



**GUIDELINES FOR THE PREVENTION OF INFECTION**

**AND**

**SPREAD OF THE**

**CORONAVIRUS DISEASE (COVID-19)**

**MAY 2020**

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## **1. About IDIWA**

Integrated Disabled Women Activities is a voluntary, not for profit non-governmental organization established in 2000 purposely to empower Women, People with Disabilities and other vulnerable groups to maximize their potential and improve their standard of living through Economic Empowerment and Livelihoods, Human Rights and Good Governance, Community Based Rehabilitation, Health and reproductive rights, and Education. IDIWA visualizes an inclusive society in which human rights; citizenship and potential of Women, People with Disabilities, and other vulnerable groups are respected.

IDIWA is focused on empowerment of Women and Girls with Disabilities (WGDs) by advocating for improved access to services, resources (ownership and control), participation in democratic and governance processes, economic opportunities and respect for their human and health rights. This is done through training, advocacy, lobbying, and networking and by involving community members because ideas are generated from them. Advocating for the realization of human rights of persons with disabilities is an essential part of the work IDIWA does and it is also part of a wider component of our advocacy work to accelerate access to disability friendly SRH services by Women and Girls with Disabilities.

## **2. About COVID-19**

**Coronavirus disease 2019 (COVID-19)** is an infectious disease caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). It was first identified in December 2019 in Wuhan, China. The first case may be traced back to 17 November 2019. On 11<sup>th</sup> March 2020 the World Health Organization (WHO) declared the coronavirus COVID-19 outbreak as pandemic. “As of 2<sup>nd</sup> June 2020, more than 6.31 million cases had been reported across 188 countries and

territories, resulting in more than 376,000 deaths. More than 2.72 million people have recovered<sup>1</sup>".

Coronaviruses belong to a large family of viruses causing a wide spectrum of illness, ranging from very mild such as common cold to severe illness such as Middle East Respiratory Syndrome (MERS-CoV) and Severe Acute Respiratory Syndrome (SARS-CoV). Numerous other coronaviruses circulate among animals, including camels and some bat species. Rarely, some animal coronaviruses can evolve to cause illness in people. Sometimes coronaviruses may develop the ability to spread from person to person, for example MERS-CoV which was first reported in Saudi Arabia in 2012, and the SARS-CoV, first recognized in China in 2002. The COVID-19 is a new strain that has not been previously identified in humans.

## **2.1 Transmission**

Coronaviruses are zoonotic, meaning they are transmitted between animals and people. Detailed investigations found that SARS-CoV was transmitted from civet cats to humans and MERS-CoV from dromedary camels to humans. Several known coronaviruses are circulating in animals that have not yet infected humans. The novel Coronavirus is transmitted from human to human through droplets and direct or close personal contact with an infected individual. There is no evidence of airborne transmission in the community. There is no evidence of maternal fetal transmission as only one woman infected with the novel Coronavirus delivered a coronavirus-free baby. Health-care workers have frequently been infected while treating patients with suspected or confirmed novel Coronavirus. This has occurred through close contact with patients when infection control precautions are not strictly practiced.

## **2.2 Signs and symptoms**

Novel Coronavirus signs of infection include respiratory symptoms, fever, cough, shortness of breath and breathing difficulties. In more severe cases, infection can cause pneumonia, severe acute respiratory syndrome, kidney failure and even death. Laboratory findings include low

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<sup>1</sup> [\*"COVID-19 Dashboard by the Center for Systems Science and Engineering \(CSSE\) at Johns Hopkins University \(JHU\)". ArcGIS. Johns Hopkins University. Retrieved 2 June 2020\*](#)

white blood cell particularly lymphopenia. Typical chest radiograph of COVID-19 patients shows bilateral ground glass appearance and sub segmental consolidation.

The incubation period, that is, the time interval from infection with the virus to onset of symptoms is up to 14 days, but this may be subject to change as the disease evolves and new information is discovered. People are infectious when they are showing symptoms of the disease and very few cases have been identified in people who have mild symptoms amongst their very close contacts.

### **2.3 Novel Coronavirus outbreak in Uganda and its containment**

Thankfully, the incidence of COVID-19 in Uganda is very low in comparison to other countries. The country has so far recorded 457 cases, with 72 recoveries, and no COVID-19 related deaths as of this writing. Indeed, early on, Uganda adopted a number of containment measures to curb the spread of the virus, including the closure of schools, restrictions on internal and international travel, use of hand sanitizers, improved hand-washing stations, social distancing, and even lockdown, among others. Containment of Covid-19 has ruptured everyday social and economic exchange in Uganda, with lockdown measures posing challenges to people who need to work to survive.

### **3. Objective of the Guidelines and workplace preparedness**

- To minimise the risk of infection in the workplace either as a result of person-to-person transmission (e.g. coughing, sneezing) or indirectly as a result of contact with contaminated surfaces;
- To maintain the IDIWA's operating infrastructure as far as possible to ensure that partners, clients and other stakeholders are served appropriately.

These guidelines and workplace preparedness are meant to help limit the spread of COVID-19 among employees during a pandemic and to maintain the IDIWA's ability to operate in spite of

the large number of sick-ness-related absences which must may occur. In view of the fact that infection with the novel coronavirus can seriously affect health or can even result in death, as many as possible of the people suffering from COVID-19 must be protected against serious complications and death, and as many cases of infection as possible must be prevented. The ethical values on which the interventions designed to achieve these objectives are basically solidarity, individual responsibility and fairness. It should be noted that due to the evolving nature of the novel coronavirus, the preparedness and response plan will be updated regularly (say every 3-6 months) or as need arises.

#### **4. HOW TO HELP PREVENT SPREAD OF COVID-19**

##### **4.1 Getting the workplace ready amidst COVID-19 in the community**

The implementation of safe work practices to limit exposure to COVID-19 at work requires first assessing the risks. This means putting in place control measures to first eliminate the risk and if this is not possible, minimise worker exposure. IDIWA will start first with collective measures and if necessary supplement them with individual measures, such as personal protective equipment (PPE). Below are some examples of control measures, however, not all of them will be applicable to all workplaces or jobs due to their nature.

- Carry out only essential work for the time being; it may be possible to postpone some work to when the risk is lower. If possible, deliver services remotely (phone or video) instead of in person. Ensure that only workers who are essential to the job are present at the workplace and minimise the presence of third parties.
- Reduce, as far as possible, physical contact between workers (e.g. during meetings or during breaks). Isolate workers who can carry out their tasks alone safely and who do not require specialised equipment or machinery that cannot be moved. Workers with close family members who are at high risk may also need to telework.
- Eliminate, and if not possible limit, physical interaction with and between clients.

- When delivering goods, do so through pick-up or delivery outside the premises. Advise drivers on good hygiene in the cab and provide them with appropriate sanitation gel and wipes. Delivery workers must be allowed to use facilities such as toilets, cafeterias, changing rooms and showers, albeit with the appropriate precautions (such as allowing only one user at a time and regular cleaning).
- Place an impervious barrier between workers, especially if they are not able to keep a two-metre distance from each other. Barriers can be purpose-made or improvised using items such as plastic sheeting, partitions, mobile drawers, or storage units. If a barrier cannot be used, additional space between workers should be created by, for example, ensuring they have at least two empty desks either side of them.
- If close contact is unavoidable, keep it to less than 15 minutes. Arrange the timing of meal breaks to reduce the number of people sharing a cafeteria, staff room, or kitchen. Ensure there is only one worker at a time in bathrooms and changing rooms. Place a sign on the main door indicating when one of the toilets is in use to ensure that only one person at a time enters. Organize shifts to take account of cleaning and sanitation tasks.
- Supply soap and water or appropriate hand sanitizer at convenient places and advise workers to wash their hands frequently. Clean premises frequently, especially counters, door handles, tools and other surfaces that people touch often and provide good ventilation if possible.
- Avoid excessive workload on cleaning staff by taking appropriate measures, such as assigning additional staff to the tasks and asking workers to leave their workspace tidy. Provide workers with tissues and waste bins lined with a plastic bag so that they can be emptied without contacting the contents.
- If you have identified a risk of infection despite having applied all feasible safety measures, then provide all necessary PPE. It is important to train workers in correct use of PPE, ensuring that they follow the guidance available on use of facemasks and gloves.



- Place posters that encourage staying home when sick, cough and sneeze etiquette, and hand hygiene at the entrance to the workplace and in other areas where they will be seen.
- Facilitate workers' use of individual rather than collective transport, for example by making available car parking or a place for storing bicycles securely, and encouraging workers to walk to work, if possible.
- Put in place policies on flexible leave and remote working to limit presence at the workplace, when needed.

#### **4.1.1 Develop a contingency and business continuity plan**

IDIWA should develop a contingency and business continuity plan for an outbreak in the communities where IDIWA's activities are implemented. The plan will help prepare IDIWA for the possibility of an outbreak of COVID-19 in its workplaces or community. It may also be valid for other health emergencies.

- The plan should address how to keep project activities running even if a significant number of workers, contractors and suppliers cannot come to IDIWA's premises or places of business either due to local restrictions on travel or because they are ill.
- IDIWA will inform workers and its representatives as well as its contractors about the plan and make sure they are aware of what they need to do – or not do – under the plan. Emphasise key points such as the importance of staying away from work even if they have only mild symptoms or have had to take simple medication (e.g. paracetamol, ibuprofen) which may mask the symptoms.
- IDIWA will ensure the plan addresses sick leave arrangements.
- Planning for all stages of the pandemic should address how essential services are maintained and the possibility of workplace closure. This includes reducing or minimising risks of contagion to people in the workplace and ensuring the wellbeing of employees.

- IDIWA staff are expected to remain working during a pandemic, in line with public health guidance, unless they are on agreed leave.

#### **4.2 Preventing spread of infection**

There is currently no vaccine to prevent COVID-19. The best way to prevent infection is to avoid being exposed to the virus. Prevention measures such as those described below should be taken into account now, even if COVID-19 countermeasures are not in place where IDIWA operates.

IDIWA will:

- Place posters that encourage staying home when sick, cough and sneeze etiquette, and hand hygiene at the entrance to the workplace and in other areas where they will be seen.
- Instruct workers to clean their hands frequently, using soap and water for at least 20 seconds or with an alcohol-based hand sanitiser that contains at least 60-95% alcohol.
- Provide soap and water and alcohol-based hand rubs in the workplace in multiple locations and in common areas to encourage hand hygiene.
- Ensure routine environmental cleaning.
- Brief the workers, contractors and customers that anyone with even a mild cough or low-grade fever (37.3 C or more) needs to stay at home. They should also stay home (or work from home) if they have had to take simple medications, such as paracetamol/acetaminophen, ibuprofen or aspirin, which may mask symptoms of infection
- Any worker who develops flu-like symptoms (i.e. cough, shortness of breath, fever) should go home immediately and contact the public health service.
- Promote teleworking (where possible) across IDIWA's operational areas and allow workers to work flexible hours to minimise crowding at the workplace.



#### 4.2.1 Routine environmental cleaning:

- Routinely clean all frequently touched surfaces in the workplace, such as workstations, countertops, and door handles. 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.
- Provide disposable wipes so that commonly used surfaces (for example, doorknobs, keyboards, remote controls, desks) can be cleaned by individual workers regularly.

## 5. Requirements for home-based work

### 5.1 Creating a safe home-work environment

IDIWA employees are required to maintain adequate workspace at home. As a rule, all worksites, including an employee's home (where they have entered into a working from home arrangement), must conform to acceptable Workplace Health and Safety Standards. The staff working from home must be aware of the need to maintain a safe working environment.

### **5.1.1 Employee responsibilities**

#### **General:**

- The staff shall notify his//her supervisor of his/her whereabouts, particularly if there is a change in the employee's location or work arrangements.
- Be contactable during his/her ordinary rostered hours.
- Report any health, safety and wellbeing incidents or hazards to the supervisor.
- Take reasonable precautions necessary to secure IDIWA's equipment provided to the staff working from home.

#### **Hours of work:**

- Adhere to the current IDIWA's policies, procedures and conditions, which continue even while working from home such as taking breaks and ordinary hours of work.
- Maintain accurate and up to date records of hours worked at home within normal rostered hours.

### **5.1.2 Personal requirements and tips**

- Dress for work: This can psychologically prepare you and promotes the right headspace for work, even if it is tempting to stay in your pjs or trackpants.
- Create a structure for your day to assist with focus and motivation and assisting to put you in control of your day.
- You may like to commence work earlier or focus on tasks that require concentration later in the day.
- Enjoy your flexibility! If you need to schedule in a non-work appointment, do it at the start or end of the days as you would if you were going into the office.
- Plan your day based on daily goals, objectives or an agreed workplan.
- Take breaks away from the computer, take a proper lunch break and maybe get some exercise or do something away from your screen.

- Connect regularly with your colleagues (phone calls, teams, zoom, skype etc) noting that the topic may be the Coronavirus, however, stick to the facts and try to minimise your exposure to the news and media at various times.
- Keep up regular meetings.
- Communication is key to ensuring working from home is successful. Communicate when you are feeling supported, but also when you may feel you need additional support.

### **5.1.3 Supervisor/Manager responsibilities:**

It is vital to stay connected with your employees during this time, so they know they are not alone (loneliness and social isolation is a common complaint about working remotely/at home and losing that feeling of belonging), and that their work is important.

**General: Establish any rules of engagement that is, set expectations including frequency and timing of communication.**

- Ensure your teams understand the best time and way to contact you during the workday.
- Offer encouragement and emotional support.
- Schedule communication meetings including methods of disseminating information to employees who are working from home.
- Ensure employees are working in accordance with their agreed workplan and adhering to IDIWA's policies and procedures.
- Monitor and review workplans on a regular basis.
- Ensure employees have access to required information and where practicable, provide equipment and tools required to perform the tasks required.
- Accurately document the ownership and usage arrangements of the equipment and assets.
- Address any identified issues or complexities in a timely manner.

- Review and sign off on timesheets as required.

### **Employee supervision:**

- Individual employee supervision shall be offered within a confidential space free from distractions. Any notes taken must not be saved in an online method accessible by others and must be filed in a password protected or lockable format.
- It is likely that when employees are working remotely that more frequent supervision will be required to ensure that the employee feels connected and is receiving the guidance required to finish tasks. In an office environment this often occurs on an ad-hoc basis that may not be able to happen in the more isolated setting. Supervision should be negotiated between the employee and their manager and could include:
  - ✓ Daily morning check-in – message advising that work has begun and what the day entails for the person. This has the benefit of replicating the “walking through the door” and signals the workday has begun.
  - ✓ Daily afternoon check-out – signing out for the day and overview of how the day went. Again, this has the benefit of “walking out the door” and into personal time.
  - ✓ More regular video calls – perhaps once a week; perhaps more frequently but less duration – so half hour twice a week.

### **Team meetings and catch ups**

To ensure continued connectedness and strong communication when working from home, it is important that all internal meetings and catch ups continue:

- Establish structured daily check-ins to ensure continued engagement in one-on-one meetings (however please engage more frequently as required).
- Engage in regular and scheduled team meetings.

## **5.2 IT support**

Employees may be required to take equipment from the office to perform tasks from home. The equipment may include but not limited to Laptops, chargers, cables, phones, modems, extension cords, files and paperwork you may need to undertake required work from home. Not all IDIWA's services are available or supportable when used from home. The employee accepts this and agrees not to impose any overheads on IDIWA for additional services.

The employee indemnifies against all loss or damage to the employee's property and all claims by third parties in respect of personal injury and property damage except to the extent caused by the negligent act, error or omission of IDIWA. Please ensure that work ICT is only used for work purposes to minimise the risk of viruses and cyber-attacks especially if you connect through internet café or your home Wi-Fi.

## **5.3 Guidance on facemasks**

The use of face masks may be considered when working in closed spaces with other persons or when it is not possible to maintain a safe distance from other people. Such situations may arise not only in the workplace, but also at clients' premises, when carrying out visits or deliveries, or when using public transport.

Face masks should only be considered as a complementary measure and not a replacement for established preventive practices, such as physical distancing, cough and sneeze etiquette, hand hygiene and avoiding face touching.

It is essential that IDIWA Staff use face masks properly so that they are effective and safe.

- It should fit properly, completely covering the face from bridge of nose to chin.
- Clean hands properly before putting the face mask on or taking it off.

- Only touch the cord or elastic at the back of the face mask when removing it, not the front.
- If the face mask is disposable, be sure to do so safely in a proper container.
- If reusable, wash the face mask as soon as possible after use with detergent at 60°C.

The best way to reduce any risk of infection is good hygiene and avoiding direct or close contact (closer than 2 metres) with any potentially infected person. Any worker who deals with members of the public from behind a screen should be protected from airborne particles.

## **6. What to do if someone with suspected or confirmed to have COVID-19 has been in the workplace**

### **6.1 What to do if a worker or a member of the public becomes unwell and believe they have been exposed to COVID-19**

If someone becomes unwell in the workplace and there is reason to suspect they may have come into contact with COVID-19, the person should be moved to an area which is at least 2 metres away from other people. If possible, find a room or area where they can be isolated behind a closed door, such as a staff office. If possible open a window for ventilation.

The individual who is unwell should use their mobile phone to call the designated public health service number. If it is an emergency (if they are seriously ill or injured or their life is at risk) then you should call the RDC and explain the situation and relevant information, such as their current symptoms.

Whilst waiting for advice from the designated public health or emergency service, the affected person should remain at least two metres from other people. They should avoid touching people, surfaces and objects and should cover their mouth and nose with a disposable tissue when they cough or sneeze and put the tissue in a bag or pocket then throw the tissue in the



bin. If they do not have any tissues available, they should cough and sneeze into the crook of their elbow.

If they need to go to the bathroom whilst waiting for medical assistance, they should use a separate bathroom if available.

## **6.2 What to do if a member of staff or the public with suspected COVID-19 has recently been in your workplace**

For contacts of a suspected case in the workplace, follow the guidance given by the National/Local authorities. The management team of the office or workplace will be contacted by the designated public health services to discuss the case, to identify people who have been in contact with them and to advise on any actions or precautions that should be taken.

A risk assessment of each situation will be undertaken by the designated public health services with the lead responsible person in IDIWA's workplace. They will provide advice on how to manage staff and members of the public, based on their assessment of the risk. The designated public health services will also be in contact with the affected person directly to advise on isolation and identifying other contacts to whom they will give appropriate advice. If a worker is confirmed to have COVID-19, IDIWA should inform its workers of their possible exposure to COVID-19 in the workplace but maintain confidentiality. Workers exposed to a co-worker with confirmed COVID-19 should be given instructions on what to do according to IDIWA's policies and the national guidelines.

Workers who are well but have sick family members at home with COVID-19 should notify IDIWA and refer to national health services guidance as to how to assess their potential exposure and the measures to take.

### **6.3 When individuals in the workplace have had contact with a confirmed case of COVID-19**

If a confirmed case is identified at any of IDIWA's workplace, the designated public health services will provide advice to:

- any worker that has been in close face-to-face or touching contact
- anyone who has spent any length of time with the worker while he or she was symptomatic
- anyone who has cleaned up any bodily fluids
- close friendship groups or workgroups
- any worker living in the same household as a confirmed case

Contacts are not considered cases and if they are feeling well, they are very unlikely to have spread the infection to others:

- those who have had close contact will be asked to self-isolate at home for 14 days from the last time they had contact with the confirmed case. They will be actively followed up by the designated public health services
- if they develop new symptoms, or their existing symptoms worsen within the 14-day observation period, they should call the designated public health services for reassessment
- if they are unwell at any time within their 14-day observation period and they test positive for COVID-19 they will become a confirmed case and will be treated for the infection. If testing is not available, but the symptoms are consistent with COVID-19, they may nonetheless be considered as a confirmed case.
- Staff who have not had close contact with the original confirmed case do not need to take any precautions other than monitoring their health for symptoms and can continue to attend work.

A confirmed case of COVID-19 in the workplace will cause anxiety among co-workers and some may become stressed. Clear communication is important, directing staff to reliable sources of

information about COVID-19. Managers should be supportive and understanding and as far as possible flexible on work arrangements.

#### **6.4 Cleaning offices and public spaces where there are suspected or confirmed cases of COVID-19**

Coronavirus symptoms are similar to a flu-like illness and include dry cough, sore throat, fever, tiredness or shortness of breath. Once symptomatic, all surfaces that the person has come into contact with must be cleaned including:

- all surfaces and objects which are visibly contaminated with body fluids
- all potentially contaminated high-contact areas such as toilets, door handles, telephones

Public areas where a symptomatic individual has passed through and spent minimal time in (such as corridors) but which are not visibly contaminated with body fluids do not need to be specially cleaned and disinfected.

All waste that has been in contact with the individual, including used tissues, and masks if used, should be put in a plastic rubbish bag and tied when full. The plastic bag should then be placed in a second bin bag and tied. It should be put in a safe place and marked for storage until the result is available. If the individual tests negative, this can be put in the normal waste. Should the individual test positive, you will be instructed what to do with the waste by public health authorities.

#### **6.5 Advice on travel and meetings**

##### **6.5.1 Returning from travel to affected areas**

People who have returned from areas where COVID-19 countermeasures are in effect in the last 14 days should avoid attending work. They should call the designated public health service for advice and self-isolate.

Advice from the local or national public health authority is in place for what to do if you have returned in the last 14 days from specified countries or areas, which is updated on an ongoing basis. All other staff should continue to attend work, unless otherwise advised by the national authorities or their employer.

### **6.5.2 Advice for staff returning from travel anywhere else within the last 14 days**

These staff can continue to attend work unless they have been informed that they have had contact with a confirmed case of COVID-19. If individuals are aware that they have had close contact with a confirmed case of COVID-19 they should contact IDIWA office and the designated public health services for further advice.

### **6.5.3 Organising meetings or events**

IDIWA staff organising meetings and events need to think about the potential risk from COVID-19 because:

- There is a risk that people attending your meeting or event might be unwittingly bringing the COVID-19 virus to the meeting.
- Others might be unknowingly exposed to COVID-19.

#### **BEFORE the meeting or event**

1. Consider whether the meeting or event is necessary or whether it could be postponed or replaced with a tele or video conference. Can it be scaled down so that fewer people attend?
2. Check and follow the advice from the authorities in the community where you plan to hold the meeting or event.
3. Develop and agree a preparedness plan to prevent infection at your meeting or event
  - Ensure and verify information and communication channels in advance with key partners such as public health and health care authorities

- Pre-order sufficient supplies and materials, including tissues and hand sanitizer for all participants.
- Actively monitor where COVID-19 is circulating. Advise participants in advance that if they have any symptoms or feel unwell, they should not attend.
- Make sure all organizers, participants, caterers and visitors at the event provide contact details: mobile telephone number, email and address where they are staying. State clearly that their details will be shared with local public health authorities if any participant becomes ill with a suspected infectious disease.

### **DURING the meeting or event**

1. Provide information or a briefing, preferably both orally and in writing, on COVID-19 and the measures that organisers are taking to make this event safe for participants.
  - Build trust. For example, as an icebreaker, practice ways to say hello without touching.
  - Encourage regular hand-washing or use of an alcohol rub by all participants at the meeting or event
  - Encourage participants to cover their face with the crook of their elbow or a tissue if they cough or sneeze. Supply tissues and closed bins to dispose of them in.
  - Provide contact details or a health hotline number that participants can call for advice or to give information.
2. Provide dispensers of alcohol-based hand rub prominently around the venue.
3. If there is space, arrange seats so that participants are at least two metres apart.
4. Open windows and doors whenever possible to make sure the venue is well ventilated.

## **AFTER the meeting**

1. Retain the names and contact details of all participants for at least one month. This will help public health authorities trace people who may have been exposed to COVID-19 if one or more participants become ill shortly after the event.
2. If someone at the meeting or event was isolated as a suspected COVID-19 case, the organizer should let all participants know this. They should be advised to monitor themselves for symptoms for 14 days. If they start to feel unwell they should stay at home and contact the relevant public health authority.

## Resources

[OSH wiki article: Epidemics and the workplace](#)

[Questions and answers on Coronavirus - WHO](#)

["COVID-19 Dashboard by the Center for Systems Science and Engineering \(CSSE\) at Johns Hopkins University \(JHU\)". ArcGIS. Johns Hopkins University](#)