

CONSTRUCTION SECTOR: COVID-19 GUIDE



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Ian Woodland



Jerry Swain

Foreword – Unite National Officers for Construction

Construction safety representatives are an integral part of the fight against the dangers to workers posed by the Covid-19 virus. They are the backbone of our union and are to thank for substantially reducing accidents and ill health in workplaces where they are recognised.

Time and time again experts tell us that a unionised workplace is safer with fewer accidents and fatalities.

The HSE continues to increase the scale of spot checks it carries out across a range of industries where the workforce typically has characteristics which can increase transmission of the virus, construction being one of those. For that reason the construction industry will remain in scope for ongoing checks, yet we know that despite this many workplaces will be overlooked.

That's why our construction health and safety reps are carrying out checks every day on the front line. Their proactive engagement with clients and contractors makes a difference and central to this is their legal right to be consulted on risk assessments.

At the start of the pandemic Unite said our focus would be safety, jobs and pay. These remain the union's priorities and this guide aims to help construction safety representatives in carrying out their critical role.

CONSTRUCTION SECTOR COVID-19 GUIDE

By Rob Miguel national health and safety advisor



Introduction

Coronaviruses are a fairly common group of viruses that can cause illness such as respiratory tract infections. Typical symptoms of coronavirus include fever and a cough that may progress to a severe pneumonia causing shortness of breath and breathing difficulties.

The novel coronavirus is a new strain that has not been previously identified in humans, we have come to identify this virus as Covid-19. However the strain which is responsible for this virus is known as SARS-CoV-2. The virus is transmitted easily from person to person and several vaccines have now been developed, thanks to a worldwide coordinated effort.

UNION REPS ARE THEY KEY: Public health activity is a constantly changing and at different paces throughout the different nations. On construction projects it is important to take a risk management approach in order to implement controls that will protect the workforce from becoming infected. Construction workers carry out a vital role in keeping the country going during this crisis, with the workforce central to that. It is therefore **essential all project stakeholders engage with unions and consult union representatives** who will be key to formulating best practice.

Unite has concerns regarding workers' protection against the more transmissible Covid-19 variants most recently Omicron, that are now circulating in the UK. The risk is compounded by the fact there is now strong evidence that the virus can be transmitted via airborne particles, creating increased risks of infection particularly in indoor workplaces.

Regular updated information for England and all the devolved countries can be found here: <https://www.gov.uk/coronavirus>

There is also government guidance on how to reduce the risk of Covid-19 spreading in workplaces. See below:

- [England](#)
- [Wales](#)
- [Scotland](#)
- [Northern Ireland\)](#)
- [ROI](#)

Health and safety law and management practice is consistent across all nations that includes the duty to carry out risk assessments, and put in place adequate control measures to protect workers from Covid-19. The workplace guidance from governments stipulates risk assessment is a legal duty, as is consulting with union reps.

The guidance advocates protection measures such as ventilation, PPE where identified by the assessment, masks in crowded places and hygiene measures.

Given the concerns regarding workers' protection against the more transmissible Covid-19 variants that are now circulating in the UK, compounded by the fact there is now strong evidence that the virus can be transmitted via airborne particles particularly in indoor workplaces, the status quo should continue.

Employers must continue to follow statutory [health and safety requirements](#), conduct a risk assessment, and take reasonable steps to manage risks in their workplace.

Unite's position is that before any changes to Covid-19 control measures are implemented risk assessments which are associated with the hazard of Covid-19 transmission should be reviewed. This needs to be undertaken in consultation with unions and their representatives, especially where the change to the governments' guidelines and legislation removes and/or modifies Covid-19 controls.

Given current infection rates there needs to be particular emphasis around vaccine progression, testing, adequate ventilation, and use of masks and face coverings. Additional assessments are needed for vulnerable/disabled workers, BAEM workers and pregnant women with additional control measures implemented for these groups.

Construction reps start-up checklist

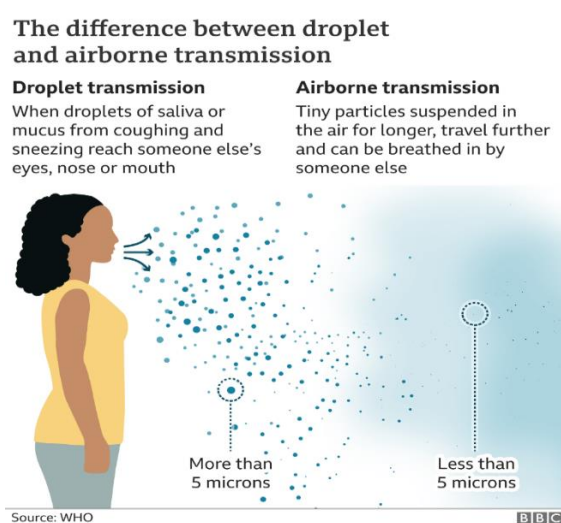
(see appendix 2)

- Set up a 'Covid-19 Task Group' made up of trade union reps and management.**
- Are Covid-19 specific risk assessments in place and reviewed?
- Do reps / workers have access to risk assessments and are able to challenge and question?
- Mental health issues: Are procedures in place that signpost workers to the right support?
- Consider BAEM groups who are adversely affected by COVID 19, [Unite BAEM COVID 19 guide](#).
- Take into account [disabilities](#), gender differences, effects on [pregnant women](#), [maternity issues](#).
- Are layouts in place to accommodate social distancing: Barriers, Signs, Floor markings etc.?
- Are Covid-19 related inductions and training in place?
- Have revised timings and staggering of shifts and breaks been considered to control space?
- Are there procedures for travel such as parking, using public transport, car sharing?
- Have procedures been put in place to have social distancing during maintenance?
- Is PPE adequate and arrangements and cleaning in place including overalls?
- Is there enhanced cleaning of workplaces?
- Are there daily talks to encourage and enforce hygiene and social distancing?
- Are there arrangements for screening out workers exhibiting symptoms of the virus?
- Is there a system to carry out temperature checks at entry points?
- Do indoor facilities such as canteens have sufficient ventilation?
- Are face coverings to World Health Organisation standard or FFP2/3 masks supplied by employer?
- Are there sufficient welfare facilities /fully stocked to accommodate the necessary hygiene?
- Are there sufficient sanitiser stations around site and at entrances?
- Are there arrangements in place to accommodate welfare facilities for visiting delivery drivers?
- Has the employer considered how workers will travel to work such as using public transport?

How does the virus spread?

Respiratory infections can be transmitted through droplets of different sizes. When the droplet particles are above a certain size they are referred to as respiratory droplets, which fall to the ground and on surfaces at around 1 metre. The **World Health Organisation** suggests that the Covid-19 virus is primarily transmitted between people through respiratory droplets, and contact routes including touch points.

However current evidence is emerging that indicates transmission can occur via much smaller particles of varying sizes that can remain airborne and travel more than 2 metres. This is particularly problematic in indoor badly ventilated areas. Therefore areas such as canteens on construction sites need to be well ventilated either naturally or mechanically. [Useful Guide by Doctors in Unite union.](#)



On surfaces and materials: **The survival characteristics of the Covid-19 virus**

[The transmission of Covid-19](#) can occur when the respiratory droplets fall on surfaces or from mouth to hands to materials, surfaces and any touch points. In lab conditions depending on surface type human coronaviruses can survive on inanimate objects for up to five days at temperatures of 22 to 25°C. **Note:** In normal conditions the virus will be subject to varying temperature and conditions, making survival times far less. Handling post or newspapers for example poses very little risk.

Symptoms to look out for

Main symptoms are set out in red, these are the usual ones that will be asked for when applying for an NHS Covid-19 test. However people get various other symptoms and all symptoms range from very mild to very severe. **The official advice is no matter how mild self - isolate and request a test.**

- Fever or Chills** **New Continuous Cough** **Loss or change to your sense of smell or taste**
- Shortness of breath or difficulty breathing
- Fatigue, Muscle or body aches
- Sore throat, congestion or runny nose
- Nausea or vomiting
- Headache

Self – Isolation all you need to know

- [When to self-isolate and what to do](#)
- [How long to self-isolate](#)
- [How to avoid spreading coronavirus to people you live with](#)
- [How to treat your symptoms at home](#)
- [Help and financial support while you're self-isolating](#)
- [What to do if your symptoms get worse](#)
- [What to do if you get symptoms again](#)

In a nutshell

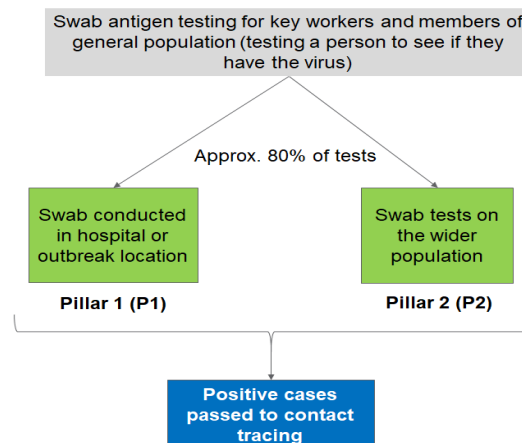
- **Isolate:** As soon as you experience coronavirus symptoms for 10 days
- All of your household must self-isolate for 10 days from when you started having symptoms
- **Test:** Order a test immediately at www.nhs.uk/coronavirus or call 119
- **Results:** If your test is positive, you must complete the remainder of your 10-days
- Anyone in your household must also complete self-isolation for 10 days
- If your test is negative, you and other household members no longer need to self-isolate
- If positive for coronavirus, the NHS test and trace service will send you a text or email alert, or call you with instructions of how to share details of people with whom you have had close, recent contact and places you have visited.
- Contacted by NHS T&T because you were in close contact with someone who is positive:
- You will need to self-isolate for 10 days even if you yourself have a test that is negative.

NHS Test and Trace

Unite continues to fight for construction workers to receive full pay from day one. There is government backed financial support administered through local authorities, details and how to claim: [Claiming financial support under the test and trace support scheme](#).

Unite principles:

- Unite and construction reps consulted on all aspects of the system in every workplace
- All construction workers regardless of employment status to receive full pay when self-isolating or when attending test centres
- All workers entitled to the same treatment whether or not they are full time employees
- Workers - including casual agency workers - to access testing without detriment
- Ensure home testing is available for workers who cannot travel safely to test sites
- Respect for existing privacy rules including those embedded in GDPR



Practical examples

Situation 1 – Construction worker has coronavirus symptoms and gets a test.

- The individual is not known to have had any close contact with anyone who has tested positive. Therefore, if they test negative, they are not required to continue self-isolation. If positive, self - isolate 10 days T&T will contact you for your close contacts.

Situation 2 – Construction worker is contacted by the NHS Test and Trace service and informed that they have had close contact with someone who has Covid-19: Self - Isolate for 10 days The individual develops symptoms and gets a test.

- If they test positive, they begin a new 10 day isolation.
- They will be contacted by txt/phone to relay details of any close contacts
- If they test negative, they should still complete the 10 day isolation.

This is because the individual has been identified as a contact with someone who has tested positive for coronavirus. They could still develop the virus and it cannot be confirmed that they have not picked it up until the maximum 10 day incubation period has elapsed.

For more information on test and trace and **how to book a test** www.nhs.uk/coronavirus or call 119 if you have no internet access.

Get a self - isolation note to give to your employer <https://111.nhs.uk/isolation-note/>

Testing available on projects

Some larger projects have developed their own testing regime, and management of contract tracing for workers on that particular site. However reps must ensure that project policies around this includes an element whereby the NHS test and trace system is informed of positive tests and given the worker's details. This is because direct contacts will also occur outside the workplace and NHS T&T will have the ability to inform and advise all concerned.

NHS App

The [NHS Covid-19 app](#), allows people to report symptoms, order a coronavirus test, check in to venues by scanning a QR code and it helps the NHS trace individuals that have coronavirus. The app does this while protecting a user's anonymity. Nobody, including the government, will know who or where a particular user is.



How it works and how to download: [England and Wales](#), [Scotland](#), [Northern Ireland](#) and [Republic of Ireland](#).

UK Health Authorities and Covid-19

Regular updated daily health advice regarding Covid-19 is provided by the four devolved health authorities and ROI:

- [England PHE](#) [Wales: Public Health Wales / Iechyd Cyhoeddus Cymru](#)
- [Scotland: NHS Scotland](#) [Northern Ireland: Public Health Agency](#)
- [Republic of Ireland: Health Service Executive\(HSE\) / Feidhmeannacht na Seirbhíse Slainte](#)

Health and safety requirements

There is a primary duty under the Health and Safety at Work Act 1974 (HASAWA) together with associated legislation for employers to protect the health, safety and welfare of their construction sector workforce and others affected by their operations. The [Construction Design and Management Regulations 2015](#) place specific duties for construction work and projects.

There are general duties to carry out risk assessments in order to control the 'risks' around Covid-19 found in the [Management of Health and Safety at Work Regulations 1999](#). Specific legislation applying to infectious micro-organisms/biological agents, of which coronavirus is a group, comes under the auspices of the [Control of Substances Hazardous to Health Regulations 2002 \(COSHH\)](#)

Risk assessments



Risk assessment is a legal requirement for Covid-19 risks, Unite is advocating a risk assessment approach using a hierarchy of control essential for good health and safety management, **no construction work should start without an up-to-date risk assessment**. Consultation with the union and our representatives will be the key to success.

Site access, layout, welfare facilities, logistics and operations, etc., must be risk assessed and planned to ensure that all protective measures such as social distancing, enhanced hygiene procedures, ventilation controls and PPE where needed can be implemented.

Reps checklist for risk assessment:

- Identify Hazard: Contraction of Covid-19 Infection * Stress connected to COVID 19
- What workers will be harmed, who will be adversely affected if infected and get ill*
- How will they be exposed for example direct contact with droplets from an infected person or touching a person, surface or object which has the virus present
- Rate the risk of infection occurring during undertaking the task, schedule, job etc.
- Select appropriate controls to protect workers using a hierarchy of control

Example:

Hazard	Risk including who may be harmed	Pre control Risk Rating Severity x likelihood	Control Measures In brief for illustration	Post control Risk rating Severity x likelihood
Contraction of Covid-19 via persons or contact with objects	Use of site welfare facilities	High or	Restrict access. Barriers.	Low or
	Maintaining 2 metre separation	3 x 4 = 12	2m Markings. Enhanced Cleaning. Washing facilities.	1 x 4 = 4
Those adversely affected covered later *	Hygiene All staff	See matrix below	Sanitiser Stations.	See matrix below

Matrix

Severity	Likelihood				
	Extremely unlikely to occur	Unlikely (U)	Likely (L)	Very Likely (VL)	Highly Likely (Almost certain)
No injury or trivial (minor injury) no time lost	1	2	3	4	5
Minor injury (MI) lost time less than three days	2	4	6	8	10
Serious injury (SI) lost time greater than three days	3	6	9	12	15
Major injury (MAI) lost time greater than seven days	4	8	12	16	20
Almost certain death. Disabling injury or fatality (DIF)	5	10	15	20	25

See [Managing risk assessments at work - Covid-19 HSE guidance](#)

Those construction workers that are at higher risk Adversely affected by Covid-19

Risk assessments should consider and support those who are at a higher risk of infection and/or an adverse outcome if infected. The Public Health England report '[Disparities in the risk and outcomes of Covid-19](#)' shows that some groups of people may be at more risk of being infected and/or an adverse outcome if infected.

Reps quick checklist of higher-risk groups:

- Older construction workers
- Older males which are in high proportion in the construction sector
- Have health conditions such as diabetes, more severe the condition the more vulnerability *
- Are from Black, Asian or minority ethnicity (BAEM)
- Pregnant especially after 26 weeks, and particularly if in a BAEM group
- Have a high body mass index (BMI)

*[Two levels of risk](#): High Risk (clinically extremely vulnerable) & moderate risk (clinically vulnerable)

[Clinically extremely vulnerable individuals](#) (those that were previously shielding) are strongly advised to work from home. When additional restrictions are in place such as national or local lockdowns. If they cannot work from home, they should not attend work for this period of restrictions. Clinically extremely vulnerable individuals who cannot attend work for this reason may be eligible for support.

[Clinically vulnerable](#) includes those over 70 and those with a BMI of over 40. The advice is that this group can still attend work, however this and any additional controls needed should be adequately assessed taking into account all the factors, see below. Mental health and wellbeing are extremely important and appropriate procedures will be need to be put in place to support for workers.

Covid-19 work risk assessment tool: Reps snapshot view

Different versions exist of this tool but will follow similar lines, the below however is a good example for construction reps to see how the process works. [Access full tool here](#)

Risk factor	Score
<u>Age</u> – Covid-19 seems to have a bigger impact on people who are older.	
• If you are aged between 50-59	1
• If you are aged between 60-69	2
• If you are aged 70-79	4
<u>Sex at birth</u> – Covid-19 seems to have a bigger impact on males than females	
• Male	1
<u>Ethnicity</u> – Covid-19 seems to have a bigger impact on people from some ethnicities	
• BAEM or mixed race groups, Scores will differ depending on specific race and various tools will to allocate figures accordingly.	
<u>Existing Health conditions (Comorbidity)</u> – Covid-19 seems to have a bigger impact if you already have other pre-existing health conditions. You may want to speak to your GP if you are not sure about these questions.	
• Cardiovascular disease Are you on any treatment for Hypertension (high blood pressure), Atrial Fibrillation (Irregular heart rate), Heart Failure, Previous MI (had a heart attack), had a stroke, or Transient Ischemic Attack (mini stroke)	1
• Diabetes Mellitus Type 1 or 2	1
• Chronic lung disease (including asthma, COPD, interstitial lung disease)	1
• Chronic kidney disease (any stage 1-5)	1
• Sickle cell trait, Thalassaemia trait or other haemoglobinopathy	1
<u>Obesity</u> – Covid-19 seems to have a bigger impact if you are overweight	
BMI of approximately 30	
This link will help you work out your BMI – if your <u>BMI is more than 30</u>	1
TOTAL	

Total scores would be added up with values of Low Risk 0-3 Medium Risk 4-6 very high risk over 7

Additional controls are put in place depending on the total score such as modified duties. In the case of this tool over seven signifies a level of risk that may result in the person either staying home, or being redeployed to another role or some different tasks in same role.

Mental health

This is a trying time for construction workers, there will be worries about health, finances and coping with being on lockdown. There is such a change to people's normal routines at home, in work and in work at home. There will be many missing contact with friends and family, and the stress of social lives being effected.

- Feeling anxious or worried about coronavirus, when working and moving around site
- Worried about going to work because of becoming infected but you need the money
- Worried about traveling to work on public transport, site vans/buses and car sharing
- In digs and away from home worried about getting ill, nowhere to socialise
- Unable to adapt or cope with working from home
- Anxious because you or someone you live with has symptoms
- Stressed because self-isolating as an individual or a family/household
- Worried about pay when self-isolating

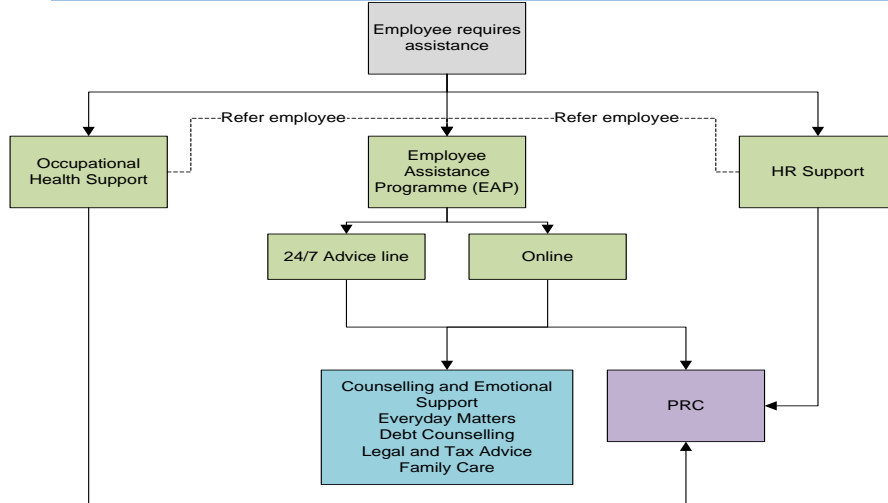
HSE Stress Toolkit for the construction sector

Stress, depression and anxiety are the second biggest cause of work-related ill health in the construction industry. The earlier this problem is tackled, the less impact it will have on workers and business. Taking positive action can help to create a more engaged workforce. HSE have produced a very useful tool:

[Talking toolkit Preventing Work related stress in construction](#)

Reps checklist – What employers should do

- Carry out stress risk assessments
- Survey workforce to gauge extent of problem and in what areas
- Use practical measures: HSE talking toolkit so construction worker(s) can open up.
- Inform employees that support is available and signpost them to support
- Create a system whereby workers can access advice and support in different areas:



This model can be simplified to fit smaller organisations PRC: Personal Relationship Counselling

[Where else can I find help?](#)

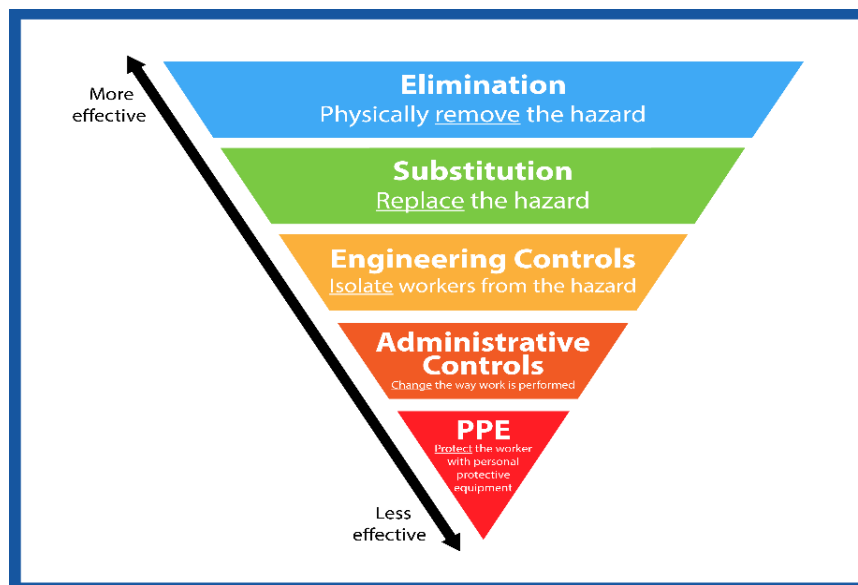
(also see poster appendix 4)

10 ways you can help improve your mental health and wellbeing if you are worried or anxious about the coronavirus outbreak find them [here](#); Unite mental health booklet [here](#); and access advice from MIND [here](#).

Hierarchy of Control

Employers need to follow a line of control, which chooses the most effective and efficient method to prevent exposure and infection from Covid-19. Risks should be reduced by taking preventative measures in order of priority, employers should not just jump to the easiest control measure.

HSE Guidance on the hierarchy of risk controls <https://www.hse.gov.uk/risk/faq.htm#hierarchy>



Elimination

A vaccine when available, or natural immunity could be a way of eliminating harm from Covid-19, however it is unlikely either would offer lifetime immunity. Immunity can last for months or years at present it is unclear regards Covid-19. Any successful immunisation programme would be on going with inoculations probably repeated every year. [Regular updates on Covid-19 vaccines found here.](#) The race to develop immunisation is fast moving. [A vaccine may soon be on its way.](#)

Isolating people completely against exposure: Shielding offered complete isolation however this could only operate temporally particularly for workers as the effects on mental health could be devastating.

Substitution/reduction

Self-isolation of workers that become ill or are exposed to positive cases, it cannot be stressed enough that no matter how mild the symptoms, construction workers need to remain off work, get a test and self-isolate for the recommended periods. Isolating following contact with a positive case is also essential, however the test and trace system will contact you to advise you to do this as there is a specific criteria for “close contact”. Please refer to the section on self-isolation and test and trace for details how this works in practice.

In construction pay is a barrier to this program’s success, and employers need to ensure full pay is available to assist this process. There is currently financial support for self-isolation and you can access that here: [Claiming financial support under the test and trace support scheme.](#)

Working from home reduces exposure to Covid-19 at work and from using public transport to get back and forth to work, or whilst car sharing. Care must be taken to ensure people are supported both mentally and physically by providing the right equipment to enable working at home effectively. Whilst white collar construction workers can access this option unfortunately the industrial construction worker cannot. [See Working from home guide Unite Covid-19 web site.](#)

Social distancing is an age old control, whilst evidence is emerging that the virus can be transmitted in smaller droplets in aerosols, a great emphasis will still be around initiating controls around transmission by droplets large enough to fall to the ground after a metre. Therefore maintaining a distance of 2 metres apart will reduce the risk of becoming infected through this transmission route.

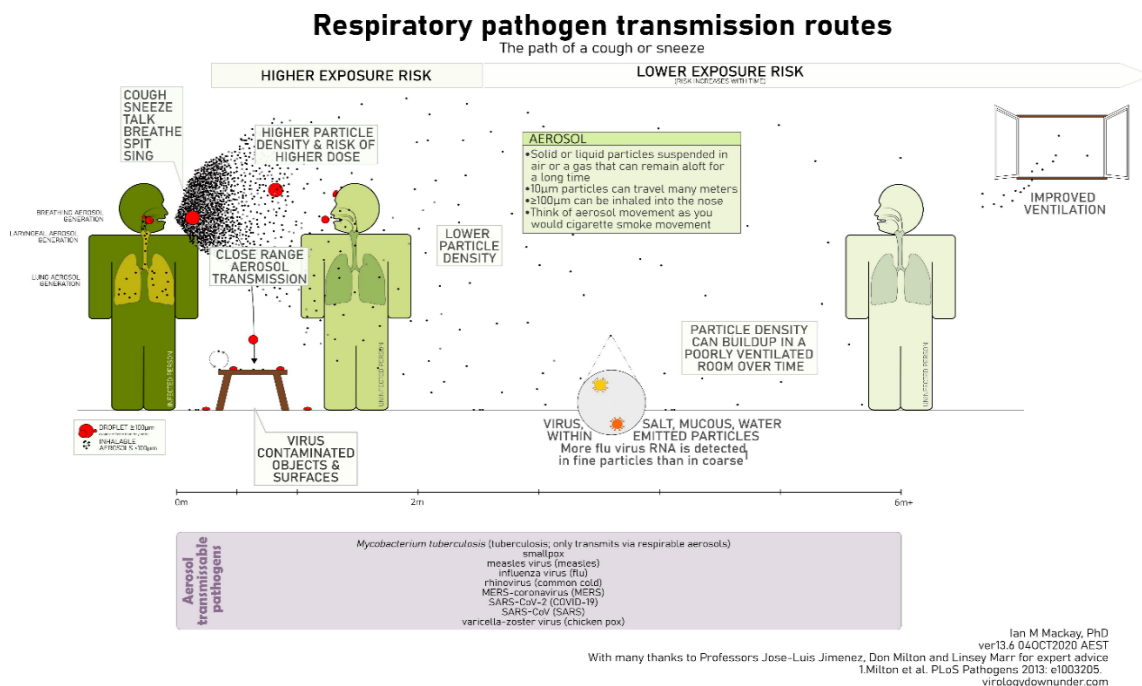
This control needs to be implemented stringently in order to be effective, together with good **hygiene practices**, both personal and in the workplace. Whilst it is true that these combined control measures are effective in “reducing risk” alone they serve as a procedural or administrative control relying on people to comply to ensure their effectiveness. These then need to be backed up by supportive measures such as barriers, markers and signs, provision of hygiene facilities, enhanced cleaning and good ventilation.

Steps to support and compliment, **social distancing** and **good hygiene** need a collective approach. If there are operations essential to completion of the project that **cannot** be undertaken within the parameters of physical (social) distancing, then they must not take place until a specific risk assessment has been completed and appropriate control measures implemented. See later.

Engineering controls

Ventilation

We now know the potential from becoming infected from air borne droplets that can travel beyond 2 metres is a real risk. The risk is within badly ventilated indoor spaces which can occur in site canteens for example, dilution of internal air should reduce any risk of potential airborne viral transmission by reducing exposure time to any airborne viral aerosols, and also reduce the chances of these aerosols settling on surfaces.



In a nutshell: The risk of airborne infection to the individual can therefore be reduced by:

- **Reducing time spent in the location**
- **Reducing airborne exposure concentration of infectious material, naturally or mechanically**
- **Reducing risk of contact spread through regular handwashing and surface cleaning.**

It is recommended that any ventilation or air conditioning system that normally runs with a recirculation mode should now be set up to run on full outside air where this is possible. Recirculation of air between spaces, rooms or zones occupied by different people should be avoided. [Everything you need to know on ventilation Coronavirus, SARS-COV-2, Covid-19 and HVAC systems](#)

Barriers

Place a physical barrier such as a Perspex screen, flexible polyethylene sheet, welding blanket for example could be deployed to mitigate the potential for droplets reaching personnel working in proximity. These can be temporary or permanent, some screens can be deployed by pulling down from a roller, or clipped on

Physical barriers being used to separate construction workers whilst taking breaks



Barrier being used in support of social distancing keeping people apart as far as possible



Barrier separating passengers on site bus



Offices on larger and smaller sites will need to create appropriate space and physical barriers



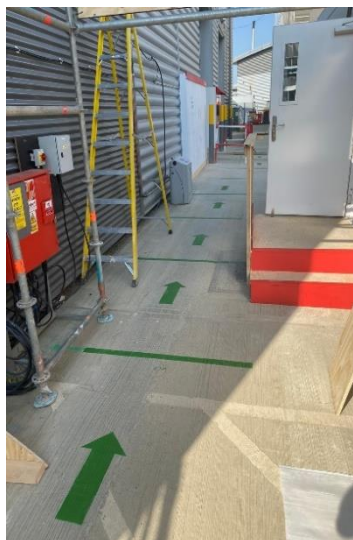
Physical Barriers to works' vans can be easily fitted. Note that only one passenger per double seat



ADMINISTRATIVE CONTROLS: SYSTEMS OF WORK AND PROCEDURES

Signs and floor markings

Signs and floor markings as shown below act as an efficient support tool to remind construction workers to keep their distance and practice good hygiene. Reps when carrying out inspections should ensure the site has sufficient signs and markings in place.



Temperature checks

Temperature checks are being used on several medium to large projects.

- At all entrance points
- Vehicle entry with drivers
- Where transport pick up points into site is being used

Recommended practice: Anyone with a temperature over the recommended level is given a 5 min cool down period before re-testing, if the test is still over the recommended temperature then one more temperature check is given before consideration is made to refuse entry.



Use of a non - contact thermometer as illustrated is essential to avoid any potential cross contamination.

Reps check list:

- Consultation with reps need to take place to formulate a policy
- A policy needs to be agreed and in place before the procedure starts
- Policy must include protocol for how a worker will get home if refused entry
- Everyone including visitors and drivers need to be aware of the policy beforehand.

Procedure if someone falls ill

A policy and procedure should be in place to deal with this situation, reps consulted and workers briefed on what they need to do. A team should be pre-allocated who will deal with the situation and have appropriate training and all necessary PPE.

Rep's brief view of the process:

If a worker develops a high temperature or a persistent cough while on the site:

- Allocate a room or area where the worker can be isolated behind a closed door
- Room should be well ventilated and have waste bin with double bags inside
- Person reminded of appropriate hygiene, avoid touching, using tissue for cough etc.
- Arrangements should be made for them to return home immediately
- The use of public transport should be avoided
- Contact to be made with next of kin
- Informed to advise employer of developing condition
- If the worker is so unwell that they require an ambulance, phone 999 and let the call handler know you are concerned about Covid-19
- Person reminded to stay at home, get a test and follow NHS test and trace guidance.

Once the worker has left the premises, the immediate area occupied by the individual should be cleaned with detergent and disinfectant.

Hygiene, social distancing and site procedures

Travel to and from site

- Travel to site alone using own transport
- Worker should avoid public transport.
If unavoidable: Consider changing and staggering site hours to travel at non - peak times
- Provide workers with face coverings that meet WHO standard (see below)
- Site to implement parking arrangements for additional cars
- Additional bike racks
- Corporate vehicles (such as minibuses) should be limited to permit 2m physical distancing.
- Buses and transport vans should consider fixed barriers (see above)
- Provide hand cleaning facilities at transport pick up points
- Ventilation should be increased (for example, by keeping windows open)
- Vehicles should be cleaned regularly (between shifts or on handover)



Site Access Points

Visitors to sites should be curtailed unless essential and/or business critical such as delivery drivers, outside maintenance or repairs



- Provide welfare facilities for all visitors.
- Drivers should remain in their vehicles if it is safe to do so, and must wash or clean their hands before and after unloading goods and materials.
- Access to toilets and washing facilities need to be given to delivery drivers by law <https://www.hse.gov.uk/pubns/books/l24.htm>
- On larger sites introduce staggered start and finish times to reduce congestion
- Implement - where reasonable - one-way entry and exit.
- Ensure a sufficient number of access points and space allowed for social distancing
- Remove or disable entry systems that require skin contact e.g. fingerprint scanners.
- Provide facilities so workers can wash or clean their hands on entering and leaving the site.
- Regularly clean common contact surfaces in reception, offices, access control and delivery areas e.g. scanners, turnstiles, screens, telephone handsets, desks.
- Fire evacuation procedures – consideration to be given to how to quickly evacuate and how to maintain distance at a muster point.

Movement around the site



Reduce the need for movement around the site where reasonable by re-planning logistics and layout of site facilities.

- Reduce the number of people in attendance at site inductions.
- Induction rooms must be carefully managed to ensure physical (social) distancing or inductions held on site in open air if possible.
- One-way systems – introduce one way flow of people around the workplace in stairs and corridors where reasonable.
- Perimeter Access Scaffolding - consider one-way systems for vertical travel additional stair towers to be installed.
- This will require effective communication to all on site.
- Toolbox talks – daily toolbox talks on Covid-19 to reiterate site operating procedures and inform of any change to site procedures.

Cleaning

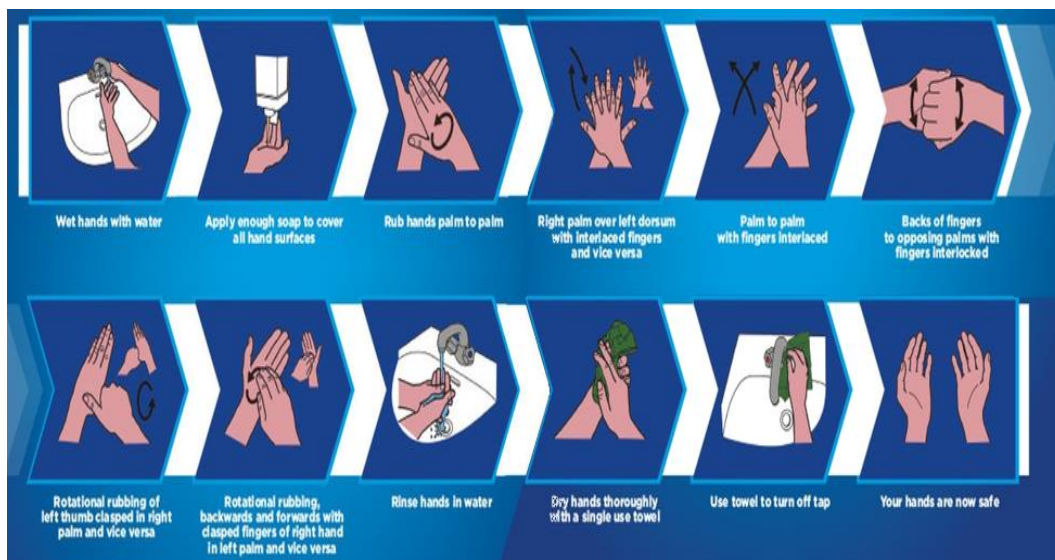
Enhanced cleaning procedures must be in place across the site, particularly in communal areas and at touch points including, where applicable:

- 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 and vehicle cabs
- Food preparation and eating surfaces
- Telephone 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
- Task appropriate glove wearing is mandatory
- Tools – sharing of tools to be prohibited unless specialist PPE used or tools are disinfected before use by anyone else.
- Maintenance of a stock of consumables to maintain cleanliness is essential



Hand Washing

- Provide additional hand washing facilities to the usual welfare facilities if a large, spread out site or significant numbers of personnel on site.



- Ensure soap, clean hot and cold (or warm) running water and disposable hand towels are readily available and kept topped up at all times.
- Provide alcohol-based hand rub where hand washing facilities are unavailable.
- Regularly clean the hand washing facilities and check soap and sanitiser levels.
- Provide suitable and sufficient rubbish bins for hand towels with regular removal and disposal. Sites will need extra supplies of soap, alcohol-based hand rub and paper towels and these should be securely stored.

Canteens and Eating Arrangements

There is a requirement under the CDM Regulations for suitable arrangements so that meals can be prepared and eaten and that includes a means for boiling water. The site cleaning regime will need to be able to ensure that these arrangements can be kept clean between uses.



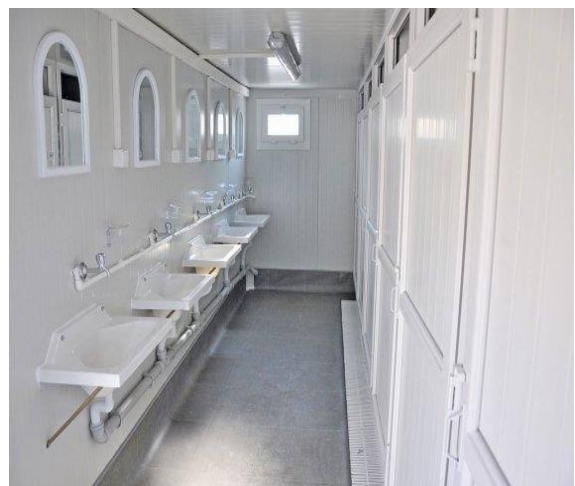
The workforce should be required to stay on site once they have entered it.

- Dedicated eating areas should be identified on site to reduce contamination.
- Break times should be staggered to reduce congestion and contact at all times.
- Hand cleaning facilities or alcohol-based hand rub should be available at the entrance of any room where people eat and should be used by workers when entering and leaving the area.
- Workers should sit 2 metres apart from each other whilst eating and avoid all contact (additional canteen facilities may be necessary).
- Where catering is provided on site, it should provide pre-prepared and wrapped food only.
- Payments should be taken by contactless card wherever possible.
- Crockery, eating utensils, cups etc. should not be reusable.
- Drinking water should be provided with enhanced cleaning measures of the tap mechanism
- Tables should be cleaned between each use.
- All rubbish should be put straight in the bin and not left for someone else to clear up.
- All areas used for eating must be thoroughly cleaned at the end of each break and shift, including chairs, door handles, vending machines and payment devices.
- Attendants, where employed, should be trained to fulfil the role of ensuring that social distancing is achieved in the canteen areas.

Toilet Facilities

Restrict the number of people using toilet facilities at any one time, “one in/one out” controls must be used. The number of toilets may need to increase to permit this.

- Wash hands using soap and water before and after using the facilities.
- Enhance the cleaning regimes for toilet facilities particularly door handles, locks and flushes.
- Portable toilets should be cleaned and emptied more frequently.
- Provide suitable and sufficient rubbish bins for hand towels, regular removal and disposal.



Changing Facilities, Showers and Drying Rooms

Introduce staggered start and finish times to reduce congestion and contact at all times.

- This may require “one in/one out” arrangements dependent upon the size of unit.
- 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 a distance of two metres.
- Provide suitable and sufficient rubbish bins in these areas with regular removal and disposal.
- Keep such facilities clear of loose personal items.



Site Meetings

Only absolutely necessary meeting participants should attend.

- Virtual meets to avoid unnecessary visitors to site and reduce travel around the site.
- Where visitors are required, limit the number at any one time and explain site guidance on social distancing and hygiene on or before arrival.
- Attendees should follow social distancing and be two metres apart from each other.
- Rooms should be well ventilated/windows opened to allow fresh air circulation.
- Hold meetings in open areas where reasonable.



Workforce planning

Social distancing should be maintained at all times. Tasks that normally cannot be undertaken following this practice must be re assessed to alter the task method to comply. If a task still cannot follow social distancing it must be abandoned, if essential then subject to a full risk assessment.

The following methods of teamwork will assist to limit any potential infection:

- Personnel paired or buddied to restrict potential infection to others on site.
- Consider segregating teams (i.e. Red & Blue teams).
- In the event that one person becomes symptomatic, placing their team-mate or pair into isolation will be good practice for any responsible employer.

Working in Close proximity



Unite's position is that social distancing should be applied at all times, with the workplace being no exception. However current government guidelines may lead to a situation where the employer will put in place a system for working in close proximity where the work is deemed essential.

Where this happens reps should insist that a risk assessment is undertaken specifically for those tasks using the following principles:

- Full consultation with union safety reps regards the assessment
- The assessment identifies why the task needs to continue
- Whether the task can be abandoned or postponed
- If the employer advocates the task/job continues:
Follow the hierarchy of control above and put in place:
- Collective controls as described above, including working in set teams for short durations.
- If barriers are not practical, includes selection of appropriate PPE see below
- A full method statement safe system of work is produced.

Summary of Unite's social distancing policy

There are different rules on social distancing in all the devolved nations, the rules are either 2m or 1m plus. All have a variation which can allow deviations from rule, Unite's policy is that 2m must be maintained. However it is realised that some employers will favour 1m plus where devolved governments have put this in place we have developed the following policy to assist:

- Trade union safety reps to be consulted around all aspects of social distancing
- Negotiate with employers to maintain 2m as opposed to 1m plus until test and trace is in full operation and R number reduces
- Keep a 2 metre rule in workplaces wherever possible
- Maintain current controls where they exceed the minimum
- New risk assessments to justify any change in distancing and controls
- Additional control measures implemented when working under 2 metres
- Enhanced cleaning and hygiene and PPE in relation to any work under 2 metres
- Full involvement of Unite reps in all assessments decisions

Ability to stop work on health and safety grounds by agreement

Union reps should seek to agree with their organisations an agreed procedure whereby the worker can stop work on health and safety grounds. As follows

- Create a safety checklist that the worker can fill out prior to start of a job/process
- Part of the document to contain a stop work element that employee can sign off
- Supervisor is informed and discusses resolution if not resolved supervisor signs off
- Task/job is halted
- Task is reviewed by management and union reps

If such a procedure cannot be agreed, please refer to advice from legal department around stopping work on health and safety grounds. See appendix 1 and/or contact regional officer for advice.

Personal Protective Equipment (PPE)

Current advice from all health authorities is that PPE should only be used in a health care setting and within a narrow group of sectors, this may change and is a fluid situation. Please refer to the Government [PPE guidance hub](#) to keep updated. **Note there are gender differences connected to all PPE, this needs to be taken into account when selecting appropriate PPE.**

Face masks

FFP3



FFP2



N95



Where the existing operational risk assessment requires RPE such as FFP2 or FFP3 respirator to be worn to protect against contaminants and particulates, this must be adhered to regardless of level of protection offered for Covid-19. In circumstances described in section “Working in close proximity” we are advising a minimum of FFP2 or N95. We would expect employers to minimise the need for this method of work so as not to impact on PPE supply, ensure duration is short avoiding discomfort.

NOTE: N95 is a USA standard which is equivalent to FFP2. KN95 is a standard in China, HSE have stated that many of these coming onto market are fake and to be avoided.



DO NOT wear a mask for Covid-19 purposes that has a valve, if worn by anyone infected they will be breathing out infected air through the valve

Gloves



Use glove protection as per standard operations, or use disposable gloves such as Nitrile single use, avoid touching face

- If gloves are reusable, wipe down the outside with alcohol wipes before removing and remove gloves without touching the outside of the gloves
- Wash Hands before and after removing

Eye Protection

Use eye protection as per standard operations /disposable or visor to limit the potential for Covid-19 transmission via mucus membrane including the eye.

- Ensure that eye protection is compatible with RPE
- Clean with alcohol-based wipes
- Visors can offer fair protection from COVID19 droplets but masks are superior.



Coveralls: Disposable coveralls are available, however if reusable normal overalls are being used ensure regular laundering is maintained.

Non - Medical Face Coverings



Cloth face coverings are not respirators or disposable facemasks and do not protect the worker wearing them from exposures. Cloth face coverings are only intended to help contain the wearer's respiratory droplets from being spread. A face covering helps contain small droplets that come out of your mouth and/or nose when you talk, sneeze or cough, particularly useful if you have Covid-19 and are not showing symptoms.

- Face coverings are not the same as face masks and are not CE marked.
- Unite recommends face coverings made to World Health Organisation standards
- Have 3 layers but ensure the finished product is breathable, constructed of:
 - Outer layer of hydrophobic material such as polypropylene, polyester, or their blends
 - Middle hydrophobic layer of synthetic non-woven material such as polypropylene
 - Inner layer of a hydrophilic material such a cotton or cotton blends

When to wear a face covering

- Mandatory on public transport, shops most public indoor places and hospitals.
- For latest information in [England](#), [Scotland](#), [Wales](#) [NI](#) and [ROI](#)
- This is in line with new World Health Organization (WHO) advice that states non-medical face coverings should be worn in public.
- **Face coverings are now being legally mandated gradually in certain workplaces and areas**
- **Some employers are choosing to mandate them despite legislation not in place as yet**
- **Where a risk assessment identifies their use in workplaces, communal areas for example. They must be supplied and paid for by employers to WHO standard and must be worn collectively in those areas to be effective.**
- The employer should assess workers' travel arrangements during Covid-19 pandemic. Given that fact and their mandatory status on public transport, Unite feels they should be paid for and supplied to the WHO standard by employers for travel to and from work.
- HSE does not enforce or regulate use of face masks, this is undertaken by the police.
- See appendix 3 on guidance around use of face coverings

[WHO guidance on the use of face masks in context of COVID 19.](#)

APPENDIX 1 - Stopping work on health and safety grounds

The employer's attention should be drawn to the existence of S.44 and S.100 of the Employment Rights Act. This prohibits individuals who have left the workplace in circumstances of danger, which they reasonably believe is imminent and cannot be averted, from being subjected to a detriment or dismissal.

Where employers are not operating safely or in accordance with government guidance including the heightened hygiene provisions, social distancing and the provision of PPE, then an individual can justify leaving the workplace, refuse to return where any danger persists or take appropriate steps to protect themselves. Any such decision would be on the basis of their own decision regarding their workplace as to whether there are "circumstances of danger" which they reasonably believe would be serious and imminent.

This does not mean returning home, but removing themselves to a place where that harm no longer exists or until such time as that danger is minimised or averted. If this situation occurs officers should revert to the Q&A materials that have been circulated and/or contact their legal officer for advice on how to proceed.

These individual rights do not apply to all categories of worker particularly those that have the status of self-employed. However the duty for employers, hirers or contractors to provide a safe working environment for all those engaged in a workplace applies consistently. Where poor safety practices are reported to the union, Unite will make the appropriate interventions with those organisations to ensure the highest standards of safety are maintained.

(Please go to next page for appendix 2)

APPENDIX 2 – Construction sector checklist

Construction sector

COVID-19 CHECKLIST



THE PANDEMIC AT WORK

General:

- COVID-19 operational risk assessment has been completed and all unintended consequences identified.
- Clear signage throughout the workplace to encourage 2m social distancing and handwashing including entrances and exits.
- Process and agreed responsibilities in place for enhanced cleaning of all touch points at the beginning of every shift.
- Cleaning stations in place to enable employees to clean, including visual aids, instructions on use and waste disposal facilities.
- Process for and location of secure storage and issue of PPE and cleaning products in place and understood.
- PPE distribution, guidance on use and disposal facilities in place.

Car parking:

- Clear signage in parking areas to maintain the social distancing standard and remind employees of the importance of not attending workplace if they are symptomatic.

Entering and moving around the site:

- Mark up the areas using tape to clearly identify 2m rules to encourage social distancing.
- At busy times (start and end of shifts) main entrances held open if possible.
- Handwashing facilities or sanitiser provided at entrances and exits.
- Internal pedestrian one-way system for any aisles less than 2m with agreed flow, maintain emergency exits and fire doors (closed).
- Areas where there is likely to be a cluster of people, identify using 2m markings social distancing requirements.

Access points:

- Shift start and finish times staggered to reduce worker contact and any bottlenecks.
- Visitors limited access to workplace site unless essential.
- All non-essential staff working remotely.
- Process in place for the management of deliveries to minimise contact with other people whilst loading and unloading.
- Access to be given to handwashing facilities.

Unite – fighting for a safer workplace





THE PANDEMIC AT WORK

Welfare facilities – toilets, locker rooms, rest areas, canteen:

Provision of an isolation area where any employees showing symptoms can be directed until they are able to leave site.

Restrict the number of people using the toilet facilities e.g. using an engaged sign.

Canteens and rest areas - minimise the number of chairs to maintain 2m rule.

Canteens and rest areas - staggered breaks if needed to reduce the number of people in the area.

Where limited catering facilities are provided, food to be wrapped and only disposal cutlery provided.

Offices/meeting areas:

Desks, floors or signage in place to highlight the importance of social distancing.

Rooms labelled to identify max number of people to respect social distancing requirements.

Minimise the number of meeting rooms available.

Sustainment process:

Compliance to this checklist must be reviewed at least once per week with site leadership, TU team and HSE team.

Signatures:

Management representative:

Trade Union representative:

Health, Safety and Environmental Professional:



APPENDIX 3: How to safely wear a non-medical fabric face covering

Appendix 3:

HOW TO WEAR A NON-MEDICAL FABRIC FACE COVERING SAFELY



Clean your hands before touching the mask



Inspect the mask for damage or dirt



Adjust the mask to your face without leaving gaps on the sides



Cover your mouth and chin, ensure you are breathing through the mask ok



Avoid touching the mask



Clean your hands before removing the mask



Remove the mask by the straps behind the ears or head



Pull the mask away from your face



Store the mask in a clean plastic, resealable bag if it is not dirty or wet and you plan to re-use it. **If not retain in bag and dispose of responsibly***



Remove the mask by the straps when taking it out of the bag



Wash the mask in soap or detergent, preferably with hot water, at least once a day



Clean your hands after removing the mask

A fabric mask can protect others around you. To protect yourself and prevent the spread of COVID-19, remember to socially distance from others, clean your hands frequently and thoroughly, avoid touching your face and mask. Do not wear around head, neck or chin even when eating or drinking.

Based on WHO advice

*See Government advice on disposal: <https://www.gov.uk/guidance/coronavirus-covid-19-disposing-of-waste>

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APPENDIX 4: Covid can affect your mental health

Appendix 4:

**COVID CRISIS
CAN AFFECT
YOUR
MENTAL
HEALTH**



unite
theUNION

**CONSTRUCTION
WORKERS**



THE PANDEMIC AT WORK

**SPEAK TO SOMEONE
BEFORE YOU UNRAVEL**
**PLEASE VISIT UNITE COVID 19
WEB PAGES FOR FURTHER INFO**

**DON'T
SUFFER IN
SILENCE**