

COVID-19 Briefing V2

1. Primary routes of transmission

- Inhalation by mouth of infected respiratory particles/ close contact with symptomatic person
- Contact with contaminated surfaces/ materials followed by touching mouth, eyes, nose

2. Primary Control measures:

Primary Hazards	Control
Social distance/ avoiding Close contact	<ul style="list-style-type: none"> • Residents screened by office before booking • Operative to screen resident on arrival at each job (if property is occupied) • Instruct residents to remain in separate room for duration of works • Set up work exclusion zone with tape (if required) • Social distance (2m) from others to be maintained where possible
Contaminated surfaces	<ul style="list-style-type: none"> • Where required wipe surfaces with disinfectant or alcohol gel and wipes • Wear disposable gloves if surface cannot be wiped • Take own bottle/ pen etc to site do not use residents • Don/ doff PPE carefully – guidance included • Dispose of PPE/ RPE correctly – guidance included
Hand hygiene/ welfare	<ul style="list-style-type: none"> • Use of resident's facilities permitted but you must wipe down before and after with wipes • Where facilities to wash hands are not available, hand sanitiser should be used. • Avoid touching your eyes, nose, and mouth. Do not touch face with unclean hands • When you cough or sneeze cover mouth/ nose with a tissue or your sleeve (not your hands) if you don't have a tissue. • Bag the tissue and take it away with you when you leave the property. • Wash your hands before and after touching face
Lone Working	<ul style="list-style-type: none"> • Preference for lone working at all times • Vehicle sharing not permitted • Use of mechanical aid where possible to reduce need for second person
Paired working (strictly controlled activity)	<ul style="list-style-type: none"> • No more than 2 persons working onsite • 2m distance maintained where possible • Limit close contact to shortest possible time • Mandatory use of surgical mask, nitrile gloves and goggles for duration of close contact • Work side by side opposed to face to face • Wash hands regularly
PPE/ RPE	<ul style="list-style-type: none"> • Task specific PPE/ RPE is required as per task risk management. • Additional PPE/ RPE may be required based on the work activity, location and individual's immunity health • See section 3 for additional CV19 control

3. PPE/ RPE:

- PPE/ RPE is the last line of defence in risk control and usage should be assessed based on the specific location, activity, individual need.
- All PPE/ RPE used for CV19 protection must be disposed of safely without contaminating hands. Should be placed in double lined black sack and disposed of in general waste.

CV19 equipment check list for returning staff	Notes
Disposable face covering/ surgical Mask	Cover nose and mouth – dispose after use
Goggles	Decontaminate after use with soap and water
Nitrile Gloves	Dispose after use
Alcohol Gel and or soap	70% alcohol in gel/ preference for soap use
Wipes	For use with disinfectant
Disinfectant	Employer to provide COSHH information

4. At every job:

- **Screen resident (if occupied):** On arrival knock on door, stand back and ask resident questions below: (maintaining 2m distance, gloves optional):
 - Have you or anyone living in your home been abroad in the last two weeks?
 - Have you or anyone in your home decided to self-isolate?

