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|  | **Lead Worker Representative Checklist** |
| **CF:058:03** | **RE: COVID-19 LWR Checklist**  |
| **Issue date:** | August 2020 | **Revision date:** | June 2023 |
| **Author(s):** | National Health and Safety Function – I&A Team |
| **Note:** **Legislation** | The Safety, Health and Welfare at Work Act, 2005  |
| **Scope/ Instructions for use** | As per the [**Transitional Protocol: Good Practice Guidance for Continuing to Prevent the Spread of COVID-19**](https://www.gov.ie/en/publication/63ba6-transitional-protocol-good-practice-guidance-for-continuing-to-prevent-the-spread-of-covid-19/), the Lead Worker Representative (LWR) role is encouraged to be maintained to ensure that a shared responsibility to prevent the spread of COVID-19 continues. This role involves working collaboratively with Managers to assist in the implementation of COVID-19 measures and monitor adherence. A key activity in monitoring adherence is to conduct inspections at a frequency and type agreed with the COVID-19 Response Manager (CRM). Thefollowing non-exhaustive inspection checklist has been developed in line with the Transitional Protocol and Health & Safety Authority (HSA) guidance. It is suggested that the LWR and CRM carry out joint compliance inspections on a periodic basis. Regular consultation with the CRM is required. Note: Appointed/Nominated LWR’s must complete appropriate training and keep up to date with the latest COVID-19 advice and guidance. Please contact the National Health and Safety Function Helpdesk on 1800 420 420 for more information. |

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| **Name of LWR** |  | **Signature** |  |
| **Date** |  |
| **Name of local line Manager/s\******(\*if applicable - there may be multiple Line Managers in a shared workplace)***  |  | **Signature/s** |  |
| **Name of COVID-19 Response Manager** |  |  |  |

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| **Section 1.0** | **Physical Measures** | **Yes** | **No** | **N/A** |
| 1.1 | **Clinical Areas**1 metre physical distancing is still required as [per the HSE Infection Prevention and Control Guidance and Framework](https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/hseinfectionpreventionandcontrolguidanceandframework/). and the [Infection Control Guiding Principles for Buildings Acute Hospitals and Community Settings.](https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/buildingsandfacilitiesguidance/#d.en.20152)Note: The requirement for physical distancing in non-clinical areas has been removed, however adopting a physical distance continues to be good practice. |  |  |  |
| 1.2 | Please add any further comments on physical measures in place: |
| 2.0 | **Isolation Room** |
| 2.1 | Has an Isolation Room been identified? |  |  |  |
| 2.2 | Has the identified Isolation Room been checked for compliance? (see ***HSE Guideline Document – Supplementary Note for the Management of Suspected COVID 19 cases***)  |  |  |  |
| 2.3 | Are staff aware of its location? |  |  |  |
| **3.0**  | **Signage** |
| 3.1 | Is COVID-19 IPC signage displayed as appropriate? |  |  |  |
| Signs and Symptoms  |  |  |  |
| Cough Etiquette  |  |  |  |
| Hand Hygiene |  |  |  |
| **4.0**  | **Hand Hygiene** |
| 4.1 | Are hand hygiene facilities easy accessible to staff/ services users/ contractors/visitors? |  |  |  |
| 4.2 | Are hand sanitisers provided and easily accessible? |  |  |  |
| 4.3 | Are hand sanitisers fully restocked? |  |  |  |
| **5.0**  | **Waste Management** | **Yes** | **No** | **N/A** |
| 5.1 | Is waste removed such that bins are not overflowing?General waste Clinical waste  |  |  |  |
| **6.0** | **Cleaning** |
| 6.1 | [Is there a local documented cleaning regime in place in (e.g. Local Standard Operating Procedures (SOP))?](https://www.ecdc.europa.eu/en/publications-data/disinfection-environments-covid-19)  |  |  |  |
| 6.2 | Is there evidence/records to identify that the cleaning regime is implemented e.g. Washroom Cleaning Checklist? |  |  |  |
| 6.3 | Are local desk and IT equipment cleaning materials available to allow staff to clean their workstations?  |  |  |  |
| **7.0**  | **Personal Protective Equipment (PPE) and Respiratory Protective Equipment (RPE)** |
| 7.1 | Based on risk assessment have staff access to appropriate PPE?  |  |  |  |
| 7.2 | Based on risk assessment have staff access to appropriate RPE?  |  |  |  |
| 7.3 | Have the staff completed the appropriate training? |  |  |  |
| **8.0**  | **COVID-19 Response Plan** |
| 8.1 | Is the COVID-19 Response Plan available?  |  |  |  |
| 8.2 | Has the COVID-19 Response Plan been communicated to all staff? |  |  |  |
| 8.3 | Is there evidence that a system is in place to provide attendance information should a case of COVID-19 and/or an outbreak be confirmed in the workplace? This information will assist local Public Health Service. |  |  |  |
| **You must now complete the final page.** |

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| **9.0**  | **Please indicate that issues of non-conformance have been escalated to the relevant COVID-19 Response Manager and local manager?** | **Yes** **(add date)** | **No** |
| **No.** |  |  |  |