

**COVID-19 Return to Work Protocol – Employer Checklist No. 4**  
**Dealing with a Suspected Case of Covid-19**

These checklists have been prepared to help employers, owners and managers to get their business up and running again in a way that will help prevent the spread of COVID-19. 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)

No	Control	Yes/No	Action needed
	<b>Procedures and Information</b>		
1.	Have you a system in place to identify and isolate workers or others who start to display symptoms of COVID-19 in the workplace?		
2.	Have you a COVID-19 contact / group work log in place to facilitate contact tracing?		
3.	Have you informed workers of the purpose of the log?		
4.	Have you consulted with workers <sup>1</sup> on the purpose of the isolation procedure and when it should be used?		
5.	Have you displayed the COVID-19 posters in suitable locations highlighting the <a href="#">signs and symptoms of COVID-19</a> ?		
	<b>Instructions if a person(s) develops signs and symptoms of COVID-19 at work</b>		
6.	Have you instructed your workers about what they need to do if they develop signs and symptoms at work?		
7.	Have you provided your workers with up to date public health information on COVID-19 issued by the <a href="#">HSE</a> , <a href="#">HPSC</a> and <a href="#">GOV.ie</a> ?		
	<b>Reporting</b>		
8.	Have you made your workers aware of reporting procedures if they develop signs and symptoms at work for COVID-19?		
	<b>Response team</b>		
9.	Have you appointed a manager to deal with any suspected case of COVID-19?		
10.	Have you allocated workers to support a response team(s) to deal with a suspected case of COVID-19 in the workplace and trained this team in what actions to take?		
	<b>Isolation area(s)</b>		
11.	Have you identified a place that can be used as an isolation area, preferably with a door that can be closed, in the event of a suspected case of COVID-19?		
12.	Is this isolation area accessible, including to workers with disabilities?		
13.	Is the route to the isolation area accessible?		
14.	Have you a contingency plan for dealing with more than one suspected COVID-19 case? e.g. If more than one person is displaying signs and symptoms of COVID-19, are there additional isolation		

<sup>1</sup> and Trade Unions were applicable

	areas?		
15.	<p>Are the following available in the isolation area(s)?</p> <ul style="list-style-type: none"> <li>• ventilation, e.g. fresh air ventilation/ability to open a window</li> <li>• tissues</li> <li>• hand sanitiser</li> <li>• disinfectant and/or wipes</li> <li>• gloves, masks</li> <li>• waste bags</li> <li>• pedal-operated, closed bin</li> </ul>		
	<b>Isolating a person(s) displaying COVID-19 symptoms</b>		
16.	Are procedures in place for the manager or a member of the isolation team to accompany the affected person to the isolation area, along the isolation route, while maintaining physical distancing (2 metres) from them?		
17.	Is the manager and response team familiar with this procedure?		
18.	Have others been advised to maintain a distance of at least 2 metres from the affected person at all times?		
19.	Is there a disposable mask available for the affected person to wear while in a common area and when exiting the building?		
	<b>Arranging for the person to leave workplace/Exit Strategy</b>		
20.	Have you established, by asking them, if the affected person feels well enough to travel home?		
21.	If the affected person considers themselves able to travel home, have you directed them to do so and to call their GP and self-isolate at home?		
22.	If the affected person feels unable to go home, has the manager/isolation team let them remain in isolation, and enabled them to call their GP?		
23.	Has the affected person been advised to avoid touching other people, surfaces and objects?		
24.	Has the affected person been advised to cover their mouth and nose with the disposable tissue(s) provided when they cough or sneeze, and to put the tissue in the waste bag provided?		
25.	Has transport home or to an assessment centre been arranged if the affected person has been directed to go there by their GP?		
26.	Has the affected person been advised not to go to their GP's surgery or any pharmacy or hospital?		
27.	Has the affected person been advised they must not use public transport?		
28.	Has the affected person been advised to continue wearing the face mask until they reach home?		
	<b>Follow-up</b>		
29.	Have you carried out an assessment of the incident to identify any follow-up actions needed?		

30.	Are you available to provide advice and assistance if contacted by the HSE?		
	<b>Disinfection</b>		
31.	Have you taken the isolation area and any work areas where the person was involved out-of-use until cleaned and disinfected?		
32.	Have you arranged for cleaning and disinfection of the isolation area and any work areas involved, at least one hour after the affected person has left the building?		
33.	Have the cleaners been trained in dealing with contaminated areas and supplied with the appropriate PPE?		
	<b>Additional Information</b>		

**Name.....signature.....Date.....**

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