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| Checklist 2Covid-19 : Checklist 2 in support of the Governments Return to the Workplace Safely | Staff AwarenessJune 2020 |

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| **COVID-19 Return to Workplace Safely Protocol****Staff** |
| This checklist has been developed to help inform staff about what they need to do to help prevent the spread of COVID-19 in their workplace. Employers and staff must work together to protect everyone at the workplace. Further information can be found at [www.Gov.ie](http://www.Gov.ie), [www.hse.ie](http://www.hse.ie), [www.hpsc.ie](http://www.hpsc.ie) and [www.hsa.ie](http://www.hsa.ie)  |
|  | **Control**  | **Action needed** | **Completion Date** | **Person Responsible** |
| 1. | Do you feel well and fit enough to return to work? |  |  | Staff member |
| 2. | Are you keeping up to date with the latest COVID-19 advice from Government? |  |  | Staff member |
| 3. | Are you aware of the [signs and symptoms of COVID-19](https://www2.hse.ie/conditions/coronavirus/symptoms.html)? |  |  | Staff member |
| 4. | Do you know [how the virus is spread](https://www2.hse.ie/conditions/coronavirus/how-coronavirus-is-spread.html)? |  |  | Staff member |
| 5. | Have you completed COVID-19 return-to-work form and given it to your employer? (See template Return-to-Work form) |  |  | Staff member |
| 6. | Have you told your employer if you fall into any of the [at-risk categories](https://www2.hse.ie/conditions/coronavirus/people-at-higher-risk.html)? |  |  | Staff member |
| 7. | Have you been given an induction before returning to work and made aware of the control measures your employer has put in place to minimise the risk of you and others being exposed to COVID-19? (See Checklist No. 2 Control Measures) ? |  |  | Staff member |
| 8. | Did your employer communicate effectively with you on control measures in place?  |  |  | Staff member |
| 9. | Do you know who your Staff Representative is and how to contact him / her? |  |  | Staff member |
| 10. | Do you know how to contact your Staff Representative if you have any concerns about exposure to COVID-19, control measures not been maintained or have any suggestions that could help prevent the spread of the virus? |  |  | Staff member |
| 11. | Do you know what to do in relation to physical distancing, good hand hygiene and respiratory etiquette? |  |  | Staff member |
| 12. | Do you know how to wash your hands properly? |  |  | Staff member |
| 13. | Do you know when to wash your hands: i.e.* before and after eating and preparing food
* after coughing or sneezing
* after using the toilet
* before smoking or vaping
* where hands are dirty
* before and after wearing gloves
* before and after being on public transport
* before leaving home
* when arriving/leaving the workplace/other sites
* after changing tasks
* after touching potentially contaminated surfaces
* if in contact with someone displaying any COVID-19 symptoms
 |  |  | Staff member |
| 14. | Do you know where your nearest hand washing / hand sanitising stations are? |  |  | Staff member |
| 15. | Do you know to avoid touching your face? |  |  | Staff member |
| 16. | Do you know to keep 2 metres physical distancing from others at all times at work, including in any canteen or wash/changing room?  |  |  | Staff member |
| 17. | Do you know to avoid any physical contact with colleagues, customers or visitors?  |  |  | Staff member |
| 18. | Do you know what to do if you start to develop symptoms of COVID-19 while at work, including where the isolation area is?  |  |  | Staff member |
| 19. | Do you understand your obligation to give your employer any necessary information to maintain a COVID-19 contact log? |  |  | Staff member |
| 20. | Do you understand any proposed new staff rosters, changing of start / finish times, rostering of breaks etc? |  |  | Staff member |
| 21. | Have you been made aware of any changes to risk assessments relevant to your work activities and any changes in the safety statement in response to controls to minimise the risk of you and others being exposed to COVID-19?? |  |  | Staff member |
| 22. | Have you been made aware of any changes to the emergency plans or first aid procedures for your workplace in response to controls to minimise the risk of you and others being exposed to COVID-19? |  |  | Staff member |
| 23. | Are you aware of best practice when it comes to sharing items? |  |  | Staff member |
| 24. | Have you been made aware that any personal items brought into work must be cleaned and to avoid leaving them down on communal surfaces or to clean the surface after the personal item is removed? |  |  | Staff member |
| 25. | Have you been provided with cleaning materials to clean your own workspace?  |  |  | Staff member |
| 26. | Can you avoid work-related travel as far as possible and are you able to conduct meetings with colleagues / clients / customers in other forms e.g. phone, online rather than in person? |  |  | Staff member |
| 27. | If you have to share a work vehicle, have you followed the national guidelines in relation to travel? |  |  | Staff member |
| 28. | Do you know when you have to wear PPE and how to fit, use, remove, clean, store and dispose of any required PPE? |  |  | Staff member |
| 29. | Do you know what supports are available to you if you are feeling anxious or stressed? |  |  | Staff member |