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Occupational health and safety management — General guidelines for safe working during the COVID-19 pandemic

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Foreword

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The procedures used to develop this document and those intended for its further maintenance are described in the ISO/IEC Directives, Part 1. In particular, the different approval criteria needed for the different types of ISO documents should be noted. This document was drafted in accordance with the editorial rules of the ISO/IEC Directives, Part 2 (see www.iso.org/directives).

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For an explanation of the voluntary nature of standards, the meaning of ISO specific terms and expressions related to conformity assessment, as well as information about ISO's adherence to the World Trade Organization (WTO) principles in the Technical Barriers to Trade (TBT), see www.iso.org/iso/foreword.html.

This document was prepared by Technical Committee ISO/TC 283, *Occupational health and safety management*.

Any feedback or questions on this document should be directed to the user's national standards body. A complete listing of these bodies can be found at www.iso.org/members.html.

Introduction

This document is a response to the COVID-19 pandemic and the increased risk this disease presents to the health, safety and well-being of people in all settings, including those working at home or in mobile settings, and workers and other interested parties in physical workplaces.

Governments, regulators and other professional bodies across the world have published guidance on working safely during the COVID-19 pandemic. This document provides a single generic set of guidelines that complements this information and supports the principles that:

— reasonable measures to manage the risks arising from COVID-19 are, or will be, implemented to protect the health and safety of workers and other relevant interested parties;

— workers should not be required to work unless these measures have been implemented.

This guidance includes practical recommendations to organizations and workers on how to manage these risks and is suitable for organizations resuming operations, those that have been operational throughout the pandemic, and those that are starting operations.

The guidance is generic and applicable to organizations regardless of the nature of business, service provision, size or complexity. It recognizes that many smaller organizations do not have dedicated departments for functions such as occupational health and safety (OH&S), facilities management or human resources. More detailed information for specific functions is available from professional bodies and a wide range of national and international standards.

By implementing the guidance in this document, the organization will be able to:

a)   take effective action to protect workers and other relevant interested parties from the risks related to COVID-19;

b)   demonstrate that it is addressing risks related to COVID-19 using a systematic approach;

c)   put in place a framework to enable effective and timely adaptation to the changing situation.

Organizations using ISO 45001 can use this document to inform their OH&S management system by relating the relevant clauses to the Plan-Do-Check-Act (PDCA) cycle, as outlined below. Taking a systems approach facilitates the coordination of resources and efforts that is so important in managing COVID-19.

— Plan: Plan what needs to be done for the organization to work safely (see Clauses 4 to 8).

— Do: Do what the organization has planned to do (see Clauses 9 to 12).

— Check: See how well it is working (see Clause 13).

— Act: Fix problems and look for ways to make what the organization is doing even more effective (see Clause 14).

This document is not intended to be a single step-by-step set of recommendations. It provides a framework in which the PDCA cycle outlined above should be repeated, with all parts active at all times, to enable ongoing continual improvement and to ensure the organization responds to changes during the different phases of the pandemic.

Occupational health and safety management — General guidelines for safe working during the COVID-19 pandemic

1   Scope

This document gives guidelines for organizations on how to manage the risks arising from COVID-19 to protect work-related health, safety and well-being.

This document is applicable to organizations of all sizes and sectors, including those that:

a)   have been operating throughout the pandemic;

b)   are resuming or planning to resume operations following full or partial closure;

c)   are re-occupying workplaces that have been fully or partially closed;

d)   are new and planning to operate for the first time.

This document also provides guidance relating to the protection of workers of all types (e.g. workers employed by the organization, workers of external providers, contractors, self-employed individuals, agency workers, older workers, workers with a disability and first responders), and other relevant interested parties (e.g. visitors to a workplace, including members of the public).

This document is not intended to provide guidance on how to implement specific infection control protocols in clinical, healthcare and other settings.

NOTE   Applicable legislation and guidance is provided by government, regulators and health authorities for workers in these settings or in related roles.

2   Normative references

There are no normative references in this document.

3   Terms and definitions

For the purposes of this document, the following terms and definitions apply.

ISO and IEC maintain terminological databases for use in standardization at the following addresses:

—   ISO Online browsing platform: available at https://www.iso.org/obp

—   IEC Electropedia: available at http://www.electropedia.org/

3.1
organization
person or group of people that has its own functions with responsibilities, authorities and relationships to achieve its objectives

Note 1 to entry: The concept of organization includes, but is not limited to sole-trader, company, corporation, firm, enterprise, authority, partnership, association, charity or institution, or part or combination thereof, whether incorporated or not, public or private.

[SOURCE: ISO 45001:2018, 3.1, modified — The word "association" has been deleted from Note 1 to entry and Note 2 to entry has been removed.]

3.2
worker
person performing work or work-related activities that are under the control of the *organization* (3.1)

Note 1 to entry: Persons perform work or work-related activities under various arrangements, paid or unpaid, such as regularly or temporarily, intermittently or seasonally, casually or on a part-time basis.

Note 2 to entry: Workers include top management, managerial and non-managerial persons.

Note 3 to entry: The work or work-related activities performed under the control of the organization may be performed by workers employed by the organization, workers of external providers, contractors, individuals, agency workers, and by other persons to the extent the organization shares control over their work or work-related activities, according to the context of the organization.

[SOURCE: ISO 45001:2018, 3.3]

3.3
workplace
place under the control of the *organization* (3.1) where a person needs to be or to go for work purposes

Note 1 to entry: The organization's responsibilities for the workplace depend on the degree of control over the workplace.

Note 2 to entry: Workplaces can include the *worker's* (3.2) own home, other people's homes, personal vehicles, vehicles provided by the organization, another organization's facilities and public spaces.

[SOURCE: ISO 45001:2018, 3.6, modified — The words "under the OH&S management system" have been deleted from Note 1 to entry and Note 2 to entry has been added.]

3.4
risk
effect of uncertainty

Note 1 to entry: In this document, the term "risk" refers to risks related to *COVID-19* (3.6), unless otherwise stated.

[SOURCE: ISO 45001:2018, 3.20, modified — The original notes to entry have been deleted and a new Note 1 to entry has added.]

3.5
pandemic
worldwide spread of a disease

[SOURCE: World Health Organization[9], modified — The word "new" has been removed.]

3.6
COVID-19
infectious disease caused by the new coronavirus SARS-CoV-2 discovered in 2019

[SOURCE: World Health Organization[10], modified — The words "SARS-CoV-2 discovered in 2019" have been added.]

3.7
incident
occurrence arising out of, or in the course of, work that could or does result in injury and ill health

Note 1 to entry: In this document, "injury and ill health" refers to a direct infection with *COVID-19* (3.6) or any physical or psychological injury and ill health that is a consequence of COVID-19.

[SOURCE: ISO 45001:2018, 3.35, modified — The original notes to entry have been deleted and a new Note 1 to entry has added.]

3.8
personal protective equipment
PPE
device or appliance designed to be worn by an individual for protection against one or more health and safety hazards

Note 1 to entry: PPE includes, but is not limited to, gowns, gloves, respirators, safety glasses, helmets and goggles.

Note 2 to entry: While generally not considered PPE, masks [and *face coverings* (3.9)] can provide a level of protection for the user, in addition to their primary purpose as a public health measure to control the spread of transmission and infection.

Note 3 to entry: In many countries, PPE is required to conform to national regulations.

[SOURCE: ISO 15384:2018, 3.12, modified — The words "or held" have been removed from the definition and the notes to entry have been added.]

3.9
face covering
facepiece that covers the mouth, nose and chin

Note 1 to entry: Face coverings are also known as community masks, hygiene mask, barrier masks, comfort masks and other local terms.

Note 2 to entry: Face coverings in the context of this document are not considered to be *personal protective equipment* (3.8) or a medical device.

[SOURCE: CWA 17553:2020, 2.3, modified — The word "community" has been deleted from the term, the words "fitted with the head harness which can be head or ears attachment" has been deleted from the definition, and the notes to entry have been added.]

3.10
well-being
fulfilment of the physical, mental and cognitive needs and expectations of a *worker* (3.2) related to their work

Note 1 to entry: Well-being can also contribute to the quality of life outside of work.

Note 2 to entry: Well-being relates to all aspects of working life, including work organization, social factors at work, work environment, equipment and hazardous tasks.

[SOURCE: ISO 45003:—[1], 3.2, modified — The words "at work" has been deleted from the term and from the notes to entry.]

3.11
common areas
spaces and amenities provided for the use of more than one person

EXAMPLE   Canteens, lifts/elevators, stairs, reception areas, meeting rooms, areas of worship, toilets, gardens, fire escapes, kitchens, fitness facilities, store rooms, laundry facilities.

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[1]   Under preparation. Stage at the time of publication: ISO/DIS 45003:2020.

4 Planning and assessment of risks

4.1 Understanding the context of the organization

4.1.1 To understand the specific risks to workers and other people who can be affected by the organization's activities (e.g. visitors, customers, service users, the general public), the organization should consider:

a) what can affect the ability of individuals to work safely during the COVID-19 pandemic;

b) how its operations should change to address the increased risk to work-related health, safety and well-being.

Before assessing risks related to COVID-19, the organization should consider the specific external and internal issues that can affect the health and safety of workers and how these issues are impacted by the pandemic. The organization should take these issues into account when assessing risk and planning to begin, resume or modify operations, and ensure risks are assessed on an ongoing basis.

4.1.2 External issues can include, but are not limited to:

a) the prevalence of COVID-19 within the local community (including in other organizations and other workplaces);

b) local, regional, national and international circumstances, and related legal requirements and guidance;

c) the availability of clinical services, testing, treatments and vaccines;

d) the availability of health and safety and other supplies (e.g. PPE, masks, hand sanitizer, thermometers, cleaning and disinfection materials);

e) how workers travel to and from work (e.g. public transport, car, bicycle, walking);

f) workers' access to childcare and schooling for their children;

g) the suitability of a worker's home for remote working;

h) workers' domestic situations (e.g. living with someone who is considered to be at higher risk of contracting COVID-19 or getting severe illness from COVID-19);

i) changes or problems in the supply chain;

j) the continuity of essential services (e.g. food provision, domestic infrastructure, utilities);

k) changes in customer needs and expectations, or behaviours;

l) local culture and cultural behaviours (e.g. kissing, hugging, shaking hands);

m) increased or decreased demand for products/services.

4.1.3 Internal issues can include, but are not limited to:

a) the prevalence of COVID-19 in the organization;

b) the number and types of workplaces (e.g. offices, factories, workshops, warehouses, vehicles, retail outlets, workers' own homes, other people's homes);

c) cultural values within the organization that can affect risk control measures;

d) the ability of the organization to gain up-to-date knowledge about COVID-19;

e) the type of organization and related activities (e.g. manufacturing, services, retail, social care, training or other education, delivery, distribution);

f) the type of workers in the organization (e.g. employed, contractors, volunteers, freelance, part-time, shift workers, remote workers);

g) the extent to which it is possible to implement physical distancing measures;

h) specific needs of workers (e.g. workers considered to be at higher risk of contracting COVID-19 or getting severe illness from COVID-19);

i) workers with caring responsibilities, disabled workers, pregnant women, new mothers and older workers;

j) increased worker absence (e.g. due to sickness, self-isolation or quarantine requirements, bereavement);

k) resource availability, including adequate provision of toilet and handwashing facilities;

l) how work is organized (e.g. changed work demands, pace of work, time pressure, shift work) and supported, and how this impacts work-related health, safety and well-being.

4.2 Leadership and worker participation

4.2.1 To assist effective management of the risks arising from COVID-19 relating to work, the organization should:

a) demonstrate leadership and commitment to collective responsibility and safe working practices;

b) communicate about, and consistently comply with, internal policy at all times;

NOTE Local, regional or national guidelines can also apply.

c) commit to transparency when reporting and managing suspected and confirmed cases of COVID-19, ensuring that personal health information is kept confidential (see Clause 5);

d) ensure adequate resources are provided (see Clause 8) and make them available to workers in a timely and effective manner;

e) ensure consultation and encourage participation of workers and worker representatives, where they exist, in making decisions that affect work-related health, safety and well-being;

f) provide a clear policy on the financial implications for workers unable to work due to operational restrictions, or who are required to self-isolate or quarantine;

g) provide appropriate support for workers unable to work due to operational restrictions, or who are required to self-isolate or quarantine, including provision of appropriate leave from work and paid sick pay if possible (so that workers do not come to a workplace when they should not because of concerns about pay);

h) communicate how workers and other relevant interested parties should report incidents or raise concerns, and how these will be addressed and responses communicated;

i) protect workers from reprisals when reporting potential illness or incidents, or if workers remove themselves from work situations which they believe to be unhealthy or unsafe;

j) ensure coordination across all parts of the organization when implementing measures to manage the risks related to COVID-19;

k) seek competent advice and information on managing risks related to COVID-19, if necessary.