



GUIDELINES FOR PREPAREDNESS OF WORKPLACES FOR COVID-19 IN PAKISTAN

**CENTER FOR OCCUPATIONAL AND PATIENT SAFETY (COPS)
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The Center for Occupational and Patient Safety (COPS) at National Institute of Health, Pakistan offers a range of programs to raise awareness and expedite implementation of ideas and best practices to achieve transformation in patient and occupational safety. The Centre has conducted a range of workshops and developed educational material related to Infection Prevention and Control (IPC), Anti-Microbial Resistance (AMR), Biosecurity and Good Laboratory Practices (GLPs) nationwide. COPS plays an instrumental role to enhance patient experience, reduce risks and harm and achieve better health outcomes to improve healthcare quality in Pakistan.

The Center for Occupational and Patient Safety (COPS) in collaboration with Dr. Tehmina Kazmi (US board certified Family Physician with more than 12 years of clinical and administrative experience), developed COVID 19 planning guidance for workplaces in Pakistan based on recommendations from the World Health Organization (WHO) and Center for Disease Control and Prevention (CDC). The guidance is intended to help employers to identify risk factors in workplace settings to implement infection control measures. Additional guidance may be needed as COVID-19 outbreak conditions change.

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BACKGROUND

Coronavirus Disease 2019 (COVID-19) is a respiratory disease caused by the SARS-CoV-2 virus. It was first identified in Wuhan, China from where it spread worldwide rapidly affecting millions of people. It has disrupted routine life and has had devastating effects socially and economically. Symptoms of COVID-19 may range from a spectrum of mild to severe. These include respiratory symptoms like fever, cough, shortness of breath and pneumonia. Gastrointestinal and neurological symptoms may also be present. According to the Centers for Disease Control and Prevention (CDC), the incubation period of this disease is between two and fourteen days.

Although the first human case of COVID-19 likely resulted from exposure to infected animals, infected people primarily spread SARS-CoV-2 to other people. The high transmissibility index of COVID-19 signifies that it has the potential to cause extensive outbreaks. The virus is thought to spread from person-to-person via contact and respiratory droplets. It is also possible for a person to be infected by the virus by touching a contaminated surface or object and then touching their eyes, nose or mouth. Asymptomatic and asymptomatic people can both be contagious.

The COVID-19 pandemic has transformed the operation of working environments worldwide. Health experts' opinions suggest that wearing face masks in public and social distancing could become the new norm at many workplaces. In light of the current scenario, it is vital for employers to plan accordingly and implement infection prevention and control measures at workplaces to mitigate spread of COVID-19.

The number of COVID-19 cases in Pakistan is reaching the 300,000 mark. Being a developing nation, Pakistan cannot afford to go into a complete lockdown as the economic consequences would be devastating. In order to improve overall socio-economic wellbeing, Pakistan is resorting to the policy of smart lockdowns. The country is gradually re-opening its workplaces to maintain economic recovery. Resuming business activities strongly relies on individual and public health strategy. Every Pakistani has a social responsibility to contain the spread of the virus. Employers and workers have a key role to ensure that workplaces are as safe as possible to reopen and remain open. In the absence of a vaccine, it is imperative that businesses and employers take the lead in ensuring that there are appropriate and adequate infection control measures implemented in workplaces in order to curb transmission of the disease and ensure a safe and healthy environment for employees.

OBJECTIVES

The current COVID-19 pandemic is unprecedented, and demands innovative measures to contain its spread and promote safety at the workplace. Workplaces in all sectors of Pakistan need to update COVID-19 preparedness, response and control plans for resuming normal or phased activities to reduce transmission amongst employees, sustain healthy business operations and maintain a healthy work environment.

The document is intended to provide the foundation upon which policy guidance for return to work can be based. These guidelines are designed for the planning, risk assessment and implementation of preventive and protective measures for safe and healthy working conditions to protect workers and patrons. Additional guidance may be needed as the COVID-19 situation changes and new information about the virus becomes available.

RECOMMENDED MEASURES FOR ALL EMPLOYERS TO REDUCE RISKS AT WORKPLACE

I. Risk assessment and Development of Preparedness and Response Plan

- Conduct risk assessment of both physical and psychosocial working environments. Involve workers in risk assessment. Obtain up to date information from the public authorities on COVID-19.
- Develop action plans for prevention and mitigation of COVID-19 as a part of business continuity plan.
- Response plan should take into consideration the risk of COVID-19 exposure associated with various jobs and non-occupational exposure in all individuals including those at high risk for example those with co-morbidities or those who are pregnant
- Consideration may be given to options for conducting essential operations with a reduced workforce, including cross-training workers across different jobs in order to continue operations or deliver surge services.
- Strategies should be developed to:
 - a) Manage worker's concerns
 - b) Communicate with workers

II. Implement Basic Infection Prevention Measures at Workplaces

For most employers, protecting workers will depend on emphasizing basic infection prevention measures as given below. These measures are described in more detail in administrative controls section.

- Promote frequent and thorough hand hygiene through adequate number of hand hygiene stations
- Encourage workers to stay home if they are sick.
- Educate and encourage respiratory etiquette, including covering coughs and sneezes
- Provide employees, customers and the public with tissues and pedaled trash cans

- Discourage workers from using each other workers' phones, desks, offices, etc.
- Maintain regular housekeeping practices, including routine cleaning and disinfecting of surfaces, equipment, and other elements of the work environment

III. Procedures for Prompt Identification and Isolation of Sick People

- Employers should develop policies and procedures for immediate isolation of employees who have signs and/or symptoms of COVID-19 to protect other workers
- Regular screening health of all employees should be conducted. If sick or in case of close contact with a COVID-19 positive patient, isolate that person immediately.
- All employees must monitor themselves for signs and symptoms of the disease and report their supervisor immediately in case they are experiencing symptoms.
- All employees must wear facemasks at all times

IV. Workplace Protection Policies and Flexibilities

- All employees must be made aware of workplace policies, practices and available support services. Appropriate and useful information should be imparted in a timely manner to all employees.
- Employers should be made aware of workers' concerns about issues like pay, leave, safety and health.
- Flexible sick policies must be in place for those who are sick or those taking care of sick family members.

V. Organization of Meetings

Before organizing face to face meetings and events, consider if teleconferencing or virtual meetings can be held. If face to face meetings are needed, then the following measures must be taken into account:

- Scale down the event so that fewer people attend
- Pre-order sufficient supplies including tissues, masks and hand sanitizer for all participants.
- Advise participants in advance that if they have any symptoms or feel unwell, they should not attend.
- Ensure that all participants at the event provide their contact details

- Display dispensers of alcohol-based hand rub prominently around the venue.
- Arrange seats so that participants are at least 1 meter apart.
- Open windows and doors whenever possible to ensure that the venue is well ventilated
- In case someone at the meeting feels unwell or becomes ill with symptoms of COVID-19 designate a room or area where they can be safely isolated and formulate a plan for how they can be safely transferred to a healthcare facility.

VI. Food Preparation and Handling at Work Premises

- Food handlers should wear masks and gloves during food preparation and handling activities.
- Food handlers must wash their hands prior to glove use and after gloves are removed. The gloves must be replaced and hands washed, after any suspected contamination including sneezing, touching the face, or contact with frequently touched surfaces.
- Food handlers who are sick or develop symptoms of COVID-19 should be granted sick leave
- Food should be protected from contamination at all times e.g. using guards or coverings for food and utensils.
- Clean and sanitize all utensils and equipment regularly

VII. Employees Training Plan

All employees must be imparted training on the following:

- Signs, symptoms and modes of transmission of COVID-19
- General hygiene
- Reporting procedure for illness
- Personal and workplace cleaning and disinfection procedures
- Use of face masks (including cloth face covers)
- Maintenance of social distancing (Including use of technology to promote social distancing e.g. telework and virtual meetings)
- Proper use of PPE
- Safe work practices
- Stress management
- EHS 2019 Return to Work Health and Safety Training for COVID-19 regarding workplace policies and support services

VIII. Controls

A hierarchy of controls can be put in place in workplaces to reduce risk of transmission of COVID-19. These controls include from most to least effective include elimination, engineering controls, administrative controls, use of personal protective equipment (PPE) and community protective equipment

a. Elimination

This is the most effective control method as it involves complete eradication of exposure to the hazard. It includes working from home so as to avoid gatherings, avoiding public areas and shared workspaces and encouraging virtual appointments, meetings and trainings through the use of internet conferencing applications for example, zoom and skype. Elimination, however, is always not a possibility. Thus for other businesses/employers, control measures must be considered in order to protect employees

b. Engineering Controls

Engineering controls aim to protect employees from work-related hazards. In workplaces where suitable, these controls decrease exposure to hazards. Employee behavior is not relied upon in this situation. Engineering controls include:

- Installation of high-efficiency air filters.
- Increase ventilation rates in the work environment.
- Installation of drive-through windows for customer service
- Use specialized negative pressure ventilation in some settings e.g. for aerosol generating procedures in healthcare settings)
- Setting up barriers, partitions or ropes to promote social distancing and to separate people from public or building occupants e.g. plexiglass screens, sneeze guards, theater ropes and stanchions, hazard warning tape, etc. These should be in place in all areas of the facility including meeting rooms, break rooms, cafeteria, parking lots, entrance and exit areas and locker rooms.
- Adjust or modify furniture and workstations in order to maintain a physical distance of at least three feet between employees
- Provision of hand hygiene stations including soap, paper towels, hand sanitizers and waste bins
- Usage of handles, push-buttons, and other high touch points with copper or coating with copper tape due to low stability of SARS-CoV-2 on copper surfaces
- Ensure isolated work areas or stations for employees with immune deficiency.

c. Administrative Controls

Administrative controls encompass changes to the way in which employees work.

- All employees must maintain a three feet distance from others; if unable to maintain distance they should wear a mask.
- Use floor markings and other barrier methods to promote physical distancing between people.
- All employees must practice adequate Hand Hygiene. They must wash their hands thoroughly with soap and water for 40 to 60 seconds or use an alcohol based hand rub (ABHR) with at least 60% alcohol. They must follow the WHO recommended steps of hand hygiene. ABHR should not be used if hands are visibly soiled or after using the toilet. Handwashing signs should be posted in restrooms.
- Respiratory hygiene and cough etiquette should be practiced. Using flexed elbow is a good way to cover your sneeze or cough and carries a smaller risk of transmission
- Employees must be instructed to avoid touching their eyes, nose, mouth, and face.
- All employees must wear a facemask at all times
- Standard operating procedures for environmental cleaning and disinfection for facilities and/or work areas should be in place. Environmental Protection Agency (EPA) approved disinfectants should be used. The manufacturer's instructions including concentration, application method and contact time should be followed. Housekeeping staff should be trained for this purpose and be provided with appropriate personal protective equipment (PPE).
- Adequate number of trash bins should be present and ideally they should be pedaled
- All employees should be subject to screening by performing temperature checks with a thermal gun daily
- Flexible worksites, telecommuting and work hours can be offered
- Discourage employees to share phones, desks, files or computers when possible
- Display educational material e.g. posters depicting infection control measures including social distancing, cough and sneeze etiquette and proper hand hygiene.
- Regularly communicate health and safety information to employees e.g. at meetings and via email.
- Discontinue nonessential travel to locations with ongoing COVID-19 outbreaks.
- Remote work should be planned for employees in self isolation
- Conduct regular audits of existing stock including PPE, disinfectants, ABHR and other essential supplies
- Regularly monitor and follow local public health communications about pandemic

- Consider shift change procedures including allowing employees working half time or limiting work hours or days. Different start times of employees may also prove to be beneficial to avoid crowding at the entrance. Introduce additional days (weekends/holidays when possible) and extended hours at work to reduce number of employees at a given time

d. Personal Protective Equipment (PPE)

- Select PPE based upon expected hazards to the worker
- PPE must fit properly and perform periodical fit testing as applicable (e.g., respirators and masks)
- PPE should be consistently and properly worn when required at work
- Equipment should be regularly inspected, maintained, and replaced, as recommended
- All PPE must be removed properly after use. Should be cleaned, and stored or disposed of, as applicable, to avoid self and cross contamination, or the environment
- N95 respirators and KN95 respirators are critical supplies that must be reserved for healthcare workers, first responders and those performing high-risk tasks in direct support of the continuity of healthcare, public safety or essential research.
- Donning and doffing of PPE should be done as per protocol
- Hand hygiene should be performed before donning PPE and after doffing PPE
- Facial hair guidance must be followed to ensure proper seal of the mask
- Respirator training should address selection, use (including donning and doffing), proper disposal or disinfection, inspection for damage, maintenance, and the limitations of respiratory protection equipment.

e. Community Protective Equipment

- Face coverings and masks should be worn by each and every person as a community effort to prevent asymptomatic carriers of COVID-19 from spreading the virus.
- Homemade face coverings and masks should fit snugly but comfortably at the side of the face, be secure with ear loops, incorporate multiple fabric layers and be breathable and washable.
- Hand hygiene must be performed before and after usage of mask and in case if the mask is touched from the front.
- Wearing N95 respirators with exhalation valves is not recommended as they are not effective in reducing transmission of COVID-19
- Wearing damp masks is not recommended

Special Considerations for Healthcare Workers in Healthcare Facilities

Healthcare workers (HCW) are at the front line of the COVID-19 outbreak response and are at high risk of infection. Therefore, specific measures should be undertaken by healthcare facility management to protect occupational safety and health of HCWs as follows:

- Impart training on occupational safety and health including training sessions and refresher training on infection prevention and control measures
- Dissemination of information on donning and doffing of PPE
- Provision of adequate supplies of masks, gloves, goggles, gowns, hand sanitizer, soap and water, cleaning supplies etc. in sufficient quantities
- Familiarize personnel with technical updates on COVID-19 and provide appropriate tools to assess, triage, test, and treat patients and to share IPC information with patients
- Ensure appropriate security measures as needed for personal safety of HCWs
- Encourage a blame-free environment in which HCWs can promptly report on exposure incidents to COVID-19
- Advise health workers on self-assessment, symptom reporting and staying home in case of sickness
- Maintain appropriate working hours with breaks
- Provision of counselling and mental health services for HCWs in light of the stressful situation created by COVID-19
- Provision of curative and rehabilitation services for health workers infected with COVID-19

Long term planning

Employers and business owners should draw up or update crisis contingency plans for shutdown and start-up events which will help to them prepare them for similar occurrences in the future.

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