

COVID-19 POLICY

THE ANNER HOTEL hopes that our response to this outbreak will be measured, managed and controlled proactively as a result of this policy. It is designed to ensure everyone acts pragmatically and proactively to ensure the health and safety of all staff and to maintain business continuity at this time.

The Anner Hotelis morally and legally obliged to take reasonable steps to ensure the safety, health and welfare of all employees, clients, visitors and the public. As an employee you are obliged, by law, to safeguard yourself and your work colleagues by complying with the regulations set out in the Health, Safety and Welfare Act, 2005. The 2005 Act places a general duty of care on employers to ensure, so far as is reasonably practicable, the safety, health and welfare at work of his or her employees. Duties include the provision of facilities, arrangements, information and instruction for the welfare of employees at work. Employees also have obligations under this Act to ensure that they do not pose a threat to the safety of others in their workplace.

The Anner Hotelwill take all necessary and appropriate measures to fulfil our duty of care and protect the health of our staff.

COVID-19 poses a significant threat to employee's health and safety, which applies whether staff are working in the office or remotely from home. The 2005 Act requires employers to, amongst other things:

- ⇒ manage and conduct working activities in a way to prevent any improper conduct or behaviour likely to put the safety, health and welfare of its staff at risk;
- ⇒ provide systems of work that are planned, organised, performed, maintained, safe (as reasonably practical) and without risk to health;
- ⇒ provide information and instruction to staff on health and safety; and
- ⇒ provide protective clothing and equipment to staff.

The Anner Hotelcommits to:

1. Closely monitoring local conditions and developments along with national and international developments, as the COVID-19 situation continues to evolve. Regular review of the HSE and WHO guidelines is being conducted by [THE COMPANY]. HSE guidelines and posters are displayed throughout the premises. Guidelines have been circulated to all staff.
2. Reviewing, on an ongoing basis, the instructions we have given staff for effectiveness, sustainability and practicality. Amend/ update measures as required or as further guidance is issued.
3. Making sure that staff are aware of the bespoke policies, protocols and practices that apply to our workplace, for example, regarding enhanced cleaning or face-to-face contact with the public, contractors, suppliers etc.
4. Continuing to provide a safe place of work and systems of work.
5. Ensuring that common work areas are cleaned regularly and maintained to a high standard and that clean hand washing facilities are available.
6. Issuing regular instructions concerning hygiene in the workplace as well as seeking feedback from Staff on potential improvements.

Remember your own responsibility for maintaining good personal and respiratory hygiene, such as washing your hands with soap, avoiding touching your mouth, nose and eyes, disinfecting the workplace, and so on.

EMPLOYER RESPONSIBILITIES

- ⇒ **Protection of Employees.** Where staff fall within the definition of an "essential worker" providing an "essential service" that cannot be performed at home, they may travel to and from the workplace to conduct that activity. Employers of essential staff should conduct a risk assessment to identify measures to protect such staff, minimise risk to their health and safety and, in particular, prevent (to the extent possible) their exposure to COVID-19 in the workplace. Certain staff may be more at risk, for example staff whose duties include face-to-face contact and staff who are categorised as more vulnerable or "at risk" by the Government.
- ⇒ **Risk assessment.** Conduct a COVID-19 risk assessment and put in place appropriate preventative and protective measures, whether staff are working on site or at home. Where the control of infection measures implemented requires changes to work activities, the employer will review and update the H&S risk assessments and safety statement in order to take account of any changes.
- ⇒ **Safety Statement.** Update of the current Safety Statement to reflect changes due to COVID-19.
- ⇒ **COVID-19 Response Plan.** Develop/ update a COVID-19 Response Plan. Identify COVID-19 response team & designated isolation area(s). As more information comes to light and advice is updated, employers and workers must ensure flexibility to meet measures to reduce the spread.
- ⇒ **Appoint Responsible Persons.** The lead worker representative(s), referred to as COVID-19 Safety Champion, must be appointed by management and receive suitable training. They will be involved in communicating the health advice around COVID-19 in the workplace.
- ⇒ **Pre Return Questionnaire.** Where staff are requested to return to work, a pre-return to work form must be issued to staff and completed at least 3 days prior to returning to the workplace. This form will seek confirmation that the employee, to the best of their knowledge, has no symptoms of COVID-19 and confirm they are not self-isolating or awaiting test results. Where staff have remained in active employment, it is recommended they complete this form also. This can also be used for any return to work following an absence.
- ⇒ **Induction.** A COVID-19 induction must be provided for all staff prior to working whereby the latest up-to-date advice and guidance on public health is addressed, as well as control measures implemented within the workplace such as:
 - What an employee should do if they develop symptoms of COVID-19;
 - Details of how the workplace is organised to address the risk from COVID-19;
 - An outline of the COVID-19 response plan;
 - Identification of points of contact from the employer and staff.

Employer Responsibilities Cont'd...

- ⇒ **Engagement with staff.** Develop plans in consultation with employees and communicate once finalised. Communicate with staff regularly and encourage staff engagement with virtual meetings and check-ins, where relevant. Ensure any actions taken are applied in a reasonable and consistent manner. All of the public health and occupational health and safety measures should be developed in consultation with employees and ultimately communicated to employees and others at the workplace. Strong communication and a shared collaborative approach between employers and employees is key to protecting against the spread of COVID-19 in the workplace.
- ⇒ **Education.** Educate staff on effective methods of infection prevention such as good hand hygiene, respiratory etiquette and physical distancing. Display information on signs and symptoms of COVID-19 throughout the workplace. Provide instruction for staff to follow if they develop signs and symptoms of COVID-19 during work. Make available advice and training on how to perform hand hygiene effectively as well as good respiratory practise.
- ⇒ **Stay informed and keep under review.** Regularly check the Department of Health and the WHO's website for the most up to date information and advice. Provide up to date information on the Public Health advice issued by the HSE and Gov.ie. Employers will implement new control measures in line with Public Health advice. Information about the virus is evolving so to will the public health advice.
- ⇒ **Good hand hygiene.** Communicate the messages about regular handwashing, to most effective way to wash hands and using hand sanitisers when entering and leaving the premises. Where applicable educate staff on protective equipment.
- ⇒ **Respiratory etiquette.** Communicate the messages about sneezing and coughing into your elbow, sneezing and coughing into a tissue, safe disposal of a tissue, washing hands afterwards etc.
- ⇒ **Physical distancing.** Provide for physical distancing across all work activities where deemed necessary. In settings where 2 metre worker separation cannot be ensured by organisational means, alternative protective measures should be put in place by management.
- ⇒ **Cleaning.** Implement thorough and regular cleaning of frequently touched surfaces and ensure more frequent cleaning practises are undertaken where surfaces are considered high touch points.
- ⇒ **Disinfection.** Implement thorough and regular disinfection of frequently touched surfaces and ensure more frequent disinfection practises are undertaken where surfaces are considered high touch points.

Employer Responsibilities Cont'd...

- ⇒ **Vulnerable workers.** Take into account an employee's individual risk factors e.g. presence of underlying medical conditions, older workers etc. If an at risk or vulnerable worker cannot work from home and must be in the workplace, employers must make sure that they are preferentially supported to maintain a physical distance of 2 metres. However, employers should enable vulnerable workers to work from home where possible. A person specific risk assessment may be required.
- ⇒ **Personal Protective Equipment.** Appropriate protective and preventative measures should be identified by means of a COVID-19 Risk Assessment and put in place by way of a contingency plan. Employers should ensure that staff are frequently provided with appropriate up-to-date information and educated on the potential risks associated with their role and any preventative steps staff should take e.g. regular handwashing, social distancing, cleaning frequently touched surfaces etc.
- ⇒ **Contact Tracing.** Employers will additionally keep a log of contact/group work to facilitate contact tracing and inform staff and others on the purpose of the log. Employers will display information on the signs and symptoms of COVID-19 and provide up to date information on the public health advice issued by HSE and GOV.ie. Temperature testing will be implemented in line with Public Health advice. The HSE contact tracing guidelines identified key groups; 1) Those sharing accommodation with a person displaying symptoms; 2) Those who have spent more than 15 minutes less than 2 metres away from them; 3) Someone who has shared a closed space with a confirmed case for more than two hours. Persons likely to qualify will be employees (e.g. meetings) and visitors (e.g. contractors) who engage in contact/ group work and/or satisfy the above.

Multiple trackers may be required where there are various departments, zones, areas, floors etc. These can be brought together into one master company log. Should a suspected or confirmed case arise you may be asked about the contact log book and who they worked with to determine who also needs to isolate.

- ⇒ **Home Working.** Where staff are working remotely from home, a risk assessment should be conducted to assess what risks are posed by this, potentially new way of working e.g. feelings of isolation and stress. Employers can then determine ways to mitigate these risks, for example, by way of frequent virtual check-ins and meetings with staff. Employers should ensure that assessments are undertaken to ensure, as far as is reasonably practicable that the employee's work station is in line with requirements. Office work should continue from home, where practicable and non-essential work.
- ⇒ **Customer Facing Roles.** Consider work activity that involves direct customer or visitor contacts. Where possible eliminate physical interaction through revised working arrangements. Provide hand sanitisers at entry/ exit points. Install physical barriers and clear markings to keep contact to a minimum and manage queues. Implement cleaning regime to ensure contact points for workers and customers/ guests are visibly clean. Display COVID-19 advice in key locations to encourage compliance.

Employer Responsibilities Cont'd...

⇒ **Isolation room.** The Return to Work Safely Protocol requires an employer to designate an isolation area in advance. This area and the route to the area should be easily accessible. The designated areas should have the ability to isolate the person behind a closed door. Where reasonably practicable provide ventilation via a window, tissues, hand sanitiser, disinfectant/ wipes, PPE, gloves, masks, clinical waste bags. Ensure the area is regularly cleaned and disinfected.

Where a closed door/ separate area isn't possible, the employer must provide for an area away from other workers. It is necessary to show that necessary steps have been taken to provide a suitable alternative. Use the natural design of your premises, or create a screen, a natural divide or temporary structure which could be erected etc. If it is absolutely not possible to provide for an isolation room or area then consider asking the person to go to their vehicle or where not possible to have an area or solution as detailed above, then arrange for employee to leave the premises.

Therefore to summarise, in order of preference:

1. Provide a room with a closed door
2. Provide a separate area
3. Provide an area closed off using a screen, natural divide or temporary structure
4. Ask person to go and wait in their vehicle
5. Arrange for the person to leave the premises

EMPLOYEE RESPONSIBILITIES

Employees are required to

- ⇒ Follow the public health advice and guidance as well as any specific direction from the employer
- ⇒ You must make yourself aware of the signs and symptoms of COVID-19 and monitor your own well being.
- ⇒ Complete the COVID-19 Induction and sign the '**COVID-19 Induction Sign Off**' sheet.
- ⇒ Complete the '**Contact/ Group Log Tracing- COVID-19**' form as required.
- ⇒ You must stay at home and not come to your workplace if you're feeling ill or have a common cold/fever or similar so you don't affect your colleagues. Stay home and self-isolate even with minor symptoms such as cough, headache, mild fever, until you recover. Contact your manager immediately if any symptoms develop during work.
- ⇒ Seek professional healthcare advice if unwell.
- ⇒ Adhere to social distancing rules where they have been implemented across the workplace.
- ⇒ Adopt good hygiene practices such as:
 - Wash your hands properly and often.
 - 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.
 - Physical distancing.
 - Don't make contact with face especially eyes, nose and mouth.
- ⇒ Clean and disinfect frequently touched objects and surfaces.
- ⇒ Avoid close contact with people who are unwell.
- ⇒ Follow the travel advice from the Department of Foreign Affairs.
- ⇒ Follow company policy with regards to returning from annual leave, returning from annual leave abroad or travelling for work abroad.
- ⇒ Provide feedback to management.
- ⇒ Complete the '**Weekly COVID-19 symptom checklist**'

COVID-19 SAFETY CHAMPION

The Company recognises our responsibility to appoint at least one lead worker representative, otherwise known as the COVID-19 Safety Champion.

The number of COVID-19 Safety Champions appointed will be proportionate to the number of employees in the workplace, therefore there could be more than one person appointed to this role.

They will:

1. Work collaboratively with the employer to assist in the implementation of measures to prevent the spread of COVID-19
2. To monitor adherence to the measures to prevent the spread of COVID-19
3. Work together with the COVID-19 response management team to support the implementation of measures contained within the Return to Work Safely Protocol.
4. Be clearly identifiable in the workplace.
5. Receive relevant and necessary training by the employer.

The following employees have been assigned the role of COVID-19 Safety Champion in compliance with the Government Return to Work Safely Protocol:

COVID-19 RESPONSE PLAN

Organisations should plan and implement a COVID-19 business continuity plan to minimise disruption to operations and ensure that the business remains viable during the national COVID-19 outbreak as well as local outbreaks that may occur in the community where the business operates or indeed within the business itself. Organisations should use the national resources, posters and guidance that are available from reputable sources and updated on a regular basis to reflect the rapidly emerging situation. This preparation should also include a COVID-19 Response Plan in the event of a suspected or confirmed case of COVID-19 in the business.

The COVID-19 response plan and procedures should:

- ⇒ Be specific regarding the immediate steps that are to be taken during a disruption;
- ⇒ Be flexible to respond to the changing internal and external conditions of a disruption;
- ⇒ Focus on the impact of incidents that potentially lead to disruption;
- ⇒ Be effective in minimising the impact through the implementation of appropriate solutions;
- ⇒ Assign roles and responsibilities for tasks within them, appoint an appropriate manager (s) for dealing with suspected cases.
- ⇒ Identify isolation areas and ensure the designated area has the ability to isolate the person behind a closed door.
- ⇒ Organisations should provide as is reasonably practicable: ventilation, tissues, hand sanitiser, disinfectant, appropriate PPE, clinical waste bags.

The company will ensure that all persons working under our control (e.g. staff, contractors, suppliers) are aware of the COVID-19 response plan including;

- ⇒ Their contribution to the effectiveness of the COVID-19 plan;
- ⇒ The implications of not conforming with the COVID-19 plan and requirements;
- ⇒ Their own role and responsibilities before, during and after disruptions.

The company will carry out an assessment of any COVID-19 related incident which will form part of determining follow-up actions and recovery.

Dealing with a suspected case of COVID-19 in the workplace

As per Return to Work Safely Protocol

If a worker displays symptoms of COVID-19 during work, the manager and the response team must:

1. Isolate the worker and have a procedure in place to accompany the individual to the designated isolation area via the isolation route, keeping at least 2 metres away from the symptomatic person and also making sure that others maintain a distance of at least 2 metres from the symptomatic person at all times.
2. Provide a mask for the person presenting with symptoms if one is available. The worker should wear the mask if in a common area with other people or while exiting the premises.
3. Assess whether the unwell individual can immediately be directed to go home and call their doctor and continue self-isolation at home.
4. Facilitate the person presenting with symptoms remaining in isolation if they cannot immediately go home and facilitate them calling their doctor. The worker should avoid touching people, surfaces and objects. Advice should be given to the person presenting with symptoms to cover their mouth and nose with the disposable tissue provided when they cough or sneeze and put the tissue in the waste bag provided.
5. Arrange transport home or to hospital for medical assessment. Public transport of any kind should not be used. Recommend having a next of kin or buddy system in place where contact details can be provided to the employer in the event that they may need assistance to get home.
6. Carry out an assessment of the incident which will form part of determining follow-up actions and recovery.
7. Arrange for appropriate cleaning of the isolation area and work areas involved.
8. Provide advice and assistance if contacted by the HSE.

The plan that needs to be followed in the event of a suspected case of COVID-19 must be practiced as any emergency preparedness plan would be e.g. fire evacuation drills. By practicing the plan and the routines it builds confidence among management and employees alike and ensure effective control of potential infection and/ or contamination.

COVID-19 POLICIES & PROCEDURES

If a guest notifies the hotel that they are displaying symptoms of COVID-19 during their stay or have fallen ill, the manager and the response team must:

1. Ensure the guest returns to or remains in their room. If they have to return to their room ensure there is a procedure in place to accompany the individual to their via the most direct route, keeping at least 2 metres away from the symptomatic person. Provide a facemask.
2. If the guest has checked out facilitate them remaining in isolation if they cannot immediately go home and facilitate them calling their doctor. Can they return to their vacant room? Can they be directed to the isolation room? They should avoid touching people, surfaces and objects. Advice should be given to the person presenting with symptoms to cover their mouth and nose with the disposable tissue provided when they cough or sneeze and put the tissue in the waste bag provided. Provide a facemask where required.
3. Inform them on the measures that the hotel will provide in terms of providing care, support and advice.
4. All management must maintain the confidentiality of the guest.
5. Ensure the guest contacts their doctor and informs the hotels of the doctors response.
6. Clinical judgement will be applied in application of the criteria, by the health care professional, to determine who requires testing.
7. If symptoms are deemed, by health care professional, to be probable (i.e. person meeting the clinical criteria with an community transmission link or meeting the diagnostic criteria) or confirmed (meeting the laboratory criteria) then management must gather information to assist in contact tracing via telephone i.e. what services or facilities were used and when.
8. Case to case basis- if the guest is well enough, request the guest to begin to make arrangements to leave the hotel so they can begin self isolation at home.
9. Case by case basis- If the guest is too ill to leave, try to move them to the 'isolation room'; this needs to be predetermined bedroom(s) that are located in the most remote spots (not in middle of corridor with rooms both sides) to accommodate suspected case until they are well enough to travel/are transferred to hospital or assessment centre.
10. Check out should be managed remotely via telephone.
11. When the guest is ready to leave the hotel, ensure they are accompanied by a staff member, at a safe distance, out of the hotel and to their vehicle. Provide facemask for the person presenting with symptoms and staff member.
12. Arrange transport home or to hospital for medical assessment. Public transport of any kind should not be used. If a guest is unaccompanied ask if they are well enough to leave alone. Where possible obtain details of their next of kin or 'buddy' to collect them if they are unable to drive and make their way home safely.
13. Guest room and/ or isolation room must be immediately subject to enhanced cleaning and disinfection OR left vacant for 72 hours then cleaned.
14. Visited/ used services or facilities must be subject to enhanced cleaning and disinfection.
15. Carry out an assessment of the incident which will form part of determining follow-up actions and recovery.
16. Arrange for appropriate cleaning of the isolation area and work areas involved.
17. Provide advice and assistance if contacted by the HSE.

International Guests- By law, if a guest has arrived in Ireland from any other country they will need to fill in a form called the COVID-19 Passenger Locator Form. They will also be asked to self-isolate for 14 days. Persons do not need to remain in the country for 14 days. But they should follow this public health advice for the time that they will be in Ireland.

If an international guest falls ill or report symptoms of COVID-19, they must contact the HSE helpline on 1850241850. The HSELive team are available to answer questions from 8am - 8pm Monday to Friday and 10am - 5pm on Saturday and Sunday.

TEMPERATURE TESTING

As per the Return to Work Safely Protocol the employer must implement temperature testing in line with Public Health advice. An employee must complete any temperature testing as implemented by the employer and in line with Public Health advice.

As of May 2020 Public Health has issued no guidance in relation to temperature checks.

Company Name is introducing temperature testing as part of our COVID-19 prevention and control measures to minimise risk to workers. Employees will be required to sign off on these new measures and new policies. Updated policies and procedures will be highlighted to employees.

- a. **Information taken.** Employee number/ name (?), time of temperature check and exact temperature OR mark green for 37.9c and mark red for 38c or more.
- b. **Person taking temperature test.** Member of management and/ or COVID 19 Safety Champion (aka lead worker representative).
- c. **Access to information.** Data stored locally and accessible by designated employee/ management/ COVID-19 Safety Champion.
- d. **Data protection.** Records will be kept for 21 days only.
- e. **In the event of a high temperature.** Employee will complete a self declaration form and will be sent home to seek medical advice.
- f. **Refusal to take a temperature test.** Disciplinary procedures will be updated to include non-compliance with COVID-19 specific prevention and control measures. Employees will be subject to disciplinary action.

GENERAL ETIQUETTE & HYGIENE RULES FOR ALL: INFECTION PREVENTION

Hand Hygiene

The Anner Hotel are committed to effectively communicating the messages about regular handwashing, good hand washing technique and the effective use of hand sanitisers when entering and leaving the premises. Regular hand washing with soap and water is effective for the removal of COVID-19. We will ensure that:

- Appropriate hygiene facilities are in place.
- Advice and, where required, training/ instruction/ information is provided on how to perform hand hygiene effectively.
- Posters are displayed to show how to wash hands.

Employees will be required to:

- wash their hands with soap and water (20 second rule) or with an alcohol-based hand rub regularly (this is not a substitute for washing your hands) and in particular:
 - * after coughing and sneezing
 - * before and after eating
 - * before and after preparing food
 - * if in contact with someone who is displaying any COVID-19 symptoms
 - * before and after being on public transport (if using it)
 - * before and after being in a crowd
 - * when arriving and leaving the workplace/other sites
 - * before having a cigarette or vaping
 - * when hands are dirty
 - * after toilet use
- Avoid touching eyes, mouth, nose and avoid sharing bottles or cups (items that touch their mouth) and use their own pen for signing in.

GENERAL ETIQUETTE & HYGIENE RULES FOR ALL: INFECTION PREVENTION

Respiratory Hygiene

The Anner Hotel are committed to effectively communicating the messages about sneezing and coughing into your elbow, sneezing and coughing into a tissue, safe disposal of a tissue, washing hands afterwards etc. Good respiratory hygiene and etiquette is necessary to reduce the spread of COVID-19. We will ensure that:

- Tissues are available as well as bins and bags for their safe disposal.
- Bins will be emptied regularly.
- Information is provided on good respiratory practices.

Employees will be required to:

- Adopt good respiratory hygiene and cough etiquette.
- Cough/sneeze into your sleeve, preferably into your elbow.
- If you use a tissue, discard it properly and clean/sanitize your hands immediately.
- Ensure they are familiar with and follow respiratory hygiene guidance.

GENERAL ETIQUETTE & HYGIENE RULES FOR ALL: INFECTION PREVENTION

Physical distancing

The Anner Hotel are committed to effectively communicating the messages about the use of physical distancing to reduce the spread of COVID-19. The distance maintained between people minimising the risk of transmission from one person to another. We will ensure that:

- Physical distancing protocols are implemented across all work activities where necessary.
- Management and employees consult with each other on the number of ways that physical distancing can be achieved throughout the workplace.
- Measures that are implemented will be reviewed regularly for effectiveness and sustainability and in light of any new guidance and advice.
- There is a strict 'No Handshake' rule implemented and that it is adhered to. Alternative greetings can be used when meeting and greeting others.
- Where the current physical distance recommendation cannot be implemented by organisational means the alternative protective measures will be put in place e.g. physical barriers, hand wipes etc.

CLEANING & DISINFECTION

Cleaning

Cleaning of work areas must be carried out to bring all work areas and storage areas to a high standard. Ongoing cleaning will be conducted at regular intervals. Modified cleaning intervals for rooms and work areas exist as per COVID-19 risk assessment preventative measures. Enhanced cleaning protocols will exist in the event of a suspected or confirmed case of COVID-19 in the workplace. We will review and revise the company's procedures and policies on an ongoing basis. Measures include:

- ⇒ Ensuring central visibility regarding resourcing and operational needs. This can involve cross functional team comprising key areas of a business or be a single appointment depending on the complexity of the organisation.
- ⇒ Implementing thorough and regular cleaning of frequently touched surfaces.
- ⇒ Implementing modified cleaning intervals for rooms and work areas.
- ⇒ Providing essential cleaning materials.
- ⇒ Increasing number of waste collection points where possible and empty regularly throughout the day and at the end of the day.
- ⇒ Modifying the use of any hot desk type work areas to ensure they are available to identified staff.
- ⇒ Providing up-to-date reliable information to staff; suppliers and customers.
- ⇒ Developing and implementing enhanced cleaning SOPs.

Disinfection

Disinfection is the next step following cleaning. Disinfection means to clean something so as to destroy disease-carrying microorganisms and prevent infection.

If disinfection of an area is required it must be performed in addition to cleaning, never as a substitute for cleaning.

The cleaner and more organised a work area is, the easier it is to carry out disinfection of the area and the more effective it is.

PERSONAL PROTECTIVE EQUIPMENT

While correctly using PPE can help prevent some exposures, it should not take the place of other preventative measures.

In the context of COVID-19 risk, employers should check the HPSC website regularly for updates regarding use of recommended PPE. The most important action staff can take to protect themselves from COVID-19 is regular hand-washing, good respiratory hygiene and follow social distancing guidelines.

- ⇒ Full hygiene compliance must be applied and maintained as a priority.
- ⇒ Employers must provide PPE and protective clothing to staff e.g. disposable aprons for Staff with cleaning responsibilities, in accordance with identified COVID-19 exposure risks and in line with Public Health Advice. It must be selected based on the hazard to the employee.
- ⇒ Employees should be training in the proper use, cleaning, storing and disposal of PPE. Ensure Staff are clear on how to safely dispose of used/ contaminated PPE. Management must ensure suitable measures are in place for disposal of PPE.
- ⇒ PPE needs to be consistently and properly worn when required. Ensure Staff are clear on donning and doffing protocols for PPE.
- ⇒ PPE must be regularly inspected, cleaned, maintained and replaced as necessary.
- ⇒ Gloves are generally not required for infection prevention and control purposes. Where gloves are necessary, they must not be considered a substitute for hand hygiene and hands must be cleaned whenever gloves are removed.
- ⇒ Face masks can be made available to an employee in line with public health advice when available. Wearing of masks is not a substitute for other measures. However, if masks are worn, they should be clean and they should not be shared or handled by others. Employers and employees must keep up to date with the latest public health advice issued in regard to masks.
- ⇒ Face shields designed and authorised as PPE against respiratory droplets should not be mistake or used as a substitute for impact protection PPE in he workplace e.g. for grinding or to protect against chemical splashes.

RETURN TO WORK

Employers must issue each employee with a pre-return to work form for workers to complete at least 3 days in advance of the return to work.

The following are key questions stipulated by the Government.

1. Do you have symptoms of cough, fever, high temperature, sore throat, runny nose, breathlessness or flu like symptoms now or in the past 14 days? Yes/No
2. Have you been diagnosed with confirmed or suspected COVID-19 infection in the last 14 days? Yes/No
3. Are you a close contact of a person who is a confirmed or suspected case of COVID-19 in the past 14 days (i.e. less than 2m for more than 15 minutes accumulative in 1 day)? Yes/No
4. Have you been advised by a doctor to self-isolate at this time? Yes/No
5. Have you been advised by a doctor to cocoon at this time? Yes/No.

If an employee answers yes to any of the questions then the employee is strongly advised to follow the medical advice they receive or seek medical advice before returning to work.

Employees must:

- ⇒ complete and return the '**Return to Work- COVID-19**' form before they return to work.
- ⇒ inform their employer if there are any other circumstances relating to COVID-19, not included in the form, which may need to be disclosed to allow their safe return to work
- ⇒ self-isolate at home and contact their GP promptly for further advice if they have any COVID-19 symptoms
- ⇒ stay out of work until all symptoms have cleared following self-isolation
- ⇒ participate in any induction training provided by the employer on their return to the workplace
- ⇒ complete any temperature testing as implemented by the employer and in line with Public Health advice.

SICK LEAVE

In light of COVID-19 existing sick leave policies will be reviewed and revised accordingly. Employers will consult with and communicate to employees, in line with normal procedures, any changes that are introduced to reduce the spread of COVID-19.

Where the employer has a reasonable suspicion that an employee may be infected with COVID-19 i.e. is showing symptoms consistent with COVID-19 (suspected) or has been in contact with a suspected/ confirmed case of COVID-19 then the employer can instruct the employee to go home immediately. This may be deemed reasonable to enable an employer to ensure a safe place of work for other employees.

The employee may be entitled to enhanced Illness Benefit where he/she has been requested to self-isolate by the HSE. If you have symptoms, such as cough/sneezing/fever, or feel poorly, request sick leave or work from home. Follow up on entitlements with the local welfare office.

If you have a positive COVID-19 diagnosis, you can return to work only after you've fully recovered (current criteria requires a person to be symptom free for 5 days following ill health), with a doctor's note confirming your recovery. Employers will consult with and communicate to staff, in line with normal procedures, any changes that are introduced to reduce the spread of COVID-19.

Check if you have symptoms of COVID-19.

These are:

- ⇒ A cough;
- ⇒ Shortness of breath;
- ⇒ Breathing difficulties;
- ⇒ Fever (temperature of 38°C or higher).

Do not go to work

- ⇒ Do not go to your GP or Emergency Department. Phone them first.
- ⇒ If you do not have a GP, phone 112 or 999.
- ⇒ Tell them about your symptoms.
- ⇒ Give them the details about your situation.
- ⇒ Avoid contact with other people by self-isolating.

ANNUAL LEAVE

The Anner Hotel has implemented protocols in relation to employees taking annual leave :

1. Returning from annual leave taken within Ireland
2. Returning from annual leave taken outside of Ireland

Before Annual Leave- The employee may be required to complete a questionnaire prior to annual leave to confirm which of the above criteria apply so the employers is better placed to meet their health and safety needs as well as the health and safety needs of all other Staff.

After Annual Leave- The employee will be required to complete a return to work questionnaire prior to returning to work following annual leave or a business trip on behalf of the company.

Travel- Employees must consult with the Department of Foreign Affairs and Trade for all travel information, advisories and restrictions in place. Currently (May 2020) there is a General COVID-19 Travel Advisory in Operation which states that all persons must avoid non-essential travel until further notice. The Department of Foreign Affairs and Trade advises against all non-essential travel overseas until further notice. This includes Great Britain but does not apply to Northern Ireland. It also includes all travel by cruise ship.

Returning from Travel- If you travel, on annual leave, outside of Ireland you are required to self isolate for 14 days, upon arrival back into Ireland (apart from Northern Ireland), and to complete a Public Health Passenger Locator Form to this effect. This is in line with the current requirements (May 2020) of the Irish Health Authorities. Employees are advised to check the Irish Health Service COVID-19 Advice Page for full information on these requirements. This includes Irish residents.

Following annual leave, where the employer has a reasonable suspicion that an employee may be infected with COVID-19 i.e. is showing symptoms consistent with COVID-19 (suspected), then the employer can instruct the employee to go home immediately.

Check if you have symptoms of COVID-19. See Sick Leave policy for further information.

TRAVELLING FOR WORK

The Anner Hotel has implemented protocols in relation to employees and business travel:

1. Returning from business trip within Ireland
2. Returning from business trip outside of Ireland

Business Travel– The need to take business trips and have face to face interactions will be avoided where possible. Technological alternatives will be made available to reduce travel to an absolute minimum e.g. telephone, video conferencing.

When Business Travel is necessary– The use of the same vehicles by multiple employees is not encouraged. The number of employees who share a vehicle – simultaneously or consecutively – should be kept to a minimum as far as is reasonably practicable, for example by assigning a vehicle to a fixed team.

Employees should be encouraged to travel alone if using their personal cars for work or at a maximum be accompanied by one passenger who shall be seated in adherence with physical distancing guidance.

Employees should be provided with hand sanitisers and cleaning equipment for their work vehicle.

A system for recording visits by employees to other workplaces should be put in place by employers and completed by employees as required

After Business Travel- The employee will be required to complete a return to work questionnaire prior to returning to work following a business trip on behalf of the company.

Travel- Employees must consult with the Department of Foreign Affairs and Trade for all travel information, advisories and restrictions in place. Currently (May 2020) there is a General COVID-19 Travel Advisory in Operation which states that all persons must avoid non-essential travel until further notice. The Department of Foreign Affairs and Trade advises against all non-essential travel overseas until further notice. This includes Great Britain but does not apply to Northern Ireland. It also includes all travel by cruise ship.

Returning from Travel- If you travel, on annual leave, outside of Ireland you are required to self isolate for 14 days, upon arrival back into Ireland (apart from Northern Ireland), and to complete a Public Health Passenger Locator Form to this effect. This is in line with the current requirements (May 2020) of the Irish Health Authorities. Employees are advised to check the Irish Health Service COVID-19 Advice Page for full information on these requirements. This includes Irish residents.

Following business travel, where the employer has a reasonable suspicion that an employee may be infected with COVID-19 i.e. is showing symptoms consistent with COVID-19 (suspected), then the employer can instruct the employee to go home immediately.

CONTRACTOR/ VISITOR CONTROL

Contractors may be required to access company premises to carry out scheduled/ preventative or emergency maintenance activities and/ or construction activities (as defined in line with the SHWW (Construction) Regulations). Visitors may be required to access company premises to supply services, goods, consultancy etc.

Access must be controlled and all contractors and visitors must be notified of the preferred access route, location for signing in and signing out etc. PRIOR to their arrival on site.

Management must ensure that all Contractors complete the following:

1. **Contractor Declaration Form** (Contractor Agreement COVID-19 sign off document)- This is completed by a representative of the Contractor on the Contractors behalf to confirm they will adhere to all measures in place to prevent the spread of COVID-19.
2. **Contractor Questionnaire** (COVID-19 Visitor & Contractor Questionnaire)- This is completed by each employee of a contractor who wishes to gain access to the site to conduct their work.

Contractors or visitors visiting workplaces where there are restrictions arising from the risk of COVID-19 should follow the site infection prevention and control measures and take into account public health advice around preventing the spread of COVID-19.

Contractors/ Visitors will:

- Go straight to reception to confirm permission to carry out work on site/ be on site.
- Sign in- This system records all visits by contractors and visitors.
- Complete the induction training and read the COVID-19 Policy prior to commencing work on site.
- Read and sign the Contractor Declaration Form.
- Read and sign the Contractor Questionnaire.
- Adhere to all measures put in place to control the spread of COVID-19.
- Maintain a high standard of cleanliness and housekeeping in their specific work location- they will thoroughly clean and wipe down their work area at the end of each shift/ day.
- Any concerns or issues must be reported to management.
- Contractors are not permitted on site if they are showing symptoms.

Management will monitor activities on site. Any breaches will result in contractors or visitors being removed from site for the protection of Staff and others on site.

FIRST AID

In the event that first aid is required in the workplace it may not be possible to maintain a distance of 2 metres. Workers with a specific role in acting as first responders should be provided with updated training on infection prevention and control principles including performance of hand hygiene and appropriate use of personal protective equipment when delivering first aid.

The First Aid Regulations require employers, based on a risk assessment, to have sufficient first aid equipment and trained first aiders in the workplace. The regulations do not specify the training standard, duration of training and retraining and recertification periods but the Health & Safety Authority will continue to recognise first aid responders existing certification during the COVID-19 pandemic. Those first aiders can continue to administer first aid in the workplace.

Purpose of the COVID-19 & First Aid Protocol

First Aid responders may encounter persons with suspected COVID-19 within their workplace in need of first aid. Therefore, standard infection control precautions should be applied when treating all patients.

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 lifesaving measures such as an incident of cardiac arrest, heart attack, choking, stroke.

Only one First Aid Responder to provide support/ treatment, where practical.

First Aid Cont'd...

Routes of Infection & Key Controls

COVID-19 virus infects through contact with the mucous membranes. It does not infect through the skin. Two key risks of direct transmission for a first aid responder:

1. **Contaminated hands**- 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 include:

- Minimise hand contamination-keep your hands to yourself when possible
- Avoid touching your face
- Clean your hands frequently- soap and water or alcohol hand
- rub before and after providing any first aid treatment

2. **Respiratory droplets**- Transfer of the virus on to mucous membranes by droplet transmission, that is, by direct impact of larger infectious virus droplets generated from the patient's respiratory tract landing directly in your eyes, nose or mouth. This is most likely to happen if you are within 1 meter of the patient.

The key interventions to manage this risk include:

- Use of appropriate PPE when responding to a first aid incident (surgical facemask and eye protection)
- Encouraging the patient to wear a surgical facemask or cover their nose and mouth when coughing or sneezing (respiratory hygiene and cough etiquette)
- Maintain distance greater than 1m where possible
- Familiarity with symptoms of COVID-19
- For minor injuries, where practical, advising the injured party what steps to take to treat their injury e.g. cuts, minor burns, abrasions

First Aid Cont'd...

Know the Symptoms

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 i.e. screen for COVID-19.

The current HPSC (Health Protection Surveillance Centre) screening case definition for COVID-19 should always be used. As of May 2020, this includes: all patients with fever/chills, signs & symptoms of respiratory tract infection (including cough), loss of taste or smell or exposure to a confirmed case of COVID-19. First aiders are responsible for checking HPSC regularly for updates to case definition.

If you suspect a case of COVID-19

Any person presenting with symptoms consistent with COVID-19 should be treated as a suspected case. In such cases, move individual to a designated isolated room to minimise risk of infection to others.

Such persons should have a facemask applied during contact time to limit the spread through droplet dispersion.

CPR during COVID-19

If an adult is unresponsive and not breathing normally, you still need to call 112 or 999 for emergency help and start CPR straight away. Persons in cardiac arrest should have compression only CPR applied. No rescue breaths/ mouth to mouth.

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.

Further advice on first aid is available from the Pre Hospital Emergency Care Council (PHECC).

LEGIONELLA

For some workplaces where there has been a full shut down or significant wind down in the company's activities, the employer needs to put in place control measures to avoid the potential for Legionnaires' disease before they reopen.

The Company is aware that the Health & Safety Authority has produced guidance to support employers with control of Legionella bacteria during and after the COVID-19 Pandemic.

It highlights the requirement to continue managing Legionella control to avoid the potential for Legionnaires' disease. This disease can be fatal and hospitalization is generally required to treat symptoms. With the health service currently dealing with a public health emergency, it is vital that employers take appropriate action to maintain and operate their water systems especially wet cooling systems, so far as reasonably practicable, during this public health emergency.

Important to note:

- Legionella bacteria are found in low numbers in natural aquatic environments, for instance, lakes, rivers and ground water. As a result, it is virtually impossible to prevent Legionella bacteria entering man-made water systems.
- With the correct conditions, for example, warm water, the presence of microorganisms and nutrients in the water or materials such as rust, the bacteria can grow and multiply to high levels, which increase the risk of exposure. The bacteria tend to grow in biofilms (slime).
- Biofilms are likely to form on surfaces where there is low water flow or water is allowed to stagnate. Low or no water flow and stagnation can occur during temporary water system closures.

The following is a non-exhaustive list of potential sources of aerosols, which may contain Legionella bacteria:

- wet cooling systems for example, cooling towers and evaporative condensers
- spa pools
- showers, taps and toilets
- machine cooling systems for example, in lathes and plastic injection moulding machines
- spray booth water curtains
- humidifiers in food cabinets and factories
- ornamental fountains and water features
- dust suppression systems such as those used in construction, cement and waste recycling industries
- horticultural misting systems, lawn sprinklers
- clinical humidifiers
- firefighting systems for example, sprinklers and hose reels
- vehicle washes and power hoses

Legionella Cont'd...

Extract of HSA guidance to prevent Legionnaires' disease during the crisis

- Identify key workers who carry out safety critical activities and plan for what should happen if they become ill or have to self-isolate e.g. training other employees and familiarizing them with the Legionella control plan and the required controls and checks to be carried out.
- Ensure that the controls identified in the Legionella control plan are adhered to, so far as reasonably practicable, for example, flushing of outlets, continued chemical dosing of evaporative cooling systems and so on. Controls may need to be adapted due to changing circumstances.
- For premises with simple water systems, which have had to shut down, such as small shops and hairdressers, if access is still permitted, then extended weekly flushing of all outlets will assist in maintaining microbiological control.
- Where employees or contractors operate alone, ensure that there is an appropriate lone working policy in place, for example, use of a monitored personal alarm or a designated phone call check.
- In the event it is no longer feasible to continue ongoing control, water systems should be safely shutdown. In general, water systems should be left filled with water and not drained down.

Extract of HSA guidance to manage Legionella After the crisis

- If the water system has been managed and controlled in line with the Legionella control plan during the pandemic, the system can continue to be used as is
- Water systems, which have been shut down, have had low water usage, or modified control regimes during the pandemic, may result in an increased risk of Legionella bacteria being present. Such systems may have been out of use for a significant time and in most cases cannot simply be used straight away. The system may require recommissioning as if new (that is thorough flushing, cleaning and disinfection and/or controlled flushing of outlets such as taps, showers and toilets) prior to return to use and reopening of the building. Risk assessment review and water testing should also be considered as part of the recommissioning plan. The services of a competent person may be required to provide further advice.

For the full Control of Legionella Bacteria During and After the COVID-19 Pandemic guide please see HSA website.

HEATING VENTILATION AIR CONDITIONING (HVAC)

The Company recognises the Governments current advice in relation to HVAC:

- Air conditioning is not generally considered as contributing significantly to the spread of COVID-19.
- Switching off air conditioning is not required to manage the risk of COVID-19.
- For organisations without air conditioning adequate ventilation is encouraged, for example, by opening windows where feasible etc