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**Introduction**

This document is intended to consolidate practical guidance that is available at time of writing on how to manage business continuity of shopping centres during the COVID-19 pandemic. It addresses risks to both workers and the public. It draws from already published documents which are acknowledged in Section 7.

This guide will assist shopping centres to implement the mandatory Return to Work Safely Protocol for Employers and Workers that applies to all workplaces across the economy.


The Return to Work Safely Protocol, COVID-19 Specific National Protocol for Employers and Workers should be reviewed at [https://dbei.gov.ie/en/Publications/Return-to-Work-Safely-Protocol.html](https://dbei.gov.ie/en/Publications/Return-to-Work-Safely-Protocol.html) in advance of implementing the recommendations of this guide. This guide incorporates current advice about measures to reduce the spread of COVID-19 in the community issued by the National Public Health Emergency Team (NPHET). As the advice issued by NPHET continues to evolve, this document and the measures employers and workers need to address may also change. Therefore, it should be noted that the attached details are non-exhaustive and are also subject to change.
1. Scope

This document gives guidelines for shopping centres restoring business operations following a disruption or closure due to the COVID-19 pandemic. This document can be used to implement, maintain and improve a shopping centres ability to protect against, prepare for, respond to and recover from COVID-19 related disruptions.

This document focuses on activities related to shopping centres but does not address every possible scenario for all shopping centres.
2. Terms and definitions

**contact tracing**
process of identifying persons who may have come into contact with an infected person (“contacts”) and the subsequent collection of further information about these contacts.

**coronavirus**
broader name for the family of diseases that includes COVID-19, and its entry has been revised to show that relationship. A new example has been added to the entry for novel (“new”)

**COVID-19**
new name for a new disease, coined as an abbreviated form of coronavirus disease 2019

**centre management team**
person or group of people who directs and controls all matters related to the recovery and protection of processes and business functions during the COVID-19 pandemic

**close contact**
person-to-person contact or spray of droplets during coughing and sneezing

**contact log**
person-to-person contact log of all site attending employees which will assist in contact tracing as and when positive cases arise

**face mask**
is shaped to cover the mouth and nose. Face masks are CE marked.

**face covering**
is a material you wear that covers the nose and mouth and is made from materials such as cotton or silk. These coverings are not CE marked.

**index case**
first documented case of an infectious disease or genetically transmitted condition or mutation in a population, region, or family
isolation
separation of infected individuals and healthy individuals

shopping centre owner
individual or persons representative of the company or companies owning or leasing the shopping centre

restricted movement
separating well persons, who have been exposed to the infection, from other well persons during the incubation period of an illness

retail unit/shop/store
space within a building for the sale of merchandise or the provision of services involving the receiving and returning of goods

retailer
seller of goods or services directly to consumers

shopping centre lead worker representative
individual or persons representative of the shopping centre charged with ensuring that COVID-19 measures are strictly adhered to in their place of work

retail unit lead worker representative
individual or persons representative of a retail unit charged with ensuring that COVID-19 measures are strictly adhered to in their place of work

shopping centre
building or space, usually with shops on one or both sides

working from home
situation in which an employee works mainly from home and communicates with the company by electronic means

risk assessment
overall process of risk identification, risk analysis, and risk evaluation

restricted movement and self-isolation
avoidance of contact with other individuals for a period of time during the outbreak of a contagious disease usually by remaining in one’s home/room and limiting contact with family members

physical distancing (social distancing)
practice of implementing measures to maintain safe distances for preventing the spread of disease

treatment
medical treatment for COVID-19 symptoms and/or related complications
3. Background

Organizations should refer to the latest public health advisories issued by HSE, Gov.ie and other government agencies as the situation evolves. See section 7 for agency information.

3.1 Symptoms of COVID-19

It can take up to 14 days for symptoms of coronavirus (COVID-19) to appear. They can be similar to the symptoms of cold and flu. Common symptoms of coronavirus include:

- a fever (high temperature - 38 degrees Celsius or above)
- a cough - this can be any kind of cough, not just dry
- shortness of breath or breathing difficulties
- loss or change to your sense of smell or taste – this means you’ve noticed you cannot smell or taste anything, or things smell or taste different to normal
- Generally, these infections can cause more severe symptoms in people with weakened immune systems, older people, and those with long-term conditions like diabetes, cancer and chronic lung disease.

3.2 Spread of COVID-19

Coronavirus (COVID-19) is spread in sneeze or cough droplets. You could get the virus if you:

- come into close contact with someone who has the virus and is coughing or sneezing
- touch surfaces that someone who has the virus has coughed or sneezed on and bring your unwashed hands to your face (eyes, nose or mouth)

Employees are advised to follow public health advice and guidance including ensuring good hygiene practices, such as frequent hand washing and respiratory etiquette, and physical distancing to protect themselves and their work colleagues against infection and should seek professional healthcare advice if unwell. Employees should avoid making contact with their face and in particular their eyes, nose and mouth; and workers should wash their hands immediately before touching their face.

Employees who have symptoms of acute respiratory illness are recommended to stay home if they are well enough to do so or contact the health service or their GP if they are acutely unwell. They should not come to work and should self-isolate for 14 days from symptom onset, the last five days of which should be fever free.
3.3 How long the virus can survive on surfaces

Common household disinfectants will kill the virus on surfaces. Clean the surface first and then use a disinfectant. Coronavirus can survive for:

- up to 72 hours on plastic and stainless steel
- less than 4 hours on copper
- less than 24 hours on cardboard
4. Recovery – Planning and Recovery of processes and business functions

4.1 General
The purpose of recovery is to re-establish business activities and to support business continuity following a disruption or closure. The shopping centre owner should have a centre management team in place before the planning and recovery of business activities begins.

The centre management team should have documented procedures to restore and return business operations from the temporary measures or closure during the COVID-19 pandemic. These should address relevant audit and corporate governance requirements. There should be an appropriate communication structure in place between the centre management team and all retail units (See 5.7 Communication planning).

The documented procedures should include a detailed assessment of the situation and its impact, the determination of tasks and, the steps to be taken for recovery.

The documented procedures for recovery should include provision for the resumption of all activities and not just those identified as prioritized activities. The recovery process should recognize that activities with a lower priority are to be resumed at some point in time and should have resources allocated.

4.2 Risk assessment
Where a shopping centre has closed due to COVID-19, the employer is required to review and update their occupational health and safety risk assessments and safety statement in order to take account of any work changes which may arise following implementation of control measures to control infection spread. The centre management team, in consultation with its retail units, should identify risks and put the necessary control measures in place.

Ongoing government advice and directives should be closely monitored, which can have an impact on the business continuity plan.

In the event of one or more cases, HSE advice should also be considered when deciding what actions should be taken.

4.3 Awareness
The centre management team should ensure that all persons working under its control (e.g. staff, contractors, suppliers) are aware of the shopping centres business recovery policy and business recovery objectives.

The centre management team should ensure that all persons under its control understand their role with regard to the business recovery process and have completed the necessary induction prior to returning to work.

4.4 Analysis of business impact
An analysis of business impact enables the shopping centre to set priorities for resuming activities that have been disrupted. The centre management team should identify and classify as “prioritized” any activities where failure to resume them could result in an adverse impact. Activities other than those needing to be recovered quickly can also be prioritized. For example, an activity that cannot be resumed for six months but could take a minimum of eight months to resume should be prioritized.

NOTE: The analysis enables the identification of the resources that are required for recovery.

4.5 Selection of recovery strategies and solutions
Business continuity solutions for resuming or recovering a prioritized activity can be expensive. Where the centre management team estimates this to be the case, it may select alternative solutions that are acceptable to meet its business recovery objectives or, treat affected services as exclusions from the scope of their business recovery objective.

All decisions should be guided by the latest public health advice and the Return to Work Safely Protocol for Employers and Workers.

4.5.1 Resource requirements
A determination of the resource requirements necessary to implement selected solutions should be made by the centre management team.

4.5.2 Safety & welfare during recovery
Special attention should be paid to any groups with physical and learning disabilities or other specific needs (e.g. pregnancy, temporary disability due to injury, illness, etc). Planning in advance to meet these requirements can reduce risk and reassure those affected. The long-term impacts of incidents should not be underestimated. The organization should develop appropriate solutions, including consideration of relevant social and cultural issues, to promote employee safety and wellbeing throughout the duration of the recovery of operations.

4.6 Recovery of Retail units
Following a decision to recover the processes and business functions of a shopping centre, recovery of all retail units within the shopping centre should be co-ordinated. (See Section 5)

Each retail unit is responsible for their own business continuity plans that meet their requirements to restore business activities and, that meet the requirements of the Return to Work Safely Protocol.

NOTE: Guidance on how to manage business continuity of the retail sector during the COVID-19 pandemic can be found in the NSAI COVID-19 retail protection and improvement guide.
5. Operational structure

5.1 General
The operational structure should be established in accordance with the requirements and policies of the centre management team and the conditions particular to the shopping centre.

The operational structure should be designed to encourage effective and efficient communication and cooperation between the centre management team and all retail units to ensure compliance with the Return to Work Safely Protocol.

5.2 Centre Management Team
The centre management team is responsible for the planning, coordinating and implementation of the COVID-19 shopping centre business continuity plan.

For the purpose of COVID-19 matters, the centre management team should implement and maintain a structure, identifying roles and responsibilities of each member within the team and the relationships between the members should be clearly stated.

COVID-19 related roles and responsibilities within the centre management team can include:
- ensuring that measures are fully adhered to by the centre management team and service contractor teams in conjunction with the contract managers;
- ensuring that the measures are fully adhered to by the tenant teams in conjunction with the store managers;
- ensuring effective communication between the centre management team and retail units. (see communication planning section).

Collectively, the centre management team should be competent to:
- assess the nature and extent of a disruption and its potential impact;
- assess the impact against pre-defined thresholds that justify initiation of a formal response;
- activate an appropriate business continuity response;
- plan actions that need to be undertaken;
- establish priorities;
- monitor the effects of the disruption and the organization’s response;
- activate the business continuity solutions;
- with relevant interested parties, authorities and the media.
5.3 Lead worker representative
A ‘shopping centre’ lead worker representative should be appointed by the centre management team with the responsibility to represent staff and to assist in the implementation of the measures identified in the COVID-19 shopping centre business continuity plan.

5.4 Human resource management
The following actions should be taken:
1. Develop a plan for the continuity of leadership in the event of absence of key decision makers and executives.
2. Consider flexible work arrangements for employees, including working from home. Review employee management policies such as absenteeism, sick leave, overseas travel, workplace closure and recall of non-critical employees and their families from affected countries.
3. Defer all non-essential travel. The centre management team should identify what is essential travel.
4. Employers should routinely check the HSE, HSA and Gov.ie websites for the latest updates on the COVID-19 situation so that an informed decision can be made on whether to proceed with business travel plans.
5. If business travel is unavoidable and alternative options such as teleconferencing and video-conferencing are not possible, employers should arrange for their employees to consult a doctor for travel health advice prior to travel.
6. For employees whose work is performed in affected countries or regions, employers should ensure that employees are adequately protected or monitored in accordance with HSE guidelines.
7. Requirement to report any foreign travel either on authorised leave or on personal time off to managers prior to returning to work
8. Employees presenting symptoms of COVID-19 shall be instructed to self-isolate for 14 days and contact a GP for further health advice.
9. All suspected and confirmed cases should be treated confidentially and sensitively.
10. During self-isolation, consider flexible work arrangements, such as working from home.
11. Employees returning to work following self-isolation require health clearance/should be monitored closely for 14 days, with the last 5 days fever free.
12. Keep a log of contact/group work to facilitate contact tracing

5.5 Report issues to your employer/centre management team
If an employee develops symptoms or they have come in contact with an infected case, they should inform their manager and provide any contact log information. They should immediately follow the self-isolation recommendations. All information provided by the employee should be treated confidentially.

The manager/retail unit should subsequently inform the centre management.
5.6 COVID-19 shopping centre business continuity plan
A COVID-19 shopping centre business continuity plan should be developed and established by the centre management team. When developing the plan, the centre management team should ensure that current guidelines issued by Government and the Health Authorities.

The COVID-19 shopping centre business continuity plan and procedures should include the following:
1. Roles and responsibilities i.e. relationship between centre management team and retail units;
2. Staff induction and training;
3. Return to Work Form;
4. Prevention measures to be implemented, see section 6;
5. Communication of these measures with employees, retailers and customers, see section 5.7;
6. Monitoring and reporting mechanism, e.g. inspections to review compliance;
7. Response plan to deal with a suspected/confirmed case of COVID-19.

5.7 Communication planning
The centre management team should ensure that appropriate communication processes are established for the shopping centre, and that communication takes place effectively and efficiently.

An appropriate communication structure should be put in place to ensure effective communication between the centre management team and retail units.

Communication planning should take into account the needs of the centre management team, retail units, customers and other interested parties, and should result in a documented communication plan.

This communication plan should define the information that will be formally communicated, the media used to transmit it and the frequency of communication. The requirements for the purpose, frequency, timing and records of meetings should be defined in the communication plan. The communication plan should identify who will send and receive information.

Communication strategies should be robust to minimise the risk of misinformation and to:
- provide up-to-date reliable information to employees;
- provide up-to-date reliable information to suppliers and customers;
- clarify the company’s procedures and policies;
- ensure 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 shopping centre.

The centre management team should use the national resources, posters and guidance that are available and updated on a regular basis to reflect the rapidly emerging situation.

5.7.1 Communicating with suppliers, customers and other stakeholders
The shopping centre management team should:
- Identify essential suppliers and service providers and discuss continuity issues with them such as understanding their business continuity plans.
- Identify essential customers and ensure that plans are in place to meet customer needs.
• Develop a plan on how and when to activate alternative suppliers and/or alternative delivery means to customers.
• Identify stakeholders in their local network and share best practice concerning defence against COVID-19.

5.7.2 Communicating with employees
The communications co-ordinator within the centre management team should be identified. Their role should include disseminating the communications plan in line with business needs and the business continuity plan. The centre management team should ensure all staff are familiar with centre policies and relevant legislation including:
• absence;
• sick leave;
• lay-off and short time;
• force majeure;
• Employment Equality Acts 1998 to 2015;
• Payment of Wages Act 1991;
• Organisation of Working Time Act 1997 (breaks, etc).

Managers should be prepared to deal with these issues as they arise, and employees should be clear about what is required.

The appointment of a communications co-ordinator will centralise the information and manage the resulting impact. This ensures awareness of absences across the business, other operational issues and any problems with suppliers or other related issues, in real time. This will facilitate making informed decisions on the allocation of resources.

5.7.3 Attendance and absence management
It is important to review, communicate and formally implement the absence and sick leave policies that are in place. In advance of any potential increase in absence, all employees should be fully familiar with policy requirements, particularly around what constitutes acceptable reasons for absence, the notification and certification requirements and the social welfare procedures.

Employers should follow through with their policies and ensure consistency. The first absence in an unusual situation such as the potential exposure to COVID-19, may initially be dealt with on an ad hoc basis which may set an undesirable or unsustainable precedent should absence levels suddenly escalate.

Employers should consider the effect that significant employee absences would have on their workplace. Various types of absence need to be considered as it is possible that:
- several employees may contract a virus;
- employees may have family members who require care;
- there may be a fear factor, where employees consider absenting themselves for fear of contracting a virus.

Employees who have travelled to areas affected by COVID-19 and employees who have been in contact with individuals who have COVID-19 or indeed any virus of special concern should follow the HSE guidance for advice in the first instance and then notify their manager before attending for work.

Employers should check on employees’ health by phone or email during their absence from work.
If an employee is absent due to a fear of contracting the virus an employer should consider the risks and consider whether the employee is a vulnerable employee. Where there is no increased risk for the employee, the employer can request them to attend work. An employee who continues to be absent from work in these circumstances may be subject to disciplinary action for unauthorised absence, in line with the shopping centres policy.

At some point, based on public health advice, certain aspects of company policy and procedure may require adjustment in accordance with the situation as it evolves. Therefore, it is important to keep the policy under review and to communicate clearly any changes.

5.7.4 Performance monitoring

The centre management team should use performance indicators to review and evaluate the performance and effectiveness of the COVID-19 measures and their outcomes in order to identify successes and areas requiring correction or improvement. The data obtained can be used to identify patterns and to enable the centre management team to obtain information regarding the performance to the COVID-19 requirements.

Procedures for monitoring, measuring, analysing and evaluating the performance and the effectiveness of COVID-19 requirements should include:

1. determining the methods for monitoring, measurement analysis and evaluation, including:
2. specifying what is to be monitored and measured;
3. identifying how, when and by whom the monitoring and measuring should be performed;
4. setting performance metrics, including qualitative and quantitative measurements that are appropriate to the organization and ensure valid results;
5. recording data and results to facilitate subsequent corrective action analysis;
6. monitoring the extent to which the organization's COVID-19 requirements and objectives are met;
7. measuring compliance with applicable Government and HSE COVID-19 requirements;
9. recording and monitoring training received, including;
10. evaluation of training received against defined training needs and requirements;
11. the improvement of the development programme as needed.
12. Internal audit at planned intervals to assess the performance of the COVID-19 arrangements.
6. Defence – How to defend against the spread of COVID-19

6.1 Competence and training requirements
The centre management team should have a process for identifying and delivering the COVID-19 training requirements. The centre management team should:

- ensure that the necessary person(s) receive appropriate COVID-19 training to implement the requirements of this document;
- determine the necessary COVID-19 competence and training of person(s) doing work under its control;
- where applicable, take actions to acquire the necessary competence, and evaluate the effectiveness of the actions taken;
- retain appropriate documented information as evidence of competence.

**NOTE:** Applicable actions can include, for example, the provision of training to, the mentoring of, or the reassignment of currently employed persons, or the hiring or contracting of competent persons.

The centre management team should require contractors working on its behalf to demonstrate that person(s) doing work under its control have the requisite competence and training for COVID-19.

The centre management team should provide information to employees on the following:

- Signs and symptoms of COVID-19. (See section 3.1);
- How COVID-19 is spread. (See section 3.2);
- Cleaning routines and hygiene controls (including respiratory hygiene, cough etiquette, handwashing and physical distancing);
- Use of Personal Protection Equipment (PPE) (e.g. disposable gloves, masks, and disinfectants) as relevant;
- What to do if an employee or a member of the public becomes unwell and believe they have been exposed to COVID-19. (See section 6.9);
- When individuals in the workplace have had contact with a confirmed case of COVID-19;
- Cleaning offices and public spaces where there are suspected or confirmed cases of COVID-19;
- Rubbish disposal, including tissues;
- Travel Restrictions. (See section 5.4);
- Restricted movement advice;
- Familiarising key staff with the COVID-19 shopping centre business continuity plan;
- Cross-training workers and establish covering arrangements to minimise disruptions.
6.2 Return to work

The centre management team should establish a pre-return to work policy and issue a form for workers to complete at least 3 days in advance of the return to work. This form should seek confirmation that the worker, to the best of their knowledge, has no symptoms of COVID-19 and also confirm that the worker is not self-isolating or awaiting the results of a COVID-19 test.

The following questions should be included on the form: If a worker answers Yes to any of them, they are strongly advised to follow the medical advice they receive or seek medical advice before returning to work:

- 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,
- Have you been diagnosed with confirmed or suspected COVID-19 infection in the last 14 days? Yes/No,
- 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,
- Have you been advised by a doctor to self-isolate at this time? Yes/No,
- Have you been advised by a doctor to cocoon at this time? Yes/No.

To assist with the return to work, employers can find templates and checklists at: https://www.hsa.ie/eng/topics/covid-19/return_to_work_safely_templates_checklists_and_posters/return_to_work_safely_templates_checklists_and_posters.html

6.3 Staff Induction

Induction training should be provided for all workers. This training should at a minimum include the latest up-to-date advice and guidance on public health:

- what a worker 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;
- the employer and the workers;
- any other sector specific advice that is relevant.

6.4 Isolation Area

There should be an area assigned to isolate people (patrons/employees) with COVID-19 symptoms on presentation to a manager, customer services desk or centre personnel. Please refer to the Return to Work Safely Protocol for further details.

6.5 Visitors/customers

Visitors and customers should be advised to stay home if they are feeling symptomatic and follow HSE guidelines on self-isolation.
6.6 Hygiene and contact reduction

6.6.1 Employee hygiene practices

Employee hygiene practices are important to prevent the spread of COVID-19. Employers should erect appropriate signage on their premises and communicate the HSE recommendations to prevent the virus spreading. The HSE have created posters which employers can use and are available at: https://www.hse.ie/eng/services/news/newsfeatures/covid19-updates/partner-resources/

6.6.2 Hand washing

Wash hands regularly and avoid touching of the face with hands. Hand gels with at least 70% alcohol content can be used if soap and water are not available. You should always wash hands:

- After coughing or sneezing and after toilet use;
- Before eating;
- If in contact with a sick person, especially those with respiratory symptoms.

Good practices for hand washing should be followed.

NOTE: See HSE recommendations for hand washing: https://www2.hse.ie/wellbeing/how-to-wash-your-hands.html.

6.6.3 Mouth covering

When coughing and sneezing, you should cover your mouth and nose with your bent elbow or tissue. Put used tissues into a closed bin and wash your hands.

6.6.4 Physical distancing

Introduction of physical distancing measures should be implemented across all spaces within the shopping centre. Each space should achieve the following:

a. keeping a distance of 2 metres (6.5 feet) between individuals or per current government guidelines;

b. in settings where 2 metre worker separation (or per current government guidelines) cannot be ensured by organisational means, alternative protective measures should be put in place for example:

- engineering controls: install physical barriers, such as clear plastic sneeze guards between workers;
- maintain at least a distance of 1 metre or as much distance as is reasonably practicable;
- minimise any direct worker contact and provide hand washing facilities and other hand hygiene aids, such as hand sanitisers, wipes, etc. so workers can perform hand hygiene as soon as the work task is complete;
- make face masks available to the worker in line with Public Health advice;

NOTE: Where physical distancing is not possible, a risk assessment should be completed with documented control measures put in place

c. customer facing roles should adhere to physical distancing protocols (see above) when assisting customers
d. avoid making close contact with people (i.e. do not shake hands);
e. reducing time spent in close proximity with others;
g. reducing office density/support staff through working from home or split shift arrangements;
h. the use of common routes, e.g. stairs, doors, elevators, must be adjusted to ensure that physical distancing can be maintained between individuals;
i. restricting/stagerring the use of canteen facilities;
6.6.5 Restriction of visitors
A restriction on visitors on business to the shopping centre should be put in place, i.e. suppliers, contractors, sales people, etc. However, where business critical visitors are required to attend the site, a controlled access process should be in place including adherence to sanitisation processes and full personal contact details (e.g. telephone number, last place visited should be collected to assist with contact tracing). See Annex A for Visitor/Contractor COVID-19 Questionnaire template.

6.6.6 Restructuring and splitting teams/shifts
The following should be implemented where it is practicable to do so:

- revision of staffing rosters and splitting of teams to ensure separation of personnel in order to limit joint exposure and protecting the business function;
- cross-train, and identify alternative sources of labour to facilitate a full complement of the required skills needed on each team/shift;
- avoid switching of employees from one shift to another;
- implement an ‘air gap’ or delayed shift changeover to accommodate a full cleaning/disinfection of all shared equipment, and reduce unnecessary interactions between different shift personnel;
- minimise the sharing of equipment and/or tools; and
- identify and suspend all non-essential operations which do not directly impact business functionality.

6.6.7 Zoning
If possible or appropriate, work areas can be divided into zones with personnel allocated to work within each zone. Zones could be identified by colour, number, section, etc. Movement between zones should be minimised and controlled at all times. Zoning can be used for shopping centre settings, warehouses and distribution centres. The following zoning template could be used.

<table>
<thead>
<tr>
<th>Shift No.</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff Member Name</td>
<td>Allocated Zone</td>
</tr>
</tbody>
</table>
6.6.8 Cleaning

Cleaning of all general work areas and frequently touched objects and surfaces should be conducted at regular intervals using a detergent. Disinfectant is required in bathrooms / toilets and when a known suspected case of COVID-19 has been in an area. Standard household disinfectants are suitable. Further information on cleaning in non-healthcare settings is available from the ECDC at:

Examples of surface that require routine cleaning include:

- Entrance door handles where doors are not automatic;
- Card Reader Pin Pads at customer service counters;
- Customer facing counter tops, i.e. customer service counter;
- Communication equipment i.e. headsets, barcode readers, mobile scanners, printers;
- Lifts/Escalators;
- ATM’s;
- Staff and customer toilets.

The centre management team should liaise with all retail units to ensure that they are aware of their responsibilities to clean all work areas and frequently-touched objects and surfaces.

A visible cleaning routine can instil staff and visitor confidence. For further cleaning information refer to Section 6.9.

6.7 Additional strategies to minimise spread

6.7.1 Common aisleways/corridors/walkways/lifts

6.7.1.1 Signage and communications

Signage should be posted at centre entrances and carpark entrance highlighting the HSE guidelines for health and safety regulation.

Signage should be posted along shopping walkways throughout the centre highlighting current HSE COVID-19 guidelines.

Signage should be posted in restrooms stating clear terms of usage and highlighting physical distancing measures at each contact point.

COVID-19 related information and guidelines can be displayed on digital screens inside shopping centres (where applicable) or, printed stands may be used.

COVID-19 signage should be posted in food service areas.

Information on COVID-19 code of conduct and policy should be posted across all centre communication channels to include website and social media.

Where possible, shopping centre announcements should be made using a public announcement (PA) system at appropriate intervals.

Specific messaging should be considered for customer lift users requesting only one person or one household per lift whilst encouraging use of stairs, travellators and escalators.
6.7.1.2 Marking of routes within the centre
The following should be considered when marking routes within the shopping centre:
• use of clear communication vinyl’s to mark walking routes.
• establishment of right-hand/left-hand traffic.
• introduction of a One-way traffic system.
• placing distance marking lines on the floors of centres in line with physical distancing guidelines.
• the introduction of guidance systems on floors highlighting the traffic flow direction within the centre.

6.7.2 Customer service desks
There should be physical barriers, such as clear plastic sneeze guards or equivalent at all Customer Service Desks. Appropriate floor markings should also be used to maintain physical distancing at customer service desks. Where possible, digital transactions rather than cash should be encouraged.

6.7.3 Non-essential facilities
With regards to non-essential facilities, the following should be considered:
• closure of non-essential facilities such as playgrounds, prayer areas, play equipment closed or provide clear access/egress controls in place regarding hand sanitisation and numbers to ensure physical distancing can be maintained.
• blocking of Wi-Fi in public areas to discourage non-essential use of the centre in regard to controlling of numbers of people within the centre.
• remove massage chairs.
• removal of product carriers.
• removal of decorations.
• removing seating areas (with exception of those for people with mobility or disability requirements)

6.7.4 Programme of disinfection within the centre
A planned programme of disinfection should be implemented. This can include disinfection of:
• doors/door handles at entrances and exits should be implemented. restroom doors and entire restroom areas should be implemented.
• escalator handrails should be implemented.
• elevator buttons should be implemented.
• shopping carts, baskets and mobility scooters should be implemented per retail unit or centrally as appropriate.
• ATM Pin Pads.
• Car Park Ticket Machines.
There should be maintained hand disinfection points at entrances and exits.
There should be an appropriate amount of hand disinfection stations inside the centre.

6.7.5 Wearing of face coverings
Customers and visitors entering the general centre should be encouraged to wear face coverings with appropriate signage to communicate this to customers.
6.7.6 Monitoring of compliance to guidelines

Where possible video surveillance should be used with a footfall counting system and direct contact with security personnel if available.

The COVID-19 centre management team should organise personnel to patrol the centre at all times to aid in managing physical distancing measures.

6.7.7 Car Parks

Where possible, the following measures should be considered:

- Limiting of customer parking spaces to comply with physical distancing requirements; access to grocery only with shopping carts, where applicable.
- Separating entrances and exits to shopping promenades.
- Use of security personnel as parking lot attendants to monitor and implement centre parking guidelines.
- Implementation of a “shopping cart management” protocol either centre wide or per retail unit as appropriate to include hygiene measures.
- Sanitisation of contact areas (door handles/ticket machines/elevator controls for example) to and from the car park where appropriate.
- Separation of walking areas (in/out) by means of markings on floors, barrier tape, and signage in centres.

6.7.8 Food Service Areas within shops, food court type areas and kiosks

6.7.8.1 Disinfection programme

For food service areas within shops and food courts serving take away options the following should be considered:

- increasing staff cleaning rota.
- a planned programme of disinfection of doors/door handles at entrances and exits should be implemented.
- a planned programme of disinfection of slab/equipment/counter on which product is placed should be implemented

6.7.8.2 Signage and Marking

Clear signage of food court usage policy should be displayed at each entrance, exit and service point.

Floor markings for queues at each food operator should mark out appropriate physical distancing.

6.7.8.3 Physical distancing

Clear physical distancing separation of tables for customer use.

Customers to adhere to physical distancing guidelines when seated at tables.

No more than 4 customers per table if a family/group unit.
6.7.9 Public rest rooms and retail unit rest rooms, baby changing rooms, baby feeding rooms and sinks

The following measures should be considered:

- restrict numbers entering facilities to comply with physical distancing requirements.
- installation of COVID-19 information boards or notices in rest rooms, baby changing rooms, baby feeding rooms and sink locations.
- barriers at sinks, if possible.
- barriers for free standing toilets (mens), if possible.
- physical distancing measures closing some urinals/cubicals to ensure physical distancing measures can be adhered to or, implement appropriate solutions to comply with current physical distancing guidelines.
- regular cleaning regime and resupply of sanitisers is in place.

6.7.10 Measures for building services operation

Where possible, the following measures should be considered:

- Are ongoing statutory checks being completed;
- Secure ventilation of spaces with fresh air;
- Switch ventilation to nominal speed at least 2 hours before the building usage time and switch to lower speed 2 hours after the building usage time;
- At nights and weekends, do not switch ventilation off, but keep systems running at lower speed;
- Keep toilet ventilation 24/7 in operation;
- Avoid open windows in toilets to assure the right direction of ventilation;
- Instruct building occupants to flush toilets with closed lid;
- If possible, switch air handling units with recirculation to 100% fresh air;
- Inspect heat recovery equipment to be sure that leakages are under control;
- If possible, switch fan coils either off or operate so that fans are continuously on;
- Do not change heating, cooling and possible humidification setpoints;
- If possible, do not plan duct cleaning for this COVID-19 restricted period;
- Replace central outdoor air and extract air filters as usual, according to maintenance schedule;
- Regular filter replacement and maintenance works can be performed with common protective measures including respiratory protection.

6.7.11 Office areas

Where possible, the following measures should be considered:

- Change layout of office area to ensure physical distancing;
- Install physical barriers, such as clear plastic sneeze guards, if physical distancing is not possible;
- Regular cleaning program;
- Ensure adequate hand sanitiser available within the office areas;
- Facilitate inspection and checking of area to ensure adequate COVID-19 signage/hand sanitiser/proper sanitisation of work areas/personnel following COVID-19 controls is in place;
- Implement a wipe down protocol in place for surfaces and shared devices after use.
6.7.12 Outside/Inside Queue Management

Physical distancing principles should apply to outside the entrance of the shopping centre and/or individual retail store. This can be achieved in a number of ways and include but is not limited to:

- The implementation of a queue management system with correct distance markings; the management of queue for each retailer will be the responsibility of each individual retailer;
- Ensure that queues maintain the recommended physical distance from any other queues in the immediate/surrounding area;
- Consider clear queue markings placed on the floors demonstrating the place for customers to queue for each retailer;
- Consider an agreed process for priority entry for at risk/vulnerable/health care workers within the centre and per retail unit;
- The provision of a staff member at the door keeping numbers in store at an acceptable level, ensuring hand sanitiser is used and reassuring those waiting to enter;
- Consider the use of security personnel to control COVID-19 measures at access and egress points;
- Signage should be placed outside the shopping centre/retail store regarding numbers allowed in/policy with children entering/acceptable behavior towards staff, etc;
- Signage on public responsibility of personal sanitizing and physical distancing and encouragement to wear appropriate face coverings;
- Consider the provision of hand sanitiser at entrance for customers.

6.7.13 Control of numbers into a shopping centre

Measures should be put in place to control the number of customers coming into the shopping centre. These can include:

- Special access times for those at high risk or those who have been cocooning, carers, front line staff and people with disabilities and other government defined vulnerable groups;
- Limit numbers accessing the premises to comply with HSE guidelines with continuous monitoring in place;
- Consider limiting access for children;
- Consider the introduction/promotion of delivery services, click and collect services and prioritise delivery services to customers who are vulnerable or in isolation;
- Consider a review opening hours to lessen crowding at any one time throughout the centre.

6.7.14 Strategy to minimise spread – Staff canteens

Where possible and if the centre has control of a staff canteen(s), the following measures should be considered:

- Ensure physical distancing throughout the canteen in line with current guidelines.
- Removal of shared supplies (i.e. tea bags, biscuits, etc).
- Each team member to provide their own mugs, plates, cutlery, etc and will be responsible for cleaning of same.
- Staff cleaning rota to be increased to ensure the cleaning of each table and tray etc after each customer use.
- Ensure physical distancing (or whatever the current guideline is) separation of tables.
- Ensure table occupancy meets physical distancing guidelines.
- Ensure a program of disinfection of doors/door handles at entrances and exits is implemented.
• Consider the posting of notices at canteen entrances highlighting the HSE COVID-19 guidelines.
• Consider the introduction of rotas for use of canteen for breaks to reduce the amount of people in the canteen to allow for physical distancing – staggering the times staff may use the canteen facilities.

6.7.15 **Strategy to minimise spread – Warehouse/Distribution Centres areas/Delivery docks or Delivery areas within Shopping Centres in the instance of the centre managing such facilities**

All reasonable steps should be taken to protect employees and ensure that warehouses/distribution areas/ delivery docks or delivery areas within shopping centres remain open and functioning throughout the COVID-19 crisis. Measures can include:

• the restriction of all visitors to distribution warehouses and delivery/goods in areas to ‘business critical’ only.
• Ensuring a process for informing drivers as to the shopping centre and/or Retail Units (as appropriate) COVID-19 guidelines for delivery and drivers.
• an access control system or zones where only authorised personnel are allowed into the distribution/ delivery areas.
• Ensuring the controlled access process for business-critical visitors incorporates:
  • Adherence to sanitisation processes.
  • Declarations of any travel from overseas in the previous 14 days are per current government guidelines.
  • Declarations of any contact with known or suspected cases.
  • Declarations of any symptoms of respiratory illness such as fever and or cough.

Personnel in this area should be encouraged to sanitise hands on a regular basis and wear a face mask if working within 2 metres of others.

Physical distancing should be controlled with respect to driver, loader and unloader.

Drivers should be given guidance on specific procedures and where possible to use separate facilities (e.g. portacabins and portaloos) and should be kept separate from the warehouse itself.

6.7.15.1 **Entering a warehouse/distribution area/delivery dock or delivery area within shopping centres**

At the entrances to a warehouse/distribution area/delivery dock or delivery area:

• Provide cleaning materials for Mechanical Handling Equipment and communication equipment, i.e. headsets, phones, etc, with an instruction for people to clean the equipment before and after use.
• Where possible, provide individual mobile instruments for each person e.g. scanner, headset etc
• Commonly used machines should be wiped cleaned after each use e.g. driver card download device (tacograph), clock in machines, door coded entry

Regular checks should be taken by the warehouse/distribution area/delivery dock or delivery supervisor or COVID-19 team to ensure that critical actions are in place and being implemented consistently.

Ongoing communication through briefings and posters with consistent and simple messages on personal responsibility, this could be part of daily shift start up meetings.
6.7.16 Contacts Logging
All organizations, and where possible individuals, should keep a contact log to facilitate HSE contact tracing in the event of a COVID-19 case in the workplace. This may be through the use of sign in sheets, clocking systems, visitor logbooks, delivery personnel details, third party service provider visitor information. This information should be stored securely, maintained centrally and readily available upon request. Such information may be requested by the authorities to assist with contact tracing. See section 6.6.7 for example of template to log staff movements and locations.

6.7.17 Personal protective equipment (PPE)
Details on the correct use of suitable PPE for the management of suspected or confirmed COVID-19 can be found on the Health Protection Surveillance Centre (HPSC) website at: https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/

Employees should be informed on the appropriate use of PPE, including appropriate removal of disposable gloves. Employees should be reminded not to touch their faces when wearing gloves.

Gloves are generally not required for infection prevention and control purposes outside the healthcare setting. If gloves are used, they should not be considered a substitute for hand hygiene and hands should be cleaned whenever gloves are removed.

6.7.18 Adaptation
There may be a need for the shopping centre to prepare for circumstances under which a reduction or scaling back in operations is required. This may also include changes to the products, services, or interactions with customers to allow the business to remain operational.

6.7.19 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 PPE when delivering first aid.

See the following guidance for CPR is a COVID-19 situation: https://www.hse.ie/eng/services/news/media/pressrel/covid-19-hse-advice-on-performing-cpr-cardiopulmonary-resuscitation-cpr-in-the-community.html

6.7.20 Legionella
The centre management team needs to put in place control measures to avoid the potential for Legionnaires’ disease before they reopen. Further advice on the prevention of Legionnaires’ disease after the COVID-19 pandemic is available at:


6.7.21 Heating, Ventilation Air Conditioning (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.
6.8  Response to suspected cases

6.8.1  Response Plan

There should be a defined response structure that identifies team(s) responsible for responding to a suspected case presented by an employee or a customer.

The centre management team should put in place a process to identify workers with symptoms of COVID-19 before the start of each shift and remind employees of the need to report to managers immediately if any such symptoms develop during the shift.

The response plan should include the actions to be taken when responding to a suspected case.

The appointment of incident response personnel for stabilization, continuity and recovery activities are recommended. Further guidance on dealing with a suspected case is available on the HSE website.

One or more designated isolation areas should be predetermined as part of the response plan. The number of designated isolation areas should be proportionate to the scale of the shopping centre. The designated area and the route to the designated area should be easily accessible and as far as is reasonable and practicable should be accessible by people with disabilities.

The designated area should have the ability to isolate the person behind a closed door and be suitable to facilitate the following:

- Ventilation, i.e. via a window
- Hygiene practice by providing:
  - tissues
  - hand sanitiser, disinfectant
  - gloves, masks
  - waste bags

Where a closed door area is not possible, the employer must provide for an area away from other workers.

6.8.2  Response Actions

If someone becomes unwell in the shopping centre with COVID-19 symptoms (see HSE guidance for symptoms) they should be accompanied to a 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. The unwell individual should be provided with a face mask, if available, to be worn if in a room with other people or while exiting the premises.

An initial assessment should be made on whether the unwell individual can immediately be directed to go home, call their doctor and continue self-isolation at home.

Where that is not possible, the unwell individual should remain in the isolation area and call their doctor, outlining their current symptoms. They should avoid touching people, surfaces and objects. Advice should be given to the unwell individual 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.

The incident response personnel should notify the centre management and arrange transport home or hospital for medical assessment. Public transport of any kind should not be used.

The centre management team should carry out an assessment of the incident, which will form part of determining follow-up actions and recovery. Advice on the management of staff and workplace will be based on this assessment.
The HSE will also be in contact with the case directly to advise on isolation and identifying other contacts and will be in touch with any contacts of the case to provide them with appropriate advice.

Immediate action following a suspected case should include closure of the isolation area until appropriately cleaned. See section 6.9.

### 6.8.3 Contact with confirmed cases

If a confirmed case is identified in the shopping centre, staff who have had close contact as assessed by Public Health, should be asked to stay at home for 14 days from the last time they had contact with the confirmed case and follow the restricted movements guidance on the HSE website.

All affected staff should be actively followed up by the COVID-19 manager/response team.

If the person develops new symptoms or their existing symptoms worsen within their 14-day observation period they should call their doctor for reassessment. The above eventualities should be recorded by the COVID-19 manager/response team.

Personnel who have been in close contact with a confirmed case include:

- any individual who has had greater than 15 minutes face-to-face (<2 meters distance) contact with a confirmed case, accumulative in 1 day, in any setting,
- for those contacts who have shared a space with a confirmed case for >2 hours, a risk assessment will be undertaken by Public Health taking into consideration the size of the room, ventilation and the distance from the case. This may include office and school settings and any sort of large conveyance.

Personnel who have been in casual contact with a confirmed case includes:

- any individual who has shared a closed space with a confirmed case for less than two hours.
- Any individual who has shared a closed space with a confirmed case for longer than two hours, but following risk assessment, does not meet the definition of a close contact.

See the Return to Work Safely Protocol for further details on dealing with suspected COVID-19 cases in the workplace.

### 6.9 Cleaning

#### 6.9.1 General

General tips for cleaning/disinfecting rooms that persons with suspected or confirmed COVID-19 were isolated in:

- Keep the door to the room closed for at least one hour before cleaning. Do not use the room until the room has been thoroughly cleaned and disinfected and all surfaces are dry.
- The person assigned to clean the area should avoid touching their face while they are cleaning and should wear household or disposable single use non-sterile nitrile gloves and a disposable plastic apron (if one is available).
- Open the window while you are cleaning.
- Clean the environment and the furniture using disposable cleaning cloths and a household detergent followed or combined with Chlorine based product such as sodium hypochlorite (often referred to as household bleach). Chlorine based products are available in different formats including wipes.
- If you are not familiar with chlorine-based disinfectants, then please refer to the HPSC Management of Infectious Diseases in Schools available at [https://www.hpsc.ie/az/lifestages/schoolhealth/](https://www.hpsc.ie/az/lifestages/schoolhealth/).
- Pay special attention to frequently touched flat surfaces, the backs of chairs, couches, door handles and any surfaces or items that are visibly soiled with body fluids.
• Place all waste that has been in contact with the person, including used tissues, and masks if used, in a plastic rubbish bag and tie when full. Remove your apron and gloves and discard into the waste bag and clean your hands. Place the plastic bag into a second bin bag and tie it, then clean your hands.
• Store the bag in a safe place until the result of the test is available. If the person tests negative, place the waste in the normal domestic waste bin. In the event the person tests positive, Public Health will advise what to do next.
• Once the room has been cleaned and disinfected and all surfaces are dry, the room can be put back into use.
• There is no need to clean carpets (if present) unless there has been a spillage.

6.9.2 Cleaning of communal areas
If a the person spent time in a communal area or they used the toilet or bathroom facilities, then these areas should be cleaned with household detergent followed by a disinfectant (as outlined above) as soon as is practicably possible. Pay special attention to frequently touched sites including door handles, backs of chairs, taps of washbasins, kettles, toilet handles, etc. Once cleaning and disinfection have been completed and all surfaces are completely dry, the area can be put back into use.

Current evidence suggests that novel coronavirus may remain viable for hours to days on surfaces made from a variety of materials. Cleaning of visibly dirty surfaces followed by disinfection is a best practice measure for prevention of COVID-19 and other viral respiratory illnesses in community settings.

Routinely clean all frequently touched surfaces in the workplace, such as workstations, countertops, and doorknobs. Use the cleaning agents that are usually used in these areas and follow the directions on the label. No additional disinfection beyond routine cleaning is recommended at this time.

6.9.3 Cleaning of contaminated area
For further detail on environment cleaning following a confirmed COVID-19 case within the workplace see Interim guidance for environmental cleaning in non-healthcare facilities exposed to SARS-CoV-2.

6.9.4 Waste disposal
All waste that has been in contact with the individual, including used tissues, and masks if used, should be put in a normal waste bag. Tie the bag when it is almost full. Double bagging should be used. Note the date and time on the bag with a permanent marker when the waste is placed in the bag. The waste bag should be kept for 72 hours, then thrown into the normal waste.
## Defence – CHECKLIST

### Awareness and information
- Keep up to date with Public health advisory notices
- Comply with any public health guidelines and orders
- Appropriate signage
- Provide necessary training
- Complete the return to work form at least 3 days in advance of returning to work

### Minimise spread
- Hand washing – adequate supply of soap and disposable towels for staff and customers
- Hand sanitizers available at suitable locations e.g. entrances/exits & customer contact areas
- Implement Shopping Centre cleaning program
- Implement physical distancing measures throughout the building e.g. rearrangement of workflows/patterns to reduce infection risk
- Inside/Outside Queue Management
- Control of numbers into Shopping Centre
- Working from home where possible
- Restructure teams/shifts, reduce numbers and exposure
- Limit canteen numbers/restrict operation
- Limit/restrict business visitors
- Use of appropriate PPE as necessary
- Records – employees to keep contact logs to facilitate tracing in the event of an infection
- Temperature testing in line with Public Health Advice

### Communications
- Keep all employees informed of changes to practices
- Appoint COVID Management Team and Worker Representative
- Provide regular updates on changes to practices, policies and procedures
## Defence – CHECKLIST

Keep up to date on issues/resources required for continued operation

- Employees available and suitable for continued work
- Regular Contact with those in self-isolation
- Regular contact with remote workers

### What to do when a suspect case occurs?

Appoint dedicated resource to manage prevention measures e.g. COVID 19 Manager

Setup a designated isolation area for suspected cases

Segregate suspected cases from others – separate area where possible, advised on steps to minimise contamination e.g. minimise surface contact, disposal of tissues etc

Segregation of disposable tissues/towels used by suspected case

Follow advice regarding self-isolation and other prevention measures e.g. sending to hospital/home

Keep log/record of close contacts of person

Cleaning of area where suspected case operated and isolation area

Assessment of incident and follow-up actions necessary

Provide information to HSE on request

### Use of Personal Protective Equipment

Refer to the Return to Work Safely Protocol when physical distancing is not possible

Cleaning staff to be provided with disposable gloves and gowns

Change PPE regularly to reduce risk of exposure to COVID 19

All PPE should be carefully removed and disposed of to minimise risk of contamination.

Breaches in PPE equipment to be reported
7. Useful links

<table>
<thead>
<tr>
<th>Link</th>
<th>URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Return to Work Safely Protocol Templates and Checklists</td>
<td><a href="https://www.hsa.ie/eng/topics/covid-19/return_to_work_safely_templates_and_checklists/">https://www.hsa.ie/eng/topics/covid-19/return_to_work_safely_templates_and_checklists/</a></td>
</tr>
<tr>
<td>NSAI COVID-19 Retail Protection and Improvement Guide</td>
<td><a href="https://www.nsai.ie/covid-19/">https://www.nsai.ie/covid-19/</a></td>
</tr>
<tr>
<td>Health Service Executive</td>
<td><a href="http://www.hse.ie">www.hse.ie</a></td>
</tr>
<tr>
<td>Local Enterprise Office</td>
<td><a href="https://www.localenterprise.ie/">https://www.localenterprise.ie/</a></td>
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<td>Enterprise Ireland</td>
<td><a href="http://www.enterprise-ireland.com">www.enterprise-ireland.com</a></td>
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<td>Health Protection Surveillance Centre</td>
<td><a href="http://www.hpsc.ie">www.hpsc.ie</a></td>
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<td>European Centre for Disease Prevention and Control</td>
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<td>Food Safety Authority of Ireland FAQ’s</td>
<td><a href="https://www.fsai.ie/faq/coronavirus.html">https://www.fsai.ie/faq/coronavirus.html</a></td>
</tr>
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</table>
8. Advice to Employers and Employees

The National Standards Authority of Ireland (NSAI) are providing advice to employers and employees through the COVID-19 Business Support Unit at Covid-19-Support@nsai.ie or 01 8073800 (Monday to Friday, 09.00 to 17.00).
### Annex A: Visitor/Contractor COVID-19 Questionnaire

<table>
<thead>
<tr>
<th>Visitor/Contractor Covid-19 Questionnaire</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name:</td>
</tr>
<tr>
<td>Company:</td>
</tr>
<tr>
<td>Mobile No.:</td>
</tr>
<tr>
<td>Visiting:</td>
</tr>
<tr>
<td>Date:</td>
</tr>
</tbody>
</table>

To ensure the Safety & Health of all people interacting with [insert Company Name], visitors and contractors should complete this declaration form prior to entering our sites. If you indicate to us you have symptoms of COVID-19 OR you have been abroad in the last 14 days with exception to Northern Ireland you will be required to either restrict your movements or self-isolate. Where this is the case, you are prohibited from entering the site and advised to seek professional medical help/assistance.

1. Have you visited any of the countries outside Ireland excluding Northern Ireland? (see above)  
   - Yes / No

2. Are you suffering any flu like symptoms/symptoms of coronavirus covid-19?  
   - Yes / No

3. Are you experiencing any difficulty in breathing, shortness of breath?  
   - Yes / No

4. Are you experiencing any fever like/temperature symptoms?  
   - Yes / No

5. Did you consult a Doctor or other medical practitioner?  
   - Yes / No

6. How are you feeling Healthwise?  
   - Well / Unwell

7. 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 accumulating in 1 day)?  
   - Yes / No

**NOTE:** When on site, please adhere to our on-site standard processes/procedures regarding infection control, i.e. hand washing/hand sanitising and general coughing/sneezing etiquette?

Signature Visitor:  
Date:  

Signature Company:  

(Please circle your answers above)
Annex B: Risk Assessment

What is a risk assessment?
Risk assessment is the process of identifying and assessing the risks to your business and prioritising your resources to reduce or eliminate the most significant risks.

How to complete a COVID-19 business continuity risk assessment?
To complete a business continuity risk assessment, we need to establish the key characteristics of the business and consider how COVID-19 impacts upon these. This can be achieved via a series of considerations and questions including:

**Staff resources**: Are staff required to be on-site and have direct face-to-face interaction with each other, customers, suppliers, hauliers etc.? What am I doing to protect them? Do staff need to handle cash/documentation from customers? Do I have back up staff?

**Availability**: Who are my key staff? Do they all work together simultaneously? Do they all need to be on-site? Could I stagger shifts? Can they work off-site?

**Inputs**: Is my supply chain secure? How much raw material/stock do I have? Are my routes to market secure? Have my customers’ needs and expectations changed? Is our product format still acceptable?

**Recovery**: What do I need to do in the event of someone on site identifying as sick? Do I have contact details of all staff/contacts? Can I close parts of my business and allow others to still function?

When considering such questions, we need to establish what the priorities are to maintain our business. This can be achieved via risk assessment.

**Risk assessment models**
There are many models for risk assessment. The model below considers the Likelihood/Relevance and the Severity of the impact of the issue on the business. Those issues with the highest score are the most significant risks and justify the most significant attention.

<table>
<thead>
<tr>
<th>Severity</th>
<th>Very Unlikely</th>
<th>Unlikely</th>
<th>Possible</th>
<th>Likely</th>
<th>Very Likely</th>
</tr>
</thead>
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<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
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<tr>
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<td>2</td>
<td>4</td>
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<tr>
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<td>4</td>
<td>8</td>
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<td>20</td>
</tr>
<tr>
<td>Extreme</td>
<td>5</td>
<td>10</td>
<td>15</td>
<td>20</td>
<td>25</td>
</tr>
</tbody>
</table>
Controls – Risk Mitigation

Controls should be implemented for the issues with the highest score (risk) and we should revisit the risk assessment to ascertain if the risk has been reduced, i.e. a reduction in the number (risk) associated with the specific issue. Controls could take the form of provision of sanitiser and PPE; Social distancing; Electronic shift handovers; Installation of barriers at interfaces; Implementation if different shift patterns; Staff working different shift patterns.

Documentation – Risk Register

Risk assessment can be documented in many different formats. The table below illustrates an example of one such format.

<table>
<thead>
<tr>
<th>Risk</th>
<th>L</th>
<th>S</th>
<th>Score</th>
<th>Control</th>
<th>L</th>
<th>S</th>
<th>Score</th>
<th>Responsibility</th>
<th>Monitoring</th>
</tr>
</thead>
<tbody>
<tr>
<td>Closure due to outbreak amongst staff</td>
<td>5</td>
<td>5</td>
<td>25</td>
<td>Communicate risks to all staff; Advise staff of need to stay at home if showing symptoms or in contact with those with symptoms; Social distancing encouraged; Sanitiser and PPE (gloves/masks/safety glasses) provided; Staggered Canteen breaks; Segregation of shifts by 15 mins; Sanitisation of shared equipment/areas.</td>
<td>3</td>
<td>5</td>
<td>15</td>
<td>All Staff; Facilities General Manager; Shift Supervisors</td>
<td></td>
</tr>
</tbody>
</table>

L = Likelihood

S = Severity