decontaminated frequently				
7.8					
7.9	Working places rearranged to ensure maximum distance between employees				
8.	**Waste management**				
8.1	Waste management policy and contract with service provider				
8.2	Waste management contractor complies with occupational health and safety requirements for their employees.				
8.3	Records of waste removal, destruction, and treatment available				
10.	**Emergency response**				
10.1	Response plan in case someone becomes ill with symptoms of COVID-19 in the workplace				

10.2	Suspected COVID-19 case isolation areas and protocols				
10.3	System to track and trace potential interactions				
10.4	Self-quarantine protocols available and current				