Implementation Guidelines for Public Health Measures in ETB Further Education and Training Institutions (FET).

The guidelines and implementation measures in this document have been drawn up ETBI and SOLAS, informed by public health advice and are supported by the Department of Further and Higher Education, Research, Innovation and Science.

Version 1.1

Contents

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Introduction

The Government's Roadmap for Reopening Society and Business, combined with the HSA Return to Work Protocols and ongoing public health advice provide the over-arching framework for all parts of society to reopen facilities and premises. The Government has also published _Guidance for Further & Higher Education for returning to on-site activity in autumn 2020_. That Guidance provides for further "context-specific measures approved by government within public health guidelines". In view of the specific features and context of FET campuses, colleges and centres, context-specific measures are required to accommodate the unique features of the sector while operating within the overall public health guidance framework. These Implementation Guidelines set out a range of such context-specific measures with practical guidance for FET Institutions to safely deliver teaching and learning activities[1] in autumn 2020[2] which present very specific challenges and require bespoke solutions in the context of reopening.

The following social distancing guidance for the FET sector is aligned with the guidance published for the HE sector published on 07 August 2020 as part of the Public Health Implementation Guidelines for higher education. These guidelines were drawn up by expert public health specialists in higher education and the approach has been approved by the Health Protection Surveillance Unit in the Department of Health as consistent with national public health advice. Further comprehensive advice, guidance, documentation and resources related to ETBs statutory obligations are available on https://www.hsa.ie/eng/topics/covid-19/

Planning for reopening of FET Institutions[3]

Following the announcement made on March 12th to close all educational establishments with immediate effect, the Further Education & Training sector, along with all other provision, put in place contingency plans to deal with the disruption to teaching and learning. The sector demonstrated a swift and appropriate response to the immediacy of the situation, and the challenges compelled upon it at this time of crisis.

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[1] FET Provision comprehends Post Leaving Certificate (PLC), Back to Education Initiative (BTEI), Vocational Training Opportunities Scheme (VTOS), Adult Literacy, Numeracy, and ICT, Youthreach, Community Training Centres (CTCs)Community Education, Bridging/Foundation courses, English for Speakers of Other Languages (ESOL), Apprenticeship and Traineeship, Specific Skills Training (SST), Skills for Work, Traineeship, Evening Courses, Specialist Training Providers (STPs), Local Training Initiative (LTI), Education Units in prisons.

[2] Informed by the HSE's Health Protection Surveillance Centre and the Department of Further, Higher Education, Research, Innovation & Science.

[3] FET Institutions: term refers to FET facilities i.e. campuses, colleges, and centres.

FET Institutions continued to deliver a large portion of their services to learners during the period of full national lockdown with the transition to blended and remote teaching and learning and the continuation of learner supports and assessment where possible. FET Institutions are now working to finalise plans for the reopening of FET in autumn 2020.

A large amount of work has been completed in this regard with detailed risk assessments carried out by ETBs and preparatory measures being put in place to facilitate reopening that recognises the unique features of FET.

- FET Institutions in the main, cater for adults.
- FET Institutions are multi-disciplinary with a wide range of facilities, buildings, and outdoor spaces.
- FET Institutions have to cater for teaching and learning in classrooms, lecture theatres, laboratories, workshops, practice rooms, libraries, sport, and communal facilities.
- FET Institutions tend to be older buildings and learners are not generally confined to a single room or building.
- FET Institutions are different to primary and secondary education facilities where daily contact hours may be considerably lower

Some FET institution feature dual provision. In such cases the sector specific guidelines will apply to classroom settings, all arrangements outside of the classroom will follow the appropriate public health guidance - a minimum of 2m in the FET/PLC provision and a minimum of 1m in post-primary provision.

The Department of Further and Higher Education, Research, Innovation and Science (DFHERIS) and SOLAS are committed to funding all costs associated with re-opening FET facilities safely and in line with public health guidelines. Provision has been made for a substantial base of funding to meet all investment needs in this regard, drawing from sources including the additional funding announced by Government on 22nd July and savings made due to the non-progression of FET activity during the period of shutdown. Additional funding to meet re-opening costs will be distributed via SOLAS and the ETBs using existing mechanisms. This will take account of the complexity and variances that exist in the sector, particularly within different FET settings (recognising for example, the different needs of a Youthreach centre as distinct from a Training Centre). The FET funding model is based on incremental sector planning and ensuring agile responses to local needs, with evolving priorities reflected in the annual budget request and mid-term review. This mid-term review process is currently being finalised been SOLAS and ETBs and will help to ensure that the required resources to facilitate re-opening are channelled to FET providers, in line with the needs of learners and staff.

Guiding principles

The following guiding principles will apply.

1. FET Institutions will operate within the parameters of public health and safety advice at all times.

2. Specifically, the Return to Work Protocol and public health guidance, as it develops on a rolling basis, will be adhered to.

3. The safety and well-being of learners and staff will be paramount in all cases.

4. FET Institutions e.g. PLC Colleges, Youthreach and Training Centres, commit to carrying out risk assessments on individual facilities / buildings as required and will apply appropriate reopening solutions in accordance with the outcome of those risk assessments.

5. In keeping with the wider approach in society in response to the COVID-19 pandemic, it is recognised that the successful implementation of 'Return to FET' can only be done on a cooperative basis with shared responsibility between staff and learners.

6. FET Institutions will plan for returning to education and training on the basis of the following sequence, with planning taking a phased return of learners into consideration
   a. Learners awaiting assessment who have their course substantially completed, those who require additional tuition and practical instruction in order to complete their FET programme and continuing learners, e.g. PLC Colleges, Youthreach.
   b. New Learners
7. In respect of Apprenticeship training three priority groups will be catered for as apprentices return. They will be recalled in two main groups:
   a. Apprentices who have practical assessments still to be completed and apprentices who had their training interrupted when education facilities were closed on 12 March
   b. New apprentices who are starting their Phase 2 off-the-job training

The Implementation Guidelines set out below are based on these guiding principles.

Background to Covid-19

COVID-19 is a viral respiratory tract infection. The virus cannot multiply outside of a living host but can persist and survive for a period of hours or days (depending on the conditions) if not cleaned away or inactivated. It is not yet clear how long such viral residue is capable of infecting someone.

Everyone sheds liquid particles (larger droplets and smaller aerosols) from their respiratory tract when they breathe, talk, laugh, cough, sneeze (you can feel the larger particles if someone coughs in your face). The liquid particles come in a very wide range of sizes forming a continuum. The larger particles are called droplets and the smaller ones' aerosols. The cut-off between droplets and aerosols is generally accepted as 5 micrometres.

The virus that causes COVID-19 (called SARS-CoV-2) is scattered from the respiratory tract of infected people. The virus can be found in droplets and aerosols. There are differences in emphasis on the relative importance of droplets and aerosols in the published literature but on current evidence the consensus is that it is overwhelmingly the larger droplets that are important in spread of COVID-19 in most circumstances. COVID-19 is therefore considered a droplet transmitted infection. The distinction between droplet transmission and aerosol/airborne transmission is critical. Droplets generally, impact on a surface within a short distance from the mouth or nose of the person generating the droplets. Virus in droplets is carried through the air over a short distance directly to the eyes nose or mouth of a susceptible person or they fall on a surface (for example skin, tabletop) close to the person generating the droplets. For as long as virus in the droplets remains viable on the surface where they land, they can subsequently be transferred to the eyes, nose or mouth of a susceptible person on hands or other items contaminated with virus as a result of contact with those surfaces. When a person generates a plume of droplets, the distance travelled by individual droplets in the plume varies with size and circumstances. The density of droplets declines rapidly with increasing distance from the nose and mouth as some fall out of the air and those remaining in the air disperse.

Some individual droplets may travel some metres. There is no invisible wall that catches all droplets at 0.5m, at 1m or at 2m. However, on current evidence a distance of 1m provides most or all of the reduction in risk of infection afforded by interpersonal distance when distance is considered as one of a package of control measures that work together to manage risk. Droplet transmission is by contrast with airborne transmission as a result of aerosols. Aerosols stay suspended in the air for a long period and can reach essentially all parts of an enclosed space within which they are generated. Aerosols are important in spread of measles, which relates to the extraordinarily rapid transmission

of measles among susceptible populations. As above, aerosols are not considered as generally important in sustaining COVID-19 transmission, but they may contribute to spread in certain specific circumstances in particular in the context of certain healthcare procedures.

Managing the Risk of COVID-19 in FET settings.

Managing the risk of spread of COVID-19 requires:

1. Minimising the risk of introduction of infection into FET Institutions
2. Minimising the risk of spread of the virus if it is introduced
3. Minimising the associated harm if introduction and spread happens within FET Institutions

Minimising the risk of introduction of the virus

If the SARS-CoV-2 virus is not introduced into FET Institutions, it cannot spread or cause harm regardless of how much contact occurs between people on campus. The management of this risk is dependent on the behaviour of the individual members of the FET community at all times. If individual members of the community minimise their risk of exposure to COVID-19 in their life outside of the FET Institution, this reduces the likelihood that they become infected and reduces the risk that they introduce the virus into the FET community. The risk of a member of the FET community acquiring infection and subsequently introducing it to a FET Institutions is dependent on the level of control of the infection in the general community at any time. If transmission in the general community is low the likelihood of any individual member of the FET community becoming infected off-campus and introducing the virus to others in the FET community is low even if adherence to risk avoidance of campus is less than optimal.

Specific Measures

1. FET Institutions will have an ongoing communication to raise awareness amongst all members of its community about how COVID-19 spreads and how spread can be prevented.
2. Control of access to the FET Institution is vitally important. FET Institutions will enable safe access to indoor space. Where practical a one-way system and or marked lanes should be used to separate flow of people into, and out of buildings.

3. Staff and learners will be supported to scrupulously observe guidance to absent themselves from the FET Institutions if they have any symptoms that suggest that they may have COVID-19 and if they have been identified as contacts of some someone with COVID-19, this greatly reduces the risk of introduction to FET Institutions.

4. The FET Institution will provide information on an on-going basis regarding where learners should go to self-isolate if they develop symptoms of COVID-19. ETBs will provide an identified space where learners who develop symptoms that suggest COVID-19 can wait safely away from other learners while waiting to be picked up from the FET Institution.

5. ETBs will clearly communicate with all staff and learners that they must not attend if they are showing COVID-19 symptoms. Such communication should be re-affirmed on an ongoing basis and all members of the FET community will be encouraged to download the COVID-19 Tracker App and to use the symptom checker on the App on a daily basis. Advice on using the COVID-19 Tracker App will be included in email communication to learners, on the ETB website and on noticeboards across FET Institutions. Members of the FET community who travel to Ireland from other jurisdictions should follow Government advice on restricted movement on arrival in Ireland.

Minimising the risk of spread of the virus if it is introduced

The virus may be introduced to the FET community if one or more members of the community does not adhere to advice regarding absenting themselves OR if one or more members of the community with infection is present because at the time, they have no symptoms to indicate to them that they are infected. This may be because they are pre-symptomatic in which case symptoms subsequently appear one or more days later. This may be because they have true asymptomatic infection and never develop symptoms. Hand hygiene, respiratory etiquette and environmental cleaning are critical elements in the minimising risk of spread if an infected person is present on in a teaching, learning or practice, workshop, or laboratory group.

Specific Measures

1. Standard measures to reduce risk of infection (reducing time in shared space indoors, hand hygiene, cough etiquette, cleaning, use of masks) can be promoted and facilitated. However, it is likely that adherence will be far from complete.

2. The NPHET requirement to use cloth face coverings in indoor settings where adequate physical distance cannot be maintained must be adhered to. The basis for this advice is that the mask is expected to minimise the scattering of droplets from the mouth and nose. Therefore, if an infected person is present it is expected that mask use will reduce direct droplet transmission (to anyone standing close by) and reduce contamination of the surfaces in the vicinity of the infected person. A similar rationale may be applied to the use of full-face visors in settings where mask use is not acceptable or not appropriate.

3. Other than cloth face coverings (or visors where appropriate) in indoor settings, there is no requirement for other personal protective equipment related to COVID-19 risk for teaching and learning[4] activities.

4. Where FET staff are at a safe distance of 2m from the learner body there is no need for them to wear a mask or visor. The risk to those who maintain distance and are careful with respect to hand hygiene is low. A boundary to define a safe distance for learners who have questions after a class should be marked. If FET staff wish to cover their face, a visor may be more convenient than a mask. Gloves should not be used unless required for other reasons (for example in a workshop, practice room or laboratory) and should be actively discouraged as they generate refuse and tend to distract from hand hygiene. In any situation in which gloves are required, people must be trained in their use and hand hygiene is required before putting on and after taking off gloves. Gloves must never be used as a substitute for hand hygiene.

5. Meetings in offices can be planned to maintain distance and to check if learners/and or staff are symptomatic immediately before the meeting (for example by phone or email).

6. A careful review of out-reach activity is required to consider the appropriateness of the activity at this time and where appropriate how it can be organised safely.

7. Members of the FET community must be told not to share personal items (pens, phones), beverage or food with others.

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[4] personal protective equipment may be required for other reasons in particular in certain workshop, practical or laboratory settings

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8. To the greatest extent possible, the entry and exit from teaching and learning spaces and taking of seats should be managed to avoid congregation at the entrance and exit. This is likely to be quite challenging[5].

9. The FET Institutions should record attendance at all events and retain records for 4 weeks in case required for contact tracing purposes.

10. Teaching space should be laid out and managed in order to safeguard the health of both staff and learners. A physical distance of 2m should be maintained where possible. However, there are many situations where tuition can only be realistically delivered with less than 2m[6] (but no less than 1m) distancing between learners. This is safe and should proceed, provided both staff and learners take appropriate mitigation measures such as the following:

   a) As in all circumstances, good hand hygiene and cough/sneeze etiquette is of paramount importance.

   b) Face coverings must be worn in teaching situations where distancing is reduced below 2m.

   c) Physical contact should be avoided.

   d) Staff teaching stations should be located at least 2m from learners, or more where possible, and should maintain 2m physical distance insofar as possible. This provides for a safe teaching context, but where there is a risk that the 2m distance could be compromised a face covering or other appropriate protection should be used.

   e) In the event that tuition requires the staff member to be less than 2m from learners, extra precautions are required. In such situations, staff should wear face shields, visors or other protective equipment which will be provided by the ETB. ETB must ensure that the necessary safeguards and protections are in place in accordance with the risk assessment that has been carried out for the particular context.

   f) The maximum number of people allowed in a class will be in accordance with the prevailing public health guidance on indoor gatherings and it is recognised that this may change in accordance with the evolving COVID-19 situation nationally.

11. ETBs will arrange for systematic and orderly return of apprentices to training based on the two priority groups identified above. Each ETB training facility will develop its schedule in liaison with SOLAS, and in particular with reference to the capacity of each facility to accommodate apprentices, in line with public health guidelines.

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[5] more time to enter and exit may need to be considered therefore scheduling an hour class with a maximum of 40 minutes of tuition/instruction may support this or reducing numbers attending

[6] Confined to laboratory, workshops and practice rooms.

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12. As a matter of priority and on receipt of the capacity information from each ETB training facility, SOLAS will confirm the schedule for new apprentices to commence their Phase 2 training.

13. Communication with apprentices and their employers will be clear and comprehensive, shared on a pre-agreed basis by ETBs and SOLAS.

14. In advance of returning to or beginning training, all learners and apprentices will complete an induction on the new protocols in place in the FET Institution, e.g. PLC, Youthreach, Training Centre. Some or all of this induction may be completed online and in advance of learners and apprentices returning to the FET Institution.

15. Staggered start and finish times may be used to manage the inflow and outflow of learners apprentices to the FET Institution throughout the day / evening.

16. A range of measures may be used within the FET Institution to accommodate apprentice or other learner classes while adhering to the public health guidelines. Examples include prioritising space in centres where needed; splitting of classes into two groups, one for theory and one for practical; increased use of blended learning for theory elements and other measures as appropriate.

17. ETBs, in consultation with SOLAS, will optimise the use of blended learning for Phase 2 off-the-job training for apprentices. This aims to reduce the time apprentices are required to attend the FET Institution training facility and increase the volume of apprentices who can be accommodated completion of their off-the-job training. As co-ordinating provider for apprenticeship, SOLAS has confirmed, working with QQI, that blended learning approaches are appropriate and required as part of the response to the continuation of teaching learning and assessment during the response to the COVID-19 pandemic.

18. All learners should be reminded at the start of each session that they should leave if they have symptoms of COVID-19.

19. There is no maximum duration of a tuition session (for example a workshop, practical or laboratory).

20. From an IPC perspective if people spend 2 hours or more in a shared space together they may be regarded as COVID-19 contacts in the event that someone present is subsequently identified as a case.

21. FET Institutions must adhere to the cleaning protocols recommended by the Practical Guidance for Further and Higher Education for returning to on site activity issued by the Department.

22. Outsourced food service provision should conform to national guidance for food business operators.

23. Areas that support the consumption of food require particular attention to ensure that they are kept clean at all times.

24. Office hours should be organised to avoid learners waiting in groups and with appropriate arrangements for distancing and mask use in keeping with Public Health Guidance.

25. Teaching and learning activities should, use rooms capable of adhering to public health guidance.

26. Staff should develop rotas for use of self-catering facilities to ensure that distance can be maintained. Rotas should in so far as practical ensure consistent groups using facilities at the same time.

27. Where group work is required (for example among learners e.g. PLC Colleges, Youthreach and Training Centres) the groups should be as small as practical and in so far as practical the membership of groups should be consistent for as many activities as possible (pods) to minimise mixing of people.

Minimising Harm if the virus is introduced and spreads

There are three key elements to managing the risk of harm to members of the FET community if the virus is introduced and spreads. The first is the vulnerability of individual members of the FET community to develop severe disease. The FET Institution should ensure that appropriate arrangements are in place whereby staff or learners who are vulnerable can declare this to the FET Institution and the FET Institution should put specific measures in place as may be appropriate.

The second key element of reducing risk of harm is that the FET Institution has processes in place to identify as rapidly as practical if there is any evidence of spread of COVID-19 in the FET Institution and has a plan to respond appropriately.

The final element of harm reduction is timely access to good medical care for anyone who becomes infected.

Specific measures

1. The FET Institution should enhance programmes to promote a healthy lifestyle to the greatest extent possible.

2. The FET Institution should encourage members of the FET community to signal to a central point in the FET Institution early if they are diagnosed with COVID-19[7]. The intention is to support the FET Institution in identifying early if there is evidence of transmission of COVID-19 related to FET community activity so that it can respond appropriately in association with public health authorities.

3. Pathways for access to healthcare should be clear so that people are clear who to contact for access to healthcare at any time if they develop symptoms of illness.

4. Staff who consider themselves specifically at risk of severe illness, or with vulnerable members of their household, should engage with the ETB as their employer to manage that risk as appropriate.

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[7] confidentiality and data protection issues pertain

APPENDIX 1   COVID-19 Policy Statement

[FET Institution name] is committed to providing a safe and healthy workplace for all our staff and a safe learning environment for all our learners. To ensure that, we have developed the following COVID-19 Response Plan. The BOM/ETB and all staff are responsible for the implementation of this plan and a combined effort will help contain the spread of the virus. We will:

- continue to monitor our COVID-19 response and amend this plan in consultation with our staff
- provide up to date information to our staff and learners on the Public Health advice issued by the HSE and Gov.ie
- display information on the signs and symptoms of COVID-19 and correct hand-washing techniques
- agree with staff as per protocol, a lead worker representative who is easily identifiable to carry out the role outlined in this plan
- inform all staff and learners of essential hygiene and respiratory etiquette and physical distancing requirements
- adapt the facility to facilitate physical distancing as appropriate in line with the public health guidance
- keep a contact log to help with contact tracing
- ensure staff and learners engage with the induction / familiarisation briefing
- implement the agreed procedures to be followed in the event of someone showing symptoms of COVID-19 while at the facilities
- provide instructions for staff and learners to follow if they develop signs and symptoms of COVID-19 during the time they are at the facilities
- implement cleaning in line with HSE and GOV.ie advice

All staff will be consulted on an ongoing basis and feedback is encouraged on any concerns, issues, or suggestions. This can be done through the Lead Worker Representative(s).

Signed: _____ Date: _____

APPENDIX 2   Pre-Return to Work Questionnaire COVID-19

This questionnaire must be completed by staff **at least 3 days** in advance of returning to work.

If the answer is Yes to any of the below questions, you are advised to seek medical advice before returning to work.

Name: _____

Name of FET Institution: _____

Manager/Principal Name: _____   Date: _____

	Questions	YES	NO
1.	Do you have symptoms of cough, fever, high temperature, sore throat, runny nose, breathlessness, or flu like symptoms now or in the past 14 days?		
2.	Have you been diagnosed with confirmed or suspected COVID-19 infection in the last 14 days?		
3.	Have you been advised by the HSE that you are you a close contact of a person who is a confirmed or suspected case of COVID-19 in the past 14 days?		
4.	Have you been advised by a doctor to self-isolate at this time?		
5.	Have you been advised by a doctor to cocoon at this time?		
6.	Have you been advised by your doctor that you are in the very high-risk group? If yes, please liaise with your doctor and manager re return to work.		

I confirm, to the best of my knowledge that I have no symptoms of COVID-19, am not self-isolating, awaiting results of a COVID-19 test or been advised to restrict my movements. Please note: ETB is collecting this sensitive personal data for the purposes of maintaining safety within the workplace in light of the COVID-19 pandemic. The legal basis for collecting this data is based on vital public health interests and maintaining occupational health and will be held securely in line with our retention policy.

Signed: _____

APPENDIX 3 Lead Worker Representative – Further Education and Training

The COVID-19 Return to Work Safely Protocol is designed to support employers and workers to put measures in place that will prevent the spread of COVID19 in the workplace. The Protocol was developed following discussion and agreement between the Government, Trade Unions and Employers at the Labour Employer Economic Forum.

The Protocol provides for the appointment of a Lead Worker Representative (LWR) in each workplace. The LWR will work in collaboration with the employer to assist in the implementation of measures to prevent the spread of COVID -19 and monitor adherence to those measures and to be involved in communicating the health advice around COVID-19 in the workplace.

The purpose of this section is to set out the provisions in respect of the LWR in FET Institutions. These arrangements will operate for the 2020/21 school year and will be kept under review by the parties.

This document should be read in conjunction with:

- the COVID-19 Return to Work Safely Protocol;
- the Guidance and FAQs for Public Service Employers during COVID-19;
- Guidance for Further and Higher Education for returning to on-site activity in 2020: Roadmap and COVID-19 Adaptation Framework.

1. Collaborative Approach

Responsibility for the development and implementation of the COVID-19 Response Plan and the associated control measures lies with the Board of Management/ Education and Training Board FET Institution management.

Strong communication and a shared collaborative approach are key to protecting against the spread of COVID-19 in FET, and looking after the health, safety and wellbeing of staff and learners. Adherence to the Return to Work Protocol will only be achieved if everyone has a shared obligation in implementing the measures contained within the Protocol in their place of work.

If a staff member has any concerns or observations in relation to the COVID-19 Response Plan, control measures or the adherence to such measures by staff, learners, or others, they should contact the LWR who will engage with the management.

2. Role of the Lead Worker Representative

The role of LWR is separate to that of the Safety Representative under the health and safety legislation. However, the Safety Representative may act as the LWR if selected to do so by the staff.

In summary, the role of the LWR is to:

- Represent all staff in the workplace regardless of role, and be aware of specific issues that may arise in respect of different staff cohorts;
- Keep up to date with the latest COVID-19 public health advice;
- Work collaboratively with the management to ensure, so far as is reasonably practicable, the safety, health and welfare of employees in relation to COVID-19;
- Consult with the management on the control measures required to minimise the risk of staff and learners being exposed to COVID-19;
- Promote good hygiene practices, in conjunction with the management, such as washing hands regularly and maintaining good respiratory etiquette along with maintaining social distancing in accordance with public health advice;
- Assist the management with the implementation of measures to suppress COVID-19 in the workplace in line with the Return to Work Safely Protocol and current public health advice;
- Monitor, in conjunction with the management, adherence to measures put in place to prevent the spread of COVID-19;
- Conduct reviews of safety measures that are in place to address and suppress COVID-19 in the workplace. Reviews (including an examination of the workplace) should be conducted on a regular basis (at least twice per week);
- Report any issues of concern immediately to the management and keep records of such issues and actions taken to rectify them;
- Consult with the management on the COVID-19 Response Plan in the event of someone developing COVID-19 while in FET Institution including the location of an isolation area and a safe route to that area;
- Following any incident, assess with the management any follow up action that is required;
- Consult with colleagues on matters relating to COVID-19 in the workplace;
- Make representations to the management on behalf of their colleagues on matters relating to COVID-19 in the workplace.

3. What can a Lead Worker Representative Do?

The LWR may consult with, and make representations to, the management on any issue of concern in relation to COVID-19. These include issues in

relation to:

- Cleaning protocols and their implementation
- Physical Distancing
- Configuration/re-configuration of the facilities, including classrooms, corridors, halls, open areas, entry and exit points, grounds etc.
- Implementation of one-way systems to ensure social distancing including when entering and exiting the buildings.
- Hand Hygiene facilities including their location and whether they are stocked and maintained
- Hand sanitising
- Staff awareness around hand hygiene in the facility
- Respiratory hygiene
- Personal Protective Equipment
- At Risk Groups
- Visitors/Contractors

4. Does an LWR have any legal responsibilities?

No. A Lead Worker Representative does not have any duties in relation to COVID-19 other than those that apply to employees generally. In other words, the LWR is not responsible for the control measures within an organisation, which remains the employer's responsibility.

5. Lead Worker Representative(s)

A Lead Worker Representative will be appointed to an individual FET Institution or with a cluster of smaller FET delivery sites. In FET Institutions with more than 40 staff, a second Lead Worker Representative will be appointed.

6. Selection of Lead Worker Representative(s)

The staff are entitled to select staff members for the LWR position(s). The LWR(s) represent all staff in the workplace regardless of role and must be aware of specific issues that may arise in respect of different staff cohorts. In this regard, where a FET Institution has two LWRs, the roles should be spread between teaching and non-teaching staff where feasible e.g. where there is a significant number of

non-teaching staff in the school and one or more expressions of interest are received from that cohort (this will be discussed further between the parties).

The process for the selection and appointment of the LWR(s) is that management will seek expressions of interest from all staff in the first instance. A template email for this purpose is attached. If an election is necessary, all FET Institution staff have a vote to select the LWR(s).

The LWR(s) will, following selection by the staff, be formally appointed by the BoM/ETB. The LWR(s) will be required to confirm, prior to taking up the role, that they have been provided with and have completed the requisite training and that they are fully aware of the requirements of the role.

7. Supports for the Lead Worker Representative/s

The LWR(s) shall be entitled to:

- Be provided with information and training in respect of their role [further detail to be provided];
- Be consulted by the management on the control measures being put in place by the FET Institution to minimise the risk of being exposed to COVID-19;
- Regular communication with the management on issues related to COVID-19;
- Be informed of changes in practice arising from COVID-19 response measures;
- Have access to any risk assessments prepared or carried out in relation to COVID-19 and to details of incidents of suspected COVID-19 cases that have been notified to the HSE, where they occurred, and any actions taken.
- Be provided with the necessary facilities to enable them to consult with employees or prepare any submissions or reports. These might include access to a meeting room, photocopier, communications, and equipment.
- Where the LWR is an Instructor/Teacher/Tutor/Resource Worker they will receive protected time of 2 hours per week from timetable to enable them to carry out their duties in that role.
- Where the reduction to the timetable of the person selected for the LWR would cause difficulties in delivery which cannot be resolved, management will examine internal and external possibilities to enable the appointment to the role of LWR. Where the matter cannot be resolved, management will set out the reasons why this is the case. In this circumstance, an alternative individual must be appointed as LWR.

- Where the LWR is not directly involved in delivery of education and training, a re-prioritisation of duties by management should be carried out to afford the staff member sufficient time to carry out their duties in that role within the scope of their normal contracted hours.

8. Procedure for dealing with issues that arise

Where a COVID-19 control concern is identified by the LWR (or is notified to the LWR by a staff member), the LWR should bring this to the attention of the management of the FET Institution. Action points for addressing the issue should where possible be agreed between the LWR and the management of the FET Institution as a matter of urgency. Staff should be informed of the outcome. It is envisaged that issues will be resolved at FET Institution level to the maximum extent possible.

If agreement cannot be reached, the LWR should notify the ETB Director of FET of the issue. Action points for addressing the issue should where possible be agreed between the LWR and the BoM/ETB head office as a matter of urgency. Staff should be informed of the outcome.

If, having exhausted the process above, a serious issue of concern remains outstanding, the LWR may have recourse to the Health and Safety Authority.

9. Glossary of Terms

- **COVID-19 Response Plan:** plan designed to support the staff and BOM/ ETB in putting measures in place that will prevent the spread of COVID-19 in the FET Institution environment. The plan details the policies and practices necessary for a FET Institution to meet the Return to Work Safely Protocol, the Guidance and FAQs for Public Service Employers during COVID-19; Guidance for Further and Higher Education for returning to on-site activity in 2020: Roadmap and COVID-19 Adaptation Framework which are available on gov.ie website.

- **Labour Employer Economic Forum (LEEF):** the forum for high level dialogue between Government, Trade Union and Employer representatives on matters of strategic national importance - involves the Irish Congress of Trade Unions, Government & Employers.

- **Return to Work Protocol:** national protocol designed to support employers and workers to put measures in place that will prevent the spread of COVID19 in the workplace.

- **Safety Representative:** Section 25 of the Safety, Health and Welfare at Work Act 2005 sets out the selection and role of the Safety Representative in the workplace. The rights of the Safety Representative are set out in legislation. (Note: A Safety Representative has

rights and not duties under the 2005 Act). This role is separate to the LWR under COVID-19, but the Safety Representative may act as the LWR if selected to do so by the staff.

TEMPLATE EMAIL TO STAFF REGARDING LEAD WORKER REPRESENTATIVE APPOINTMENT PROCESS

Dear All,

As you will be aware, significant work and consultation has taken place to enable a return to education and training from the beginning of the 2020/21 school year.

The resumption of FET Institution facility-based teaching and learning and the return to the workplace of staff must be done safely and in strict adherence to the advice and instructions of public health authorities and the Government.

The COVID-19 Return to Work Safely Protocol is designed to support employers and workers to put measures in place that will prevent the spread of COVID19 in the workplace. The Protocol was developed following discussion and agreement between the Government, Trade Unions and Employers at the Labour Employer Economic Forum. In addition, every FET Institution has a COVID-19 Response Plan in place.

The Return to Work Safely Protocol provides for the appointment of a Lead Worker Representative (LWR) in each workplace.

The LWR will work in collaboration with the employer to assist in the implementation of measures to prevent the spread of COVID -19 and monitor adherence to those measures and to be involved in communicating the health advice around COVID-19 in the workplace.

A copy of the COVID-19 Response Plan is attached, and this includes further detail on the role of the Lead Worker Representative.

In this FET Institution, there are (1 or 2 – delete as appropriate) Lead Worker Representative positions.

Under the Protocol, the staff are entitled to select staff members for the LWR position(s). In this regard, I am now inviting expressions of interest from staff for these positions, by return email.

The LWR(s) represents all staff in the workplace regardless of role and must be aware of specific issues that may arise in respect of different staff cohorts.

Where a FET institution has two LWRs, the roles should be spread between teaching and non-teaching staff where feasible e.g. where there is a significant number of non-teaching staff in the FET Institution and one or more expressions of interest are received from that cohort.

Training for the role will be provided.

If an election is necessary, all staff have a vote to select the LWR(s). Further details on this process will be sent to you if this arises. Following selection by the staff, the LWR(s) will be formally appointed. The LWR details will be sent to all staff following their appointment.

Yours sincerely,

_____

APPENDIX 4 Risk Assessment

COVID-19 Risk Template (List identifies COVID-19 as the hazard and outlines control measures required to deal with this risk)

Hazards	Is the hazard present? Y/N	What is the risk?	Risk Rating H=High M=Medium L=Low	Controls (When all controls are in place risk will be reduced)	Is this control in place?	Action/ to do list/ outstanding controls *Risk rating applies to outstanding controls outlined in this column	Person responsible
COVID-19	N	Illness	H	Covid19 Response Plan in place in line with the Return to Work Safely Protocol and public health advice		Examples of Actions − Follow public health guidance from HSE re hygiene and respiratory etiquette − Complete COVID-19 Policy Statement − Return to Work Forms received and reviewed. − Undertake Induction Training. − Maintain log of staff, learner and visitors − Complete checklists as required: • Management • How to deal with a suspected case • Physical distancing	

If there are one or more High Risk (H) actions needed, then the risk of injury could be high and immediate action should be taken. Medium Risk (M) actions should be dealt with as soon as possible. Low Risk (L) actions should be dealt with as soon as practicable.

Risk Assessment carried out by: _____

Date: _____

APPENDIX 5 Contact Tracing Log

This data is being collected at the direction of the HSE and will only be used for the purpose of Covid-19 contact tracing and for no other purpose. It will be retained for no longer than 3 months.

Name (Print)	Mobile Number	Internal Contact	Time In	Time Out

APPENDIX 6 Checklist for Management

This checklist supports planning and preparation, control measures and induction needed to support a safe return to education facilities for learners, staff, and others.

For completion by the agreed person with overall responsibility of managing the implementation of the COVID-19 Response plan within a FET Institution or cluster of smaller FET sites (with supports as agreed with the ETB).

Planning and Systems

1.   Is there a system in place to keep up to date with the latest advice from Government and DES, to ensure that advice is made available in a timely manner to staff and learners and to adjust your plans and procedures in line with that advice?

2.   Have you appointed staff member/s to the Lead Worker Representative (LWR) position in accordance with the agreed protocol?

3.   Have you advised staff as to who has been appointed to the position of LWR?

4.   Have you prepared a COVID-19 response plan and made it available to staff and learners?

5.   Have you a system in place to provide staff and learners with information and guidance on the measures that have been put in place to help prevent the spread of the virus and what is expected of them?

6.   Have you displayed the COVID-19 posters in suitable locations highlighting the signs and symptoms of COVID-19?

7.   Have you told staff and learners of the purpose of the COVID-19 contact log?

8.   Have you a COVID-19 contact log in place to support HSE tracing efforts if required?

9.   Have you informed staff on the measures that have been put in place to help prevent the spread of the virus and what is expected of them, and provided a system for them to raise issues or concerns and to have them responded to?

10.   Have you reviewed and updated risk assessments in line with Department advice to take account of any controls to help prevent the spread of COVID-19?

11.   Have you updated emergency plans, in particular to take account of the COVID response plan?

Staff

12.   Have you made available to each staff member a COVID-19 return-to-work form to be completed and returned 3 days before they return to the workplace?

13. Are you aware of staff members who are at <u>very high risk under the HSE guidance</u> on people most at risk and advised them of the ETB agreed arrangements for management of those staff?

14. Have you advised staff and learners they must stay at home if sick or if they have any <u>symptoms of COVID-19</u>?

15. Have you told staff and learners what to do and what to expect if they start to develop symptoms of COVID-19 while at FET Institutions, including where the isolation area is?

Training and Induction

16. Have you advised staff and learners to view <u>the Department of Education's training materials</u> which are available online?

17. Have you taken the necessary steps to update your induction / familiarisation training to include all information relating to COVID-19?

18. Have first aiders, if available, been given updated training on infection prevention and control re hand hygiene and use of PPE as appropriate?

Buildings / Equipment

19. If you have mechanical ventilation does it need cleaning or maintenance before the facilities reopens?

20. Does your water system need flushing at outlets following low usage to prevent Legionnaire's Disease?

21. Have you visually checked, or had an appropriate person check, all equipment in the facility for signs of deterioration or damage before being used again?

22. Have you arranged for the facility including all equipment, desks, benches, doors, and frequently touched surfaces points, been thoroughly cleaned before reopening?

Control Measures in place

Hand / respiratory hygiene

23. Have you accessed supplies of hand sanitizers and any necessary PPE equipment in line with the <u>HPSC health guidance relating to the reopening of schools and educational facilities</u>, from the supply agreement provided by the Department? This supply agreement close to being finalised and will be available for drawdown with guidance as to how and what to order accompanying it.

24. Are there hand washing/hand sanitising stations in place to accommodate staff, learners and visitors adhering to hand hygiene measures in accordance with Department guidance?

25. Have arrangements been made for staff and learners to have regular access to handwashing/hand sanitising facilities as appropriate?

26. Are hand sanitisers easily available and accessible for all staff, learners, and visitors – e.g. in each classroom and at entry and exit points to the buildings?

27. Have you made arrangements to ensure hand hygiene facilities are regularly checked and well-stocked?

28. Does the alcohol-based hand sanitiser have at least 60% ethanol or 70% isopropanol as the active ingredient?

29. Have you informed staff and learners about the importance of hand washing?

30. Have you arranged for staff and learners to view how to wash their hands (with soap and water for at least 20 seconds) and dry them correctly through the use of the HSE video resource?

31. Have you shown staff and learners how to use hand sanitiser correctly and where hand-sanitising stations are located?

32. Have you displayed posters on how to wash hands correctly in appropriate locations?

33. Have you told staff and learners when they need to wash their hands or use hand sanitiser? This includes:
   ➢ before and after eating and preparing food
   ➢ after coughing or sneezing
   ➢ after using the toilet
   ➢ where hands are dirty
   ➢ before and after wearing gloves
   ➢ before and after being on public transport
   ➢ before leaving home
   ➢ when arriving/leaving the facilities /other sites
   ➢ after each class
   ➢ after touching potentially contaminated surfaces
   ➢ if in contact with someone displaying any COVID-19 symptoms

34. Have you told staff and learners of the importance of good respiratory measures to limit the spread of the virus, including?
   ➢ avoid touching the face, eyes, nose, and mouth
   ➢ cover coughs and sneezes with an elbow or a tissue
   ➢ dispose of tissues in a covered bin

Physical Distancing:

35. Have you identified all available facilities space to be used to maximise physical distancing?

36. Have you arranged to revise the layout of the rooms and furniture?

37. Have you arranged in each room of the FET Institution so that staff desk are where possible 2 metres away from learners' desks?

38. Have you arranged in each room that learners are 2 metres away from each other where possible?

39. Have you where possible and practicable assigned learners to main group cohorts to minimise the risk of infection from COVID-19?

40. Have you made arrangements to limit interaction on arrival and departure from FET Institution and in other shared areas?

41. Have you made arrangements, in so far as possible, to open additional access points to reduce congestion?

42. Can you provide a one system for entering and exiting the building, where practical?

43. Have you arranged for staff meetings to be held remotely or in small groups or in large spaces to facilitate physical distancing?

44. Have you taken steps to minimise rotation of staff between classes where possible?

45. Have you a system to regularly remind staff and learners to maintain physical distancing?

46. Have you advised staff and learners not to shake hands and to avoid any physical contact?

47. Have you stopped all non-essential travel for learner activities?

Visitors to FET Institutions

48. Have you identified the activities that involve interacting with essential visitors to facilities, made arrangements to minimise the number of such visitors and put in place measures to prevent physical contact, as far as possible?

49. Are there arrangements in place to inform essential visitors to facilities of the measures to help prevent the spread of infection?

50. Have you a system in place for all visitors who do need to come to the facilities to make appointment, arrange to contact a central point and to record their visit using the contact tracing log?

APPENDIX 7 Checklist for dealing with a suspected case of COVID-19

Each main group / cohort should be considered a separate group for the purpose of managing suspected cases. Each staff member will be required to manage a suspected case in line with the protocol and training.

A nominated member of the management team will be responsible for ensuring that all aspects of the protocol to deal with suspected cases have been adhered to.

Isolation Area

1. Have you identified a place that can be used as an isolation area, preferably with a door that can close?

2. The isolation area does not have to be a separate room but if it is not a room it should be 2m away from others in the room.

3. Is the isolation area accessible, including to staff and learners with disabilities?

4. Is the route to the isolation area accessible?

5. Have you a contingency plan for dealing with more than one suspected case of COVID-19?

6. Are the following available in the isolation area(s)?

    - Tissues

    - Hand sanitiser

    - Disinfectant/wipes

    - Gloves/Masks

    - Waste Bags

    - Bins

Isolating a Person

7. Are procedures in place to accompany the infected person to the isolation area, along the isolation route with physical distancing from them?

8. Are staff familiar with this procedure?

9. Have others been advised to maintain a distance of at least 2m from the affected person at all times?

10. Is there a disposable mask to wear for the affected person while in the common area and when exiting the building?

Arranging for the affected person to leave the FET Institution

11. Staff – have you established by asking them if the staff members feel well enough to travel home?

12. Learner – have you established by asking them if the learner feels well enough to travel home? Under no circumstances can a learner use public transport to travel home if they are a suspected case of COVID-19.

13. The affected person should be advised to avoid touching other people, surfaces and objects.

14. The affected person should be advised to cover their mouth and nose with disposable tissue(s) when they cough or sneeze, and to put the tissue in the bin.

15. Has transport home or to an assessment centre been arranged if the affected person has been directed to go there by their GP?

16. Has the affected person been advised not to go to their GP's surgery or any pharmacy or hospital?

17. Has the affected person been advised they must not use public transport?

18. Has the affected person been advised to continue wearing the face mask until they reach home?

Follow up

19. Have you carried out an assessment of the incident to identify any follow-up actions needed?

20. Have you advised the LWR of the incident in accordance with the agreed protocol?

21. Are you available to provide advice and assistance if contacted by the HSE?

Cleaning

22. Have you taken the isolation area out-of-use until cleaned and disinfected?

23. Have you made arrangements to clean and disinfect any classroom space where the staff or learners were located?

24. Have you arranged for cleaning and disinfection of the isolation area and any other areas involved, as soon as practical after the affected person has left the building?

25. Have the cleaners been trained in dealing with contaminated areas and supplied with the appropriate PPE?

APPENDIX 8 Checklist Lead Worker Representative

1. Have you been selected by your colleagues on the staff and have you agreed with the ETB management of your FET Institution to act as a Lead Worker Representative?

2. Have you been provided with information and training in relation to the role of Lead Worker Representative? (*Training for this role is currently being explored with the HSA).*

3. Are you keeping up to date with the latest COVID-19 advice from Government?

4. Are you aware of the signs and symptoms of COVID-19?

5. Do you know how the virus is spread?

6. Do you know how to help prevent the spread of COVID-19?

7. Have training supports been provided to you to support you in this role?

8. Have you been made aware of the control measures your FET Institution has put in place to minimise the risk of you and others being exposed to COVID-19?

9. Are you helping in keeping your fellow workers up to date with the latest COVID-19 advice from Government?

10. Have you completed the COVID-19 return-to-work form and given it to your FET Institution? *(FET template Return-to-Work form available)*

11. Are you aware of the control measures your ETB has put in place to minimise the risk of you and others being exposed to COVID-19? (*Checklist for FET Management available)*

12. On behalf of the employer did your line manager consult with you when putting control measures in place. Consultation at ETB level should take place on any specific local arrangements necessary to implement the protocol.

13. Have you a means of regular communication with the management of your FET Institution and where applicable any other person with overall responsibility for the ETB COVID-19 plan?

14. Are you co-operating with your ETB to make sure these control measures are maintained?

15. Have you familiarised yourself with the cleaning requirements needed to help prevent cross contamination? (*Checklist for Cleaning available*)

16. Have you been asked to walk around and check that the control measures are in place and are being maintained?

17. Are you reporting immediately to the appropriate person within the management of the FET Institution that holds overall responsibility for the ETB COVID-19 plan any problems, areas of non-compliance or defects that you see?

18. Are you keeping a record of any problems, areas of non-compliance or defects and what action was taken to remedy the issue?

19. Are you familiar with what to do in the event of someone developing the symptoms of COVID-19 while at the FET Institution?

20. Are you co-operating with your ETB and FET Institution in identifying an isolation area and a safe route to that area? (*Checklist for dealing with suspected case of COVID-19 available*)

21. Are you helping in the monitoring and keeping under review the management of someone developing symptoms of COVID-19 while at the facility?

22. Once the affected person has left the facility, are you helping in assessing what follow-up action is needed?

23. Are you helping in maintaining the staff and learner contact log?

24. Have you been made aware of any changes to the emergency plans or first aid procedures for your FET Institution?

25. Are you making yourself available to fellow staff to listen to any COVID-19 control concerns or suggestions they may have?

26. Are you raising those control concerns or suggestions with your manager and feeding back the response to the staff member/s who raised the issue?

27. Have you been provided by the management with the supports to which you are entitled in your role as Lead Worker Representative?

APPENDIX 9 Checklist for Cleaning

1. FET Institutions should adhere to the cleaning protocols recommended by the Practical Guidance for Further and Higher Education for returning on site activity issued by the Department.

2. Have you a system in place for checking and keeping up to date with the latest public health advice from Government and the Department of Education, to ensure that advice is made available in a timely manner to staff and learners and to adjust your cleaning procedures in line with that advice?

3. Have you reviewed the HPSC health advice for the safe re-opening of, in particular *Section 5.6 Environmental Hygiene*?

4. Have you explained the need for the enhanced cleaning regime to staff and learners?

5. Are you aware that cleaning is best achieved using a general-purpose detergent ad warm water, clean cloths, mops and the mechanical action of wiping and cleaning, following by rinsing and drying?

6. Have you sufficient cleaning materials in place to support the enhanced cleaning regime?

7. Have you provided training for cleaning staff on the enhanced cleaning regime?

8. Have you made arrangements for the regular and safe emptying of bins?

9. Are you familiar with the cleaning options for education settings set out in the HPSC health advice for education settings for surfaces, toilets, cleaning equipment, PPE and waste management?

10. Are you aware that each FET Institution/setting should be cleaned once per day?

11. Have you in place a system for regular cleaning of the following frequently touched surfaces?
    - Door handles,
    - Handrails
    - Chairs/arm rests
    - Communal eating areas
    - Sinks
    - Toilets facilities

12. Have you provided cleaning materials to staff and learners so that they can clean their own desk or immediate workspace?

13. Have you advised staff that they are responsible for cleaning personal items that have been brought to work and are likely to be handled at work or during breaks? E.g. mobile phone laptop and to avoid leaving them down on communal surfaces or they will need to clean the surface after the personal item is removed.

14. Have you advised staff and learners to avoid sharing items such as cups, bottles, cutlery, pens?

15. Have you put in place a written cleaning schedule to be made available to cleaning staff including:

- Items and areas to be cleaned

- Frequency of cleaning

- Cleaning materials to be used

- Equipment to be used and method of operation

16. Details of how to clean following a suspected case of COVID-19 are at Appendix 8. *(can be added here again if considered useful)*

17. If disinfection of contaminated surfaces is required, is a system in place to do this following cleaning?

18. If cleaning staff have been instructed to wear gloves when cleaning, are they aware of the need to wash their hands thoroughly with soap and water, both before and after wearing gloves?

19. Have you a system in place for the disposal of cleaning cloths and used wipes in a rubbish bag? *Current HSE guidance recommends waste such as cleaning waste, tissues etc. from a person suspected of having COVID-19 should be double bagged and stored in a secure area for 72 hours before being presented for general waste collection.*

20. Have you ensured there is a system in place to make sure reusable cleaning equipment including mop heads and non-disposable cloths are clean before re-use?

21. Have you ensured there is a system in place to ensure that equipment such as buckets are emptied and cleaned with a fresh solution of disinfectant before re-use?

22. Have you ensured there is a system in place to ensure that equipment such as buckets are emptied and cleaned with a fresh solution of disinfectant before re-use?