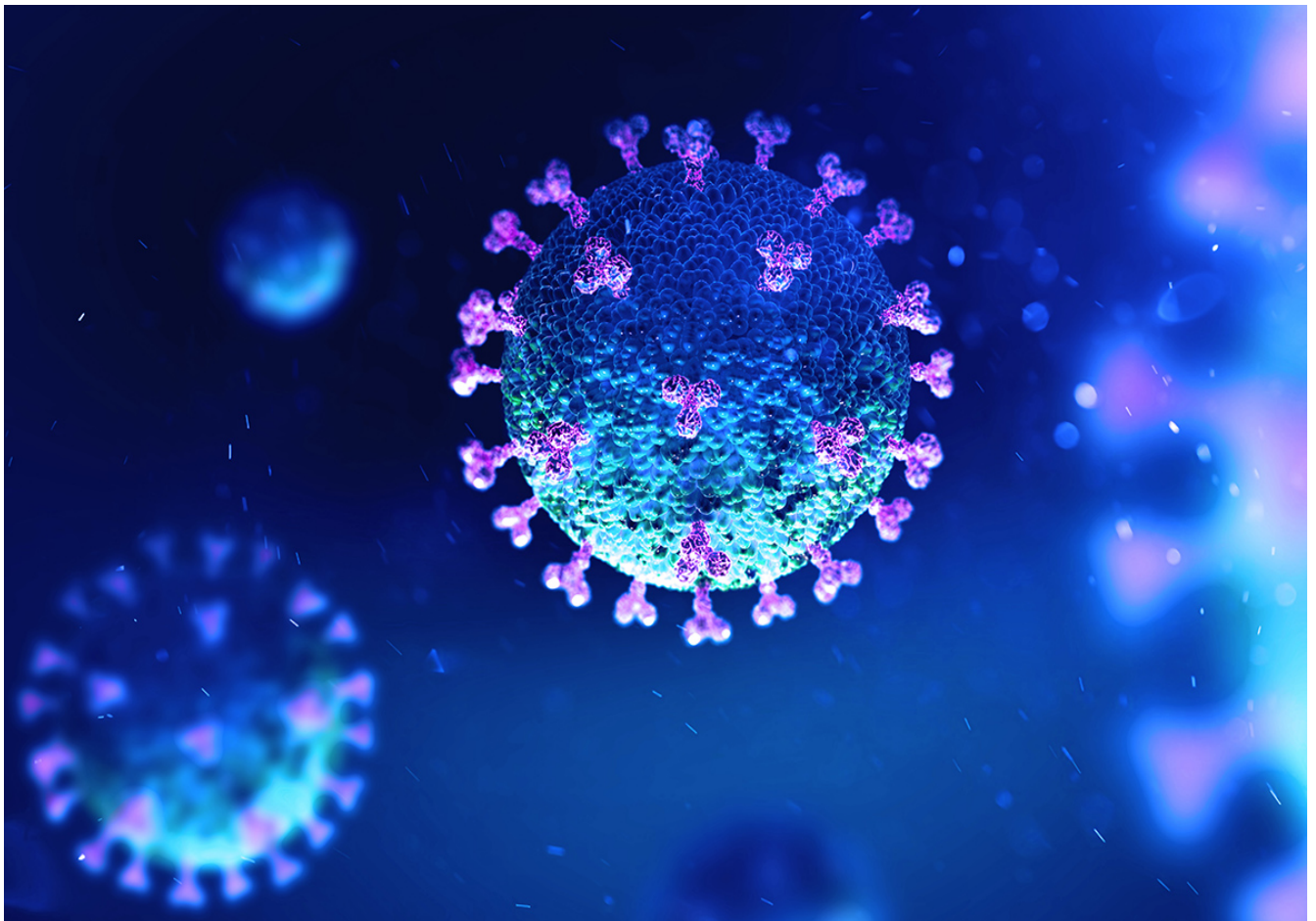




VICTORIAN BUILDING AND CONSTRUCTION INDUSTRY CORONAVIRUS (COVID-19) AGREED GUIDELINES (REVISION 12) 23 April 2021



PREAMBLE AND CONTEXT

Coronavirus

Coronaviruses are a large family of viruses that cause respiratory infections. These can range from the common cold to more serious diseases. Coronavirus (COVID-19) is a disease caused by a new form of coronavirus. It was first reported in December 2019 in Wuhan City in China. Other coronaviruses include Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS).

How does coronavirus (COVID-19) spread?

Health authorities around the world believe the coronavirus (COVID-19) is spread from close contact with an infected person, mostly through face-to-face contact or between members of the same household. The coronavirus (COVID-19) is spread by people with symptoms when they cough or sneeze. People may also pick up the coronavirus (COVID-19) from surfaces contaminated by a person with the infection.

Since late 2020, new and more contagious variants of the coronavirus have been detected in Australia, coming from the UK, South Africa and other countries. Health Authorities have established that these new variants are more likely to be spread via aerosol transmission and these guidelines have been amended to enhance the precautions and provide guidance to minimize this risk.

Does COVID-19 survive on surfaces?

Studies suggest that COVID-19 may persist on surface for a few hours or up to several days. This may vary under different conditions such as the type of surface, temperature or humidity of the environment.

What are the symptoms?

A coronavirus infection can cause mild to severe respiratory illness. The most common coronavirus (COVID-19) symptoms reported are:

- fever
- breathing difficulties and breathlessness
- cough
- sore throat
- fatigue or tiredness.
- loss of taste and smell

Coronavirus (COVID-19) is most likely to spread from person-to-person through:

- Close contact with an infected person.
- Touching objects or surfaces (such as door handles or tables) contaminated by a person with the infection.

Definitions of Close Contact*

A Primary Close Contact is

- someone who has had face to face contact or spent time in a closed space with someone who has coronavirus (COVID-19) while they were infectious
- someone who has been in an outbreak or other setting where there is a higher risk of transmission of coronavirus (COVID-19)

A Secondary Close Contact is

- someone who has had face to face contact with a Primary Close Contact at least 24 hours after them being exposed to coronavirus (COVID-19)

The Chief Health Officer or Deputy may also identify someone as a Primary or Secondary close contact based on what is known about a particular case or outbreak. Definitions are taken from DHHS website at <https://www.coronavirus.vic.gov.au/what-do-if-you-are-close-contact>

State of Emergency and DHHS Restrictions (Roadmap)

A State of Emergency was declared in Victoria on 16 March 2020 to manage coronavirus (COVID-19) and has now been extended to midnight 7 May 2021. This provides the Chief Health Officer with additional powers to issue directions to help contain the spread of COVID-19 and keep Victoria safe. In line with National Cabinet decisions, the Victorian Government is progressively reviewing its directions and community restrictions.

- Full details of these restrictions can be found at

<https://www.coronavirus.vic.gov.au/coronavirus-covidsafe-settings>

COVIDSafe Plan

All building and construction industry sites must have a COVIDSafe Plan that is regularly updated.

Where practicable, COVIDSafe Plans should be designed with input from workers and their Health and Safety Representatives. Full details, a link to the plan and explanatory notes can be found at <https://www.coronavirus.vic.gov.au/covidsafe-plan>

Accordingly, these Guidelines have been reviewed in light of those directions and advice from the Victorian Chief Health Officer. Employers and workers are reminded to not be complacent about the restrictions and Guidelines currently in place and to read this Industry Guideline document in conjunction with the Department of Health Directions and Victorian Government Business Restrictions.

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1.0 PURPOSE

These Guidelines have been adopted and agreed by the Victorian Building and Construction Unions and Employer and Industry Associations. The Guidelines have also been endorsed by the Building Industry Consultative Council. These Guidelines will be regularly updated to reflect changes resulting from Government announcements, directions of the Victorian Chief Health Officer and best practices.

1.1 The purpose of these Guidelines for the Building and Construction industry in Victoria, is to:

- Provide direction to employers and workers
- Outline the steps to be taken to best provide a safe and healthy environment, and
- Identify the action available in the event of interruption to building and construction work, as a result of the coronavirus (COVID-19) pandemic.

1.2 These Guidelines incorporate guidance issued by the Victorian Government, WorkSafe, the Victorian Department of Health (DH) and the Department of Jobs, Precincts and Regions (DJPR).

1.3 The Guidelines are intended to have application across all sectors of the building and construction industry. Construction sites are diverse and vary in complexity. To allow for flexible interpretation of these Guidelines, it is recommended that employers apply a risk-based approach and implement reasonably practical controls based on the environment and specific hazards at each construction site.

2.0 BACKGROUND

2.1 A working party of Building and Construction Industry Unions and Industry Associations, with the support of the Victorian Government, requested that the Victorian Building Industry Disputes Panel facilitate discussions with the participants for the purposes of preparing a set of Guidelines. This has been a collaborative effort on behalf of all participants.

2.2 The Building and Construction industry in Victoria is essential to the health of the Victorian economy. The Victorian Government is committed to supporting the industry and has recognized the vital role it will play in rejuvenating the economy. These Guidelines have been developed to maintain the safe operation of construction sites, ensuring the safety of workers and to assist the Government in maintaining a strong building and construction industry.

2.3 Various Victorian Government announcements are being made in response to coronavirus (COVID-19) for health directions and stimulus packages. Where required these Guidelines will be updated accordingly.

2.4 Following these Guidelines is necessary to minimize and avoid the closure of any construction site. No site or workforce should be shutdown, unless instructed by the Victorian Chief Health Officer or Representative.

2.5 The Guidelines apply to all personnel attending on a building and construction site or project, whether management, staff, employees, contractors or service providers.

Ongoing confidence and certainty in the building and construction industry is vital during these unprecedented times. It is essential that there is a focus on ensuring a pipeline of work is in place for the building and construction industry to ensure the workplaces are safe, jobs are kept, and businesses remain in place. It is therefore essential that decisions made in relation to building and construction sites, are made in the context of a rigorous understanding of both the environment in which people work and the controls that are currently in place or being implemented to ensure the safety of workers.

3.0 CONTROLLING RISKS ON SITE

To assist with providing and maintaining safe operations during coronavirus (COVID-19) the below measures should be implemented to assist in providing a safe and healthy environment at work.

Ensure that each employer has a compliant COVIDSafe plan, incorporating

- Screening workers coming to site
- Workplace Mapping
- Physical Distancing
- Density Quotients
- Hygiene
- Shared Tools, Plant and Equipment
- Cleaning and Disinfecting
- Personnel Hoists
- Personal Protective Equipment and Face Masks
- Common Areas
- Inspections
- Travel
- General Communications
- Vulnerable workers
- Temperature screening

3.1 Screening workers coming to site

3.1.1 To minimise the risk of transmission of coronavirus (COVID-19) on site, employers must implement a two-phase screening process; phase one being an initial declaration and phase two on going daily screening.

3.1.2 Initial declaration is to be conducted by all workers (this includes any person who attends site), including current and new-starters. Each worker must provide a declaration that they to the best of their knowledge:

- have not been diagnosed with coronavirus (COVID-19) in the last 14 days, or
- are not in a period of 14 day quarantine as directed by a health professional, or
- have not been overseas in the last 14 days, or
- have not been in contact with anyone who has coronavirus (COVID-19), or
- have not been in contact with anyone who is currently being tested for coronavirus (COVID-19), or
- do not have anyone in their household who has symptoms consistent with COVID-19.
- have not been to any Department of Health nominated public exposure site directed to either self isolate for a 14 day period or to get tested and await a negative result (in which case, they must not be permitted to work)

If a worker declares any of the above they will not be granted access to site and will be required to produce evidence of a negative COVID-19 test within the last 5 days, prior to commencing work.

3.1.3 Once the initial declaration has been made by the worker, ongoing screening (phase 2) should be conducted for every worker prior to the start of their shift, asking to the best of their knowledge:

- have they been in contact with anyone who has coronavirus (COVID-19), or
- have they been in contact with anyone who is currently being tested for coronavirus (COVID-19), or
- do they have anyone in their household who has symptoms consistent with COVID-19

- have they been to any Department of Health nominated public exposure site directed to either self isolate for a 14 day period or to get tested and await a negative result (in which case, they must not be permitted to work)

If a worker declares any of the above they will not be granted access to site and will be required to produce evidence of a negative COVID-19 test within the last 5 days prior to commencing work.

3.1.4 Screening should be conducted, whilst maintaining safe distances or over the phone before entering site, on a mobile app, via text message system, or other non-contact methods. It is advisable to have a system in place that limits the sharing of pens/ notebooks/ computers etc.

3.1.5 All travelers returning from overseas to Victoria will be placed in Government enforced quarantine for a period of 14-days. If a worker has recently had close contact with a confirmed case, they need to:

- self-isolate at home for a period of 14 days and follow the self-isolation Guidelines
- not attend work
- contact their employer
- seek urgent medical attention if they have symptoms consistent with COVID-19
- not return to work until they have been cleared by a medical practitioner.

3.1.6 If a worker is experiencing symptoms consistent with COVID-19 or had close contact with a confirmed case, they must:

- not attend work
- contact their employer for further advice and;
- not return to work until they have been cleared by a medical practitioner.

Refer to section 9.0 for a flow chart of the Screening and Self Isolation process

3.1.7 Temperature testing is an identification measure to reduce the risk of workplace infections. Temperature testing before admission to site is an important measure that will assist in keeping coronavirus (COVID-19) out of building and construction sites. In consultation with the workforce, temperature testing should be introduced in accordance with the protocol (see Attachment 9.6). These agreed industry protocols are the minimum requirements for company Temperature Screening.

3.1.8 Thermal Body Imaging may be installed as an adjunct to Temperature testing or as a stand alone method to assist with screening the temperature of workers coming to site. Consultation is required before implementation of this method.

3.2 Workplace Mapping

In the event of an employee being confirmed as having COVID-19, those who are potentially affected need to be quickly identified. Employers must implement processes to record the schedule and work locations for workers that enables tracing of those who have come into contact with the confirmed case. This may include contactless or electronic means to obtain this information, the implementation of which is subject to consultation with the affected workforce and/or their representatives. There are several examples of electronic mapping and tracing apps/devices in the market that are available for use in our industry.

The Victorian Government also offers free access to businesses of a QR Code service, which can be accessed at <https://www.coronavirus.vic.gov.au/victorian-government-qr-code-service>

Employers using commercial electronic contactless tracing systems are encouraged to use providers who are connected to the Government's QR Code Service. In consultation with industry, a visitation application programming interface (API) has been developed to allow commercial QR code systems to

'speak' with Victoria's Department of Health (DH) contact tracing system. This enables contact tracers to quickly access check-in data from private provider QR code systems.

Employers should ask their provider if they provide this facility or can check if their QR code provider has connected to the Government's API by visiting coronavirus.vic.gov.au/visitationAPI.

Each employer MUST ensure that whatever system or process is in place, as a minimum, that the records are immediately available at all times must include:

- day and time work was undertaken
- the person's first name and contact number
- members of teams that worked together
- specific work area on the construction site
- any breaks taken, including time and location

Movement between sites, or areas within large sites, should be minimised as much as possible. Where attending multiple sites is necessary (eg for Health and Safety Representatives, first aiders, emergency wardens) movement between sites should be recorded in the workplace mapping. It is acknowledged that the Federal Government's CovidSafe App may assist in the mapping of contact with other employees in the event of a positive case.

3.3 Physical Distancing.

Physical distancing of at least 1.5 metres should be implemented wherever possible. Employers should consider each work task and whether there is a safe alternative way to undertake the work with an increased distance between workers

- Mark safe distances in work, transit and break areas (eg on floors and walls).
- Consider different shift patterns to minimise the number of workers onsite (eg AM/PM shifts, ensuring adequate time between shifts for cleaning and disinfecting).
- Stagger start times, breaks and finish times to avoid congestion in high traffic areas and minimise workers coming into contact with each other as they move around the site.
- Plan for how physical distancing will be maintained during inclement weather (eg use of lunch or crib rooms and amenities).
- Install temporary physical barriers (eg fences, screens) between work areas, where appropriate.

Where it is not possible to undertake work tasks and maintain physical distancing, other control measures need to be implemented. For example:

- Minimise the number of worker to worker interactions that need to be completed within 1.5 metres.
- Minimise the number of workers involved in activities that need to occur within 1.5 metres of each other.
- Provide personal protective equipment (PPE) (eg gloves, masks, glasses).

More information about the safe use of PPE is set out in 3.9.

Where essential work activities need to be undertaken in restricted spaces (eg lift shafts, personnel hoists, lifts), the number of workers working in the space should be minimised.

Ensure that workers maintain physical distancing outside the work site if it is necessary to leave the site and return, for example to purchase supplies, meal breaks or attend to meetings.

3.4 Density Quotients

Under DHS Workplace Directions, limits apply on the number of persons who can be in an enclosed area. This is called the Density Quotient. Employers must ensure that any enclosed work area, such as crib rooms, meeting rooms, ablution blocks etc are assessed to calculate the limit of persons who can occupy those areas according to the formula of one person per two square metres for worksites.

Note that crib rooms, amenity areas and site offices must still comply with the overarching Department of Health Workplace Directions to ensure physical distancing of 1.5 metres at all times, including in these areas.

Note that the density quotient does NOT apply when using hoists and lifts – see section 3.8 of these guidelines, but DOES apply in the waiting areas for hoists and lifts.

3.5. Hygiene

3.5.1 Good hygiene practices and general cleaning helps with minimising the spread of coronavirus (COVID-19). Employers should review general hygiene requirements and the cleaning regimes in place.

3.5.2 Employers should display health information (including appropriate messaging for Cultural And Linguistically Disadvantaged workers) in prominent locations on the construction site such as tea rooms, site offices, toilets, foyers, lifts and site entrances.

3.5.3 Every effort must be made by employers to upgrade personal hygiene and minimise worker to worker contact and all workers must co-operate in all necessary measures to achieve these objectives. These measures need to include:

- Promote regular hand washing with soap for at least 20 seconds. Employers must facilitate regular hand washing by providing ease of access/additional facilities where possible. Communicate to all workers where hand sanitisers are located and encourage their regular use.
- Promote good cough etiquette by covering your cough and sneeze, or cough into your elbow or shoulder.
- Avoid touching your nose, eyes or mouth.
- Provide hand sanitiser and/or hand washing facilities with soap in all site entrances and exits hoists, amenities and areas/levels of the site.
- Ensure that workers maintain good hygiene if it is necessary to leave the site and return, for example to purchase supplies, meal breaks or to attend meetings.

3.5.4 Employers must ensure that workers have access to appropriate amenities. Refer to the WorkSafe Victoria Compliance Code: Facilities in Construction.

<https://www.worksafe.vic.gov.au/resources/compliance-code-facilities-construction>

Employers should review and revise the number and locations of amenities, to reduce movement around the site. A cleaning log sheet which sets out the dates, times and frequency of cleaning is required to be kept in all shared workplaces.

Amenities need to include:

- Hand washing facilities (whether permanent or temporary), such as a wash basin, clean running water, soap and paper towels, placed in strategic locations to ensure employees can access them in a timely manner.
- Access to hand sanitiser.
- Rubbish bins with touch-free lids (eg foot pedal bins).
- Thorough and regular sanitation.
- Appropriate waste management systems.

3.6 Shared tools, plant and equipment

Workers should avoid the shared use of tools, plant and equipment wherever possible. For example, drop saws, drills, grinders, ladders or elevating work platforms should not be used by more than one worker.

Where it is not possible to eliminate shared use:

- Provide cleaning products (eg alcohol spray or solution) where communal tools, plant and equipment are located.
- Keep cleaning products with tools, plant and equipment as they move around the site.
- Ensure all operators thoroughly wash or sanitise their hands before and after every use.
- Ensure all parts of tools, plant and equipment (eg including handles, handrails) are wiped down before and after use.

The shared use of phones, desks, offices, computers and other devices should also be avoided. Where this is not possible, these items should be regularly disinfected.

3.7 Cleaning and Disinfecting

3.7.1 Cleaning and disinfecting of surfaces is to be conducted using cleaning products as per DHHS Cleaning and Disinfection guidelines to reduce coronavirus (COVID-19) Transmission – the specific guidance is included in Section 9 – Attachments.

- Cleaning and disinfection of amenities and meal areas must occur between work group breaks
- Cleaning and disinfection of Personnel Hoists should occur at the end of each hoist operator shift
- Routine cleaning of 'Frequently Touched Surfaces', surfaces such as toilets, door handles, stair handrails, light switches, lift buttons, table tops.
-

3.8 Personnel Hoists

Under COVIDSafe Summer restrictions, there are no longer any restrictions on occupancy of hoists and lifts. However, workers using hoists and lifts may be at increased risk of exposure to coronavirus (COVID-19), because they are required to be in close proximity to others and potentially contaminated surfaces. Therefore, it is a requirement that face masks be worn when waiting for and whenever travelling in a hoist or lift.

Under OHS legislation, the employer is the duty holder and responsible for assessing and controlling risks as far as is practicable, in conjunction with the Health and Safety Representatives. A risk assessment must therefore be made in assessing which of the following are the relevant control measures to be used in each location.

Additional control measures to reduce the risk include:

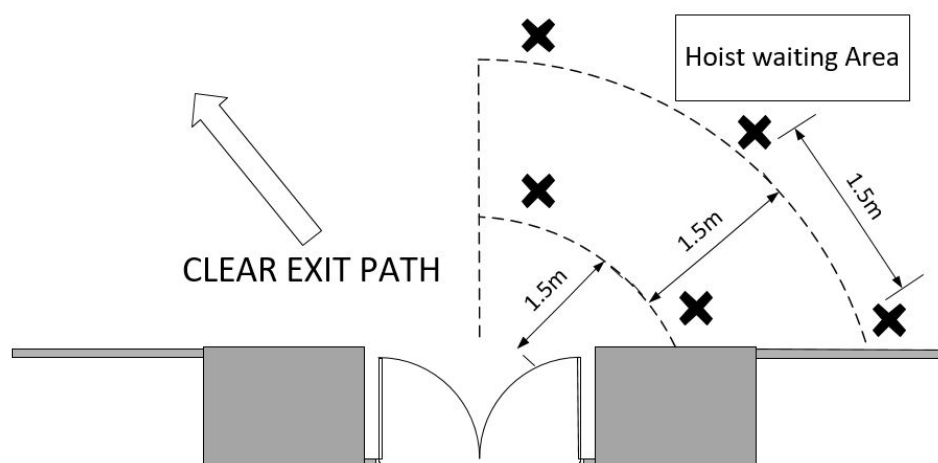
- Reviewing which hoists and lifts are available for use on site and identifying if additional hoists and lifts can be used (for example where a partially occupied building is under construction, consider whether a residential lift be used solely for construction persons).
- Increased Cleaning and Disinfecting of the site, common areas and the hoists and lifts in accordance with DHHS guidelines.

- Limiting worker movement between levels and floors on site, where it is possible and safe to do so.
- PPE (face masks) must be provided and worn for individual use of occupants in hoist /lift.
- Physical distancing of 1.5 m and hygiene systems to be followed when waiting for hoists and lifts, particularly on floors where worker volumes may increase during peak times (start, break, finish times). For example the ground floor, floors with meal or break out spaces and floors with bathroom amenities. The diagram below shows how physical distancing should be implemented in hoist waiting areas.
- sequencing of entering and exiting.
- Planning and systems to manage crowding at peak times
- During peak periods have system in place to limit crowding of workers entering/exiting the work area. For example:
 - developing a schedule for use of the hoist/lift.
 - staggering what floors workers are to use the hoist/lift.
- Mark the hoist/lift waiting area at each floor ensuring the physical distancing is maintained.
- Regularly communicate and remind workers (eg through posters, digital displays):
 - diagram of positioning of workers and sequence of worker entering.
 - not to touch walls/doors of the hoist/lift.
 - advise the cleaning regime in place.

Hoist/lift operators may be exposed to additional risk. They must:

- Be provided with PPE that protects them from worker to worker transmission and from touching contaminated surfaces (eg face shield or surgical mask/P2 respirator and glasses).
- Perform frequent hand washing with soap and water or the application of hand sanitiser positioned within the hoist/lift.
- Where possible, rotate hoist/lift operators into a different role.

Example of physical distancing in hoist waiting areas



3.9 Personal Protective Equipment (PPE) and Face Masks

Employers must provide information, instruction and training on the safe use, decontamination and maintenance of any PPE provided.

Any PPE provided needs to be practical for the work environment (eg allowing the necessary visibility and mobility) and properly decontaminated or disposed of at the end of every shift.

Employers should monitor and encourage correct use of PPE, for example providing information on posters and digital screens about:

- Washing or sanitising hands before putting PPE on, and putting face protection on before gloves
- Removing gloves before face protection, washing or sanitising hands after removing PPE and decontaminating or disposing of used PPE safely.

Face Masks

3.9.1 Face coverings must be carried by all and must be worn when physical distancing of 1.5 metres is not possible. Employers should ensure that an adequate supply of suitable face masks is available for use and provision is made for appropriate disposal of disposable face masks.

In addition, it is mandatory to wear a mask in some other situations, such as when travelling to work on public transport or commercial passenger vehicles, in hospitals, care facilities, airports and recommended anytime when at a private gathering when you cannot maintain 1.5 metres physical distancing.

3.9.2. In line with best practice to provide the highest level of protection against COVID19 and in consideration of all OH&S risks related to our industry, these industry guidelines now prohibit the wearing of all scarves, bandanas, snoods, neck socks and the like – the only acceptable face covering that is allowed to be used in our industry and on our sites, by themselves, are fitted face masks.

3.9.3. A face mask needs to be a properly fitted face mask covering both your nose and mouth. A face shield alone is no longer allowed as at 11 October 2020.

3.9.4 The term face mask includes both cloth masks and single use face masks (commonly known as surgical masks). Both masks are suitable for use to prevent the spread of coronavirus (COVID -19). Use of N95/ P2 masks, must be compliant with Australian Standard 1716.

3.9.5 The advice and recommendations on wearing face masks has been informed by current DHHS Workplace Directions and Foundations for Safety Victoria (FFSV).

Mask Type	Use Frequency	Cleaning Frequency	Lifespan
<i>Cloth</i>	<i>Multiple</i>	<i>Each day</i>	<i>Fair wear and tear</i>
<i>Surgical</i>	<i>Single</i>	<i>N/A throw out after use</i>	<i>Single use</i>
<i>N95/P2</i>	<i>Multiple</i>	<i>Each day</i>	<i>Follow manufacturers instructions</i>

3.10 Common areas

Common areas on sites such as the amenities and frequently touched surfaces pose risks, and these are reduced by ensuring the following measures are adopted. All frequently touched surfaces and equipment on site need to be wiped down with appropriate cleaning and sanitizing disinfectants,

Sanitisers or disinfectant wipes should be readily available near frequent use appliances such as fridges, microwaves, drinking fountains, water bubblers etc.

3.10.1 The time spent in those areas must be limited so as not to breach time constraints recommended by DHHS.

3.10.2 Staggering of meal breaks and separation of work groups to achieve maximum personal space and reduce the number of workers accessing those areas at any one time consistent with the Government requirements (i.e. the total number of workers present in the indoor space at the same time must not exceed the number calculated by dividing the total area, measured in square metres, of the indoor space by 2).

Note that crib rooms, amenity areas and site offices must still comply with the overarching Department of Health Workplace Directions to ensure physical distancing of 1.5 metres at all times, including in these areas.

3.10.3 Cleaning and sanitisation must occur between occupation of amenities by different work groups.

3.10.4 Spread out furniture to ensure physical distancing measures in common areas.

3.10.5 There must be an increased frequency of industrial grade cleaning/additional cleaning with specific emphasis on cleaning after each meal breaks in those areas - employers must follow the specific guidance of DHHS).

<https://www.dhhs.vic.gov.au/cleaning-and-disinfecting-after-covid-19-case-non-healthcare-setting-doc>

3.10.6 Workers electing to minimize amenity access.

3.10.7 Staggered working hours must be considered on sites with appropriate consultation (consideration must be given to Construction Management Plans, and workers must be given adequate notice of a change in hours).

3.10.8 Where practical, workforce amenities may be placed at different levels of high rise building site.

3.10.9 In the event of inclement weather and potential congestion in amenities, consultation must occur in relation to relocation or other options.

3.10.10 Adequate ventilation and air flow should be maintained in enclosed amenities, for example by opening windows/doors to allow fresh air, installing fans and/or exhaust fans and/or air purifiers, turning air conditioners to 'fresh' not recirculate.

A Guidance Note has been prepared on the basis of expert industry and professional advice and is attached at Section 9. It is incontrovertible that improving ventilation and air flow will diminish the risk of Coronavirus transmission. To the extent that such measures outlined in the Guidance Note can be implemented, it makes very good sense to do so, based on proper advice and the particular circumstances of each project and/or location.

3.11 Inspections

Inspections of sites are likely to be conducted by WorkSafe and the Victorian Building Authority. Everyone should ensure all measures are in place to ensure compliance. Employers and Health and Safety Representatives are encouraged to work together to assist in this important objective.

3.12 COVID Marshal

It is recommended that each Large Scale Construction* worksite appoint a COVID Marshal.

COVID Marshals are appointed by the respective site managers and are responsible for supporting site compliance and providing advice to employers and workers on the following measures:

- Ensuring workers practice appropriate physical distancing measures
- Ensuring workers practice minimum level hygiene measures (as per Infection Control Awareness training)
- Ensuring adequate ventilation
- Maintaining accurate and robust record keeping (subject to audit)
- Informing required updates

The COVID Marshal is also the lead point of contact for contact management.

COVID Marshals are individuals who have (at a minimum) certifications and training for

- Infection Control Awareness Training (mandatory)
- First Aid (Level 2) – (recommended)

Site Managers can appoint multiple COVID Marshals. The role does not need to a single dedicated appointment, however, the COVID Marshal role should be their primary role when on duty (ie an existing HSR or Site Supervisor can also be appointed as a COVID Marshal and perform this function as their primary role along with any existing duties). The employer has ultimate responsibility for ensuring the COVIDSafe obligations are met.

*Large Scale Construction Sector is defined as

- Permitted to be (at completion) more than three storeys high (excluding basement) or
- Larger than 1,500m² floor size or
- Industrial, large format or retail use

3.13 Travel

Adequate arrangements are to be made by workers to ensure their travel to and from work is conducted safely in accordance with Government advice, and that adequate sanitisation facilities are in place for workers upon attending the work site and when returning to the work site during work.

However, as 1.5 metre physical distancing cannot be maintained, it is recommended that you wear a face mask unless travelling alone.

Work vehicles that are shared should be regularly cleaned to ensure adequate hygiene and protection.

3.14 General Communication and CALD Messaging

3.14.1 Ensuring everyone is informed is fundamental to managing this pandemic and ensuring the safe operations of construction sites. Leadership organisations in Victoria's building, development and construction industry have collaborated on COVIDSafe communication materials tailored to reach the industry's culturally and linguistically diverse people.

This is an important campaign designed to keep the entire industry informed, engaged, safe and open. The COVIDSafe rules and responsibilities will be regularly communicated in different ways, recognising cultural differences will see some messages resonate with some more than others.

What you need to do:

Go to <https://www.culturalpulse.com.au/covidsafe-worksite-resources/>

- Print the posters, put them up in your workplace, in all languages relevant to your workforce.
- Share the social media tile with your community, colleagues, family and friends.

There you will find COVIDSafe messaging in 16 languages.

3.14.2 Site inductions Q&As should be updated as required to include information on coronavirus (COVID-19) potential risks and workplace specific controls that have been implemented such as daily screening, health checks and symptoms of coronavirus (COVID-19), staggered start, finish and meal times, good hygiene practices and cleaning regimes and PPE requirements.

3.14.3 Toolbox talks should be regularly conducted, and workers are to be encouraged to put forward practical ideas for changing work practices to avoid the spread of coronavirus (COVID-19). Toolbox talks should also provide clarity to workers on leave arrangements for those that cannot work, and to encourage self-reporting and minimise the spread of risk.

3.14.4 Toolbox talks should also include updates from the Chief Health Officer as they occur and additional information on the severity of the pandemic and the importance of physical distancing at toolbox meetings.

3.14.5 Site inductions, pre-starts and toolbox meetings to be held in suitably ventilated (open air where possible) in accordance with physical distancing, hygiene and PPE requirements.

3.15 Vulnerable workers

DHHS has identified the following groups of people as vulnerable workers in relation to coronavirus:

- Aboriginal and Torres Strait Islander people 50 years and older with one or more chronic medical conditions.
- People 65 years and older with a chronic medical condition
- People 70 years and older
- People with compromised immune systems.
- People who are pregnant.

Employers are to risk assess roles that may have a higher chance of exposure to coronavirus (COVID-19) and implement controls to address these risks. For example, higher risk roles may include (Peggy/Cleaner, Hoist/ Lift Operator, First Aider). Where practical, reasonable action should be taken to minimize vulnerable workers from conducting higher risk roles.

3.16 Other measures

Construction sites are diverse and vary in complexity, employers must apply a risk-based approach and implement reasonably practical controls based on the environment and specific hazards at each construction site. In addition to the aforementioned measures and controls mentioned in this section, employers should consider other measures for implementation such as:

- using alternatives to face to face meetings where practicable,
- reducing the length and size of meetings, especially for critical employees, by requiring some or all to dial in,
- consider off-site fabrication,
- ensuring working from home arrangements are enabled where feasible,
- structuring management teams to ensure contingency in the event of team members needing to be isolated or quarantined at home.
- Temperature screening - the protocols for temperature screening are outlined in Attachment 9.6 of this document.

4.0 MANAGING POSITIVE CASES AND CLOSE CONTACTS

4.1 What if a worker has been diagnosed with coronavirus (COVID-19)?

4.1.1 Positive Case

If a worker becomes a confirmed case of coronavirus (COVID-19), the worker must not attend the workplace under any circumstances. This is part of the employer's and worker's obligation to ensure a safe workplace. Positive test results should also be immediately communicated by the worker to the employer. If the diagnosed worker is employed by a subcontractor working for the head/principal contractor, the worker's employer must immediately notify the head/principal contractor of the positive diagnosis.

4.1.2 Obligation to report to WorkSafe Victoria

Regulations approved under the Occupational Health and Safety Act (Victoria) 2004 on 28 July 2020 provide that employers are required to notify WorkSafe immediately on becoming aware that an employee or an independent contractor or a contractor's employee has received a confirmed COVID-19 diagnosis and has attended the workplace during the infectious period. Self-employed persons are also required to directly inform WorkSafe immediately on receiving a confirmed COVID-19 diagnosis if they have attended the workplace during the infectious period.

The infectious period begins on the date 14 days prior to the onset of symptoms or a confirmed COVID-19 diagnosis (whichever comes first), until the day on which the person receives a clearance from isolation from the DHHS. Notify WorkSafe on 13 23 60 or <https://www.worksafe.vic.gov.au/notifiable-incidents-involving-coronavirus-covid-19>

4.1.3 Whenever there is a confirmed diagnosis of coronavirus (COVID-19) in Victoria, the relevant medical facility/provider is mandated to immediately advise DHHS. Subject to the following, DHHS will in turn notify the employer.

The following Directions (extracted in part) were made by the Public Health Commander in accordance with emergency powers arising from the declared State of Emergency – 5 August 2020, responding to a confirmed case of COVID-19 in a work premises. Amongst other requirements, employers must:

- undertake a risk assessment to determine whether the Work Premises (or relevant part of the work premises in which the diagnosed worker worked in the relevant period) must be closed to allow cleaning and contact tracing to occur or whether the risk can be managed whilst the work premises (or part of it) continues to operate.
- where the Work Premises (or part of the work premises) is closed, not reopen that Work Premises (or part of the work premises which was closed) until all of the following have occurred:
 - the department has completed all relevant workplace tracing
 - the department has given clearance for the Work Premises to reopen

Employers are advised to contact the Industry Liaison Officer prior to making any decision to close a work site or part of a work site.

DHHS will notify the employer and provide appropriate advice only when the worker has been deemed to be infectious while on-site and where there are necessary actions for a site to take (whether in cleaning or assisting in contact tracing activities). This means that where an employee on a building and construction site was working on site, and was infectious, DHHS will work with and notify the employer (with all due consideration of privacy). Note that, DHHS will not routinely notify an employer if a worker has been confirmed but was not on site at any point during their infectious period.

If the employer or union wishes to learn more about the steps to be taken in these events, they can contact 1300 651 160, the established communicable diseases number, including coronavirus (COVID-19).

4.1.4 The principal/head contractor must advise the unions and appropriate arrangements made to communicate with workers as to the required actions without delay. All workers on that site must be fully informed of what has occurred as soon as possible, ensuring appropriate privacy considerations are complied with. The DHHS requirements are likely to include a mapping exercise of who the affected worker has had close or casual contact with, and where the worker has been on the site. Following identification and contact with all potential identified persons, any instructions of DHHS must be adhered to.

4.1.5 The worker must follow all medical advice provided by their health care practitioner and/or the relevant government agency. This will include a period of self-isolation and testing requirements. Following DHHS determining release from isolation of the worker, the employer will facilitate an immediate return to work.

4.1.6 Where there has been a worker on site who has tested positive to coronavirus (COVID-19), other personnel that may have had close contact with the confirmed case will be identified and notified by DHHS.

4.1.7 The employer is required to accept any advice and direction of DHHS regarding any actions required to minimise the risk of transmission which may include the partial or complete closure of the site for disinfecting and cleaning and the reopening of the site.

4.1.8 Following a coronavirus (COVID-19) confirmed case on site, the employer/principal must immediately implement a cleaning and disinfection regime which should be overseen by a competent person who can ensure that the process complies with any DHHS requirements and also manages the risks specific to the site.

4.1.9 Employers who are responsible for undertaking and overseeing the cleaning and disinfection regime following a confirmed case of coronavirus (COVID-19) must verify on its completion that the agreed process was fully executed and implemented, prior to the recommencing of work.

4.1.10 Large and complex building and construction sites present a greater risk of coronavirus (COVID-19) transmission in the event of a confirmed case on site. Larger sites involve more workers on site, high volumes of workers working in reasonably close proximity to one another, or workplaces which may have difficulty in confining workers and teams to specific areas of the site, site amenities and other common areas. For these sites where the employer and unions consider it warranted, a hygienist (or other suitably competent person) may be engaged for the purpose of verifying to the parties (employer and employee representatives) that the cleaning/disinfection process was undertaken in accordance with the DHHS guidance and requirements prior to recommencing work. The hygienist (or other suitably competent person) for these larger more complex sites will need to be engaged as early as possible and be provided with all relevant information to ensure that verification is not delayed once cleaning has been completed.

4.1.11 By way of example, upon confirmed diagnosis, the Principal contractor is required to commence cleaning on the site. The following is to take place:

- Through the workplace mapping process, identify all the areas the worker was in during the last 48 hours before the onset of symptoms - this should be conducted by the Site Manager as a minimum
- Cleaning of the site is to be undertaken as per the DHHS advice
- A cleaner is to be engaged to conduct the cleaning in accordance with the above advice.
- All common areas, hoists and the work areas where the worker had been in the last 48 hours (as per the workplace mapping) are to be cleaned.
- Cleaning is to be undertaken with no workers on site.

- Upon completion of the cleaning, a signed record is to be provided detailing the areas cleaned and the products used.
- This information is to be provided to the health and safety representative and unions.

4.1.12 For further information, refer to the Master Builders Victoria Cleaning Guidance Note – Following a Confirmed Case of coronavirus (COVID-19) On Site. This document includes an example cleaning checklist and verification of disinfecting form. This document is also available in section 8.0 of these Guidelines.

4.1.13 A worker who is diagnosed with coronavirus (COVID-19) will be able to use any entitlement they have to accrued paid personal/carer's leave. If the worker doesn't have sufficient accrual or an entitlement, the worker can access unpaid personal/carer's leave for the period they are unfit for work.

4.1.14 If the applicable Enterprise Agreement provides for Incolink or Protect entitlements, a worker experiencing hardship should contact Incolink/Protect for assistance.

4.1.15 Employers and workers should also ensure that they take steps to prevent workers discriminating against others of a particular race/ethnic background and/or those who have contracted coronavirus (COVID-19). Employers should ensure managers and supervisors have been trained to identify and prevent this sort of discriminatory behaviour and that support is in place for workers who feel they are being discriminated against for these sorts of reasons. Employers should ensure policies regarding anti-discrimination and privacy are up to date.

4.2 What if a worker is experiencing some of the coronavirus (COVID-19) symptoms but has not been diagnosed?

4.2.1 The symptoms of coronavirus (COVID-19) include shortness of breath, fever, sore throat, coughing, and loss of taste or smell.

4.2.2 If a worker is away from work and experiences any of these symptoms, they must get tested for Coronavirus and not attend site until a negative test result is obtained.

4.2.3 If a worker is at work or onsite and experiences any of these symptoms, the worker should immediately advise the employer, leave work, get tested for Coronavirus and not attend site until a negative test result is obtained.

The worker should ensure, with the employer's assistance, that in travelling home or to medical attention from the site, that precautions are taken to avoid exposure to others, consistent with Government advice.

4.2.4 The employer cannot request or direct any worker in self-isolation, quarantine or with symptoms of coronavirus (COVID-19) to attend work.

4.2.5 A worker who has developed any of the symptoms can be considered unfit for work and may access paid personal/carer's leave where they have an entitlement. If the medical test comes back clear, and the worker has otherwise recovered from the symptoms enough to return to work, the worker can return, provided they receive medical clearance and are fit for work.

4.2.6 In the event testing for coronavirus (COVID-19) is unavailable and the worker continues to remain unwell, the worker can continue to use personal/carer's leave if they have an entitlement. If there is any doubt, a worker should self-isolate until symptoms have resolved. If the worker does not have sufficient personal/carer's leave accrual, they can access unpaid personal leave or, alternatively, the employer and the worker can agree to the worker accessing any entitlement to annual leave, long service leave or accrued RDOs.

4.2.7 If the applicable Enterprise Agreement provides for Incolink or Protect entitlements, a worker experiencing hardship should contact Incolink/Protect for assistance.

Refer to section 8.0 for a flow chart of “What if a worker is experiencing some of the COVID-19 symptoms but has not been diagnosed?”

4.3 What if a worker has been identified as having had close contact with someone diagnosed with coronavirus (COVID-19)?

4.3.1 A worker must self-quarantine at home for 14 days if they have come in close contact with a person who has a confirmed case of coronavirus (COVID-19) and will be required by DHHS to have a COVID-19 test at Day 11 of the quarantine period, or if they do not agree, will have their quarantine extended to a total of 24 days from their last exposure to the virus.

4.3.2 Definitions of Close Contacts

A Primary Close Contact is

- someone who has had face to face contact or spent time in a closed space with someone who has coronavirus (COVID-19) while they were infectious
- someone who has been in an outbreak or other setting where there is a higher risk of transmission of coronavirus (COVID-19)

A Secondary Close Contact is

- someone who has had face to face contact with a Primary Close Contact at least 24 hours after them being exposed to coronavirus (COVID-19)

The Chief Health Officer or Deputy may also identify someone as a Primary or Secondary close contact based on what is known about a particular case or outbreak.

4.3.3 If the worker is required to self-quarantine at home, but is otherwise well, the worker and employer may reach an agreement in relation to arrangements for the period of self-isolation including work from home, if this is feasible. Alternatively, the employer and the worker can agree for the worker to take accrued annual leave, long service leave, banked RDOs or unpaid leave subject to an entitlement. If symptoms develop, the worker can access personal/carer's leave.

4.3.4 If the applicable Enterprise Agreement provides for Incolink or Protect entitlements, a worker experiencing hardship should contact Incolink/Protect for assistance.

Refer to section 9.0 for a flow chart for “What if a worker has been identified as being in close contact with someone diagnosed with COVID-19?”

4.4 What if a worker has been identified as being in contact with someone diagnosed with coronavirus (COVID-19)?

The following explanation of contact with a confirmed positive case is provided by the DHHS Contact Tracing Team for the Building and Construction Industry, and reflects a change in definitions and protocols as a result of the ‘second wave’ of the COVID-19 pandemic in Victoria and emergence of the new, more transmissible variants of concern of the coronavirus:

“While the generic definition of a close contact, as above, exists, there is generally a more detailed assessment that is made in respect of the exposure site that determines the ultimate close contact definition. The main factors that primarily influence this definition include: the total number of cases and the degree of shift segregation.

For example, where there is one positive case on a construction site, but that person worked in a shift “bubble” and had no contact with others on the site (or if they did, these persons are readily identifiable), then the decision would most likely be that all persons in that positive case’s bubble are close contacts, but the remainder of the site staff would be permitted to continue working.

If, on the opposite site of the scale, a positive case worked several days while infectious, moved throughout the construction site having contact with a large number of people and could not be assured with certainty that all persons could be identified, or if there were several positive cases on the site, then this situation may be much more likely to result in broader close contact definitions potentially affecting the whole site.”

4.4.1 A worker who has been in contact (as distinct from ‘close contact’) with a confirmed case of coronavirus (COVID-19), may be required to be tested for coronavirus (COVID-19) in circumstances where it is considered prudent to do so and as an abundance of caution, having regard to the details of the contact. In this event the worker is to get tested, not attend site or any workplace until a negative test result is obtained. Advice can be obtained from the Industry Liaison Officer if necessary.

4.4.2 In these circumstances the employer and worker are encouraged to agree to take appropriate steps. This may include allowing the worker to work from home where feasible or enabling the worker to take some form of leave (whether paid or unpaid) until they can return to work following a negative test. Such workers must monitor themselves for symptoms for 14 days from the time after the casual contact.

4.4.3 If the worker has not been required to be tested for Coronavirus (COVID-19) and does not have any symptoms of coronavirus (COVID-19) (i.e. fever, shortness of breath, sore throat and coughing), the worker can continue to attend work. Such workers must monitor themselves for symptoms for 14 days from the time after the casual contact.

4.4.4 A worker who shows symptoms of coronavirus (COVID-19) should immediately notify the employer, leave site and get tested for Coronavirus (COVID-19) and not attend site until a negative test result is obtained. See Section 3.16 for more details. The worker should ensure, with the employer’s assistance, that in travelling home or to medical attention from the site, that precautions are taken to avoid exposure to others, consistent with Government advice.

4.4.5 Workers should maintain regular communication with their employer/client in relation to their ability to work and to attend the workplace.

Refer to section 9.0 for a flow chart for “What if a worker has been identified as being in contact with someone diagnosed with COVID-19?”

4.5 What if a worker has returned from overseas?

4.5.1 After midnight 28 March 2020, all people returning to Australia from travel overseas are required to complete a government mandated quarantine.

4.5.2 The Victorian Premier has also announced that Victoria has been placed in a State of Emergency. This allows Victoria Police to enforce self-quarantine measures and to impose penalties on individuals or bodies corporate that do not comply with requirements to self-quarantine. This will affect employees who are returning from overseas travel and workers who have either had close contact or been diagnosed themselves.

4.5.3 For a worker who is required to self-quarantine, an agreement can be reached with their employer in relation to entitlements during the self-quarantine period. Options can include taking additional annual leave days, drawing down accrued long-service leave, utilising banked RDO days, working from home if it is feasible or a period of unpaid leave by agreement of both parties, subject to entitlements available.

4.5.4 If the worker, while on the period of quarantine, becomes unwell and would be unfit to work, they can access their personal/carer's leave entitlement while unwell. In these circumstances an employer may require a worker to provide supporting medical evidence. The employer may request a medical clearance from the worker before their return to work onsite.

4.5.5 If the applicable Enterprise Agreement provides for Incolink or Protect entitlements, a worker experiencing hardship should contact Incolink/Protect for assistance.

4.5.6 Employers must not and cannot require a worker to come into work if they are required to self-quarantine under this directive.

4.4.7 Workers should be encouraged not to undertake non-essential travel. Employers and workers should cancel non-essential activities including business travel, visits, social and sporting activities.

5.0 EMPLOYEE RELATIONS

5.1 What if a worker is required to look after a dependent if their school or childcare has shut down?

5.1.1 As a result of coronavirus (COVID-19), there may be disruptions to schools and childcare services.

5.1.2 If a worker is at work and they are required to collect their child from school or childcare because the facility was closed due to coronavirus (COVID-19), the worker may utilise their entitlement to personal/carer's leave to collect their child. In this circumstance, it can be considered an unexpected emergency and the personal/carer's leave entitlement may be utilised to collect the child and provide immediate care.

5.1.3 If the school or childcare centre remains closed for days or weeks following the initial closure, the worker may not be able to use their personal/carer's leave. If your child is not sick, personal/carer's leave can only be utilised in situations where there is an unexpected emergency. Where a child (or other dependent) becomes unwell, personal/carer's leave can be accessed to care for that child.

5.1.4 Where a worker has children that need ongoing care due to a school or childcare closure, the worker may be entitled to carer's leave to assist in an emergency and/or they should seek to arrange alternative care. If a worker is unable to find suitable care, the worker and employer may come to an agreement to use any entitlement to annual leave, long-service leave, banked RDOs or go on a period of unpaid leave. Employers are encouraged to assist wherever possible to avoid placing further burdens on childcare providers or on elderly relatives who should be protected as far as possible.

5.1.5 Alternatively, an employer and worker may reach an agreement to reduce working hours and pay pro-rata for the period of reduced hours. Any such arrangement should be in writing and signed by both the employer and worker. This can only be done in strict accordance with any applicable Enterprise Agreement.

5.2 What if an employer/principal has been directed by the Government to temporarily close a building site or project?

5.2.1 We all must act in accordance with any lawful government directives and guidelines. This may include future mandatory local lock-downs, quarantines, exclusion areas or travel restrictions which stop work. Should there be a requirement to close a site for community health reasons, every endeavour should be made to ensure consultation with the relevant employers and unions, as far as practicable. This will enable sufficient planning and aims to minimise disruption as much as possible. No site will be partially or fully closed without direction or advice by the Victoria's Chief Health Officer or representative. DHHS may be required to close a site under the provisions of the Public Health and Wellbeing Act 2008 or other regulatory powers on public health grounds, which may not allow for consultation.

5.2.2 If the Victorian Government determines to suspend or shut down government funded construction projects on account of public health concerns relating to coronavirus, it will make reasonable attempts to give advance notice of those decisions to relevant employers and unions. No government site will be partially or fully closed on account of public health concerns relating to coronavirus without direction by or advice from the Victorian Chief Health Officer.

5.2.3 If the Victorian Government requires that work on a particular site should stop, or operations must cease, or the employer or workers lose access to the site or premises because of a lock down, as an alternative to a stand down of workers, the employer must consider:

- whether workers can be reasonably redeployed elsewhere;

- whether any of the workers can work from home;
- whether any other arrangements can be made so that the work can continue;
- agree to allow employees to have limited access paid or extended unpaid leave, including accrued RDO's, in a measured and sensible way.

5.2.4 If there is no capacity to apply the measures set out in 4.2.3 and a closure of the site must proceed, it is extremely important to ensure that the consultation between the employer and the union includes the preparation of a clear and reasonable process for workers to obtain access to relevant entitlements. The financial circumstances of the worker and the longer-term viability of the employer and sub-contractors needs to be considered by all affected. It will not serve the longer-term interests of the worker or the employer if for example all accrued leave entitlements were drawn upon at once. In the first instance it may be feasible for the worker and employer to access the government assistance in accordance with paragraph 4.10. If it is possible to structure a phased approach to drawing on accrued entitlements this will provide the best opportunity for the future viability of the business and the future employment of the worker following the coronavirus (COVID-19) disruption.

5.2.5 If the applicable Enterprise Agreement provides for Incolink or Protect entitlements, a worker experiencing hardship should contact Incolink/Protect for assistance.

5.2.6 Any site partially or fully closed/advised by the Victorian Chief Health Officer or their representative will be re-opened as soon as actions requested/required are completed and DHHS advised the site can be open. Workers without symptoms and/or negative test results, will be advised by the employer to return to work.

5.2.7 If a closure of a site must proceed, upon its reopening, the employer will ensure that its previous workforce is returned to work on a fair and reasonable basis. Consultation between the employer and the union is required.

5.3 What if the employer wants to shut down the site?

5.3.1 It is understood that there is genuine concern for ensuring health and safety onsite. It is not in the interests of the employer or the workers to close a worksite unnecessarily and without direction from Government authorities. If a concern exists, the employer should immediately engage with the relevant Government authorities and engage in consultation with the workers and their union, prior to a closure of the site.

5.3.2 If the employer decides to close a worksite without being asked to do so by DHHS or required through a regulatory order, the employer should direct its employees to work at another worksite if possible. If work is not available in another location, the employer may direct employees not to attend for work and send them home on full pay. Alternatively, an employer can endeavor to come to an agreement with workers and their union for an alternative measure. Any such agreement should be in writing.

5.4 In what circumstances may an employer stand down workers without pay?

5.4.1 Before any worker is stood down without pay, the employer needs to carefully consider the terms of any applicable Enterprise Agreement and/or the contract of employment.

5.4.2 The stand-down provisions in section 524 of the Fair Work Act 2009 provides for workers to be stood down without pay in certain circumstances including during a period where a worker cannot usefully be employed because of a stoppage of work for any cause which the employer cannot reasonably be held responsible for. This is a high bar and will not apply merely to a down-turn in work or economic conditions.

5.4.3 The ability to stand down a worker may be available in circumstances where the employer is directed by the government to cease its operations on-site, or there are local travel restrictions or exclusions zones which result in a stoppage of work. An employee is not taken to be stood down during a period when they are taking a paid or unpaid leave that is authorized by the employer or is otherwise authorized to be absent from their employment.

5.4.4 If a stand down of workers is being considered, employers may seek to reach agreement with workers to access a form of accrued paid leave (i.e. annual leave or long service leave) for the period of the stand down or may agree to go on unpaid leave. Where a worker is experiencing hardship and they receive Incolink or Protect redundancy contributions, they may be able to access Incolink or Protect benefits. Incolink and Protect have announced additional measures to assist affected workers. A worker may also be entitled to seek further assistance from the measures announced by the Commonwealth Government - refer paragraph 4.10.

5.4.5 Employers should be aware that a contract of employment or Enterprise Agreement may modify the ability to stand down employees under section 524 of the Fair Work Act 2009 or allow for a stand down in circumstance different to those identified in section 524 of the Fair Work Act 2009. Any employer contemplating a stand- down should seek further advice from their relevant Industry Association.

5.5 What if a worker does not have coronavirus but does not want to come to work?

5.5.1 Some workers may be particularly anxious in relation to coronavirus (COVID-19) for various reasons. For instance, a worker (or a member of their immediate family or household) may have a particular health condition that places them in a higher risk category in relation to coronavirus (COVID-19). As a result, such workers may not want to come into work, despite not having coronavirus (COVID-19).

5.5.2 In these circumstances, employers should consider whether they can accommodate a worker's request and either allow them to work from home or alternatively, to allow the worker to take annual leave, long service leave, banked RDOs or unpaid leave.

5.5.3 Employers that contribute to Incolink or Protect may be able to refer anxious and concerned employees to Incolink Wellbeing & Support Services or Protect Counseling services.

5.6 What to do if someone on site is unwell but says they don't have coronavirus?

5.6.1 If a worker is showing signs of COVID-19 symptoms, they must not remain at work.

5.7 What impact is coronavirus going to have on casual employees?

5.7.1 If any workers are engaged on a casual basis, those employees are unlikely to be entitled to personal leave, annual leave or long-service leave in normal circumstances. Coronavirus (COVID-19) is likely to have a major financial impact on casual workers if they are unable to work due to coronavirus (COVID-19) and do not have leave entitlements.

A worker may also be entitled to seek further assistance from the measures announced by the Commonwealth and Victorian Governments.

5.8 What if an employer has a significant reduction in work, or unable to pay employees wages because of the downturn?

5.8.1 Coronavirus (COVID-19) will have an impact on businesses as well as cash flow and the ability to pay workers' entitlements if sites close. Where the impact may lead to redundancy the following must occur:

- consider whether there are any options for redeployment within the business or associated entities; and
- make sure the employer complies with consultation obligations under any enterprise agreements or modern awards.
- redundancies should only occur as a last resort.

If employers are considering making workers redundant, they should contact their relevant Industry Association before acting.

5.9 What if the parties cannot reach agreement in relation to any of the foregoing?

5.9.1 In the event that a matter concerning the application of these Guidelines and measures cannot be resolved between the relevant parties, where an applicable Enterprise Agreement is in place, either party may refer the matter to the Victorian Building Industry Disputes Panel (VBIDP) for assistance and resolution. The VBIDP is an independent body and arbitrator that can provide further advice, arbitration and conciliation to the industry across a range of issues. This includes occupational health and safety, employment conditions such as hours of work, wages, allowances and leave entitlements. Visit VBIDP at <http://vbidb.org.au>.

5.10 Victorian Government Assistance

The Victorian Government has a range of support programs for people and businesses affected by Coronavirus. See <https://www.coronavirus.vic.gov.au/financial-and-other-support-coronavirus-covid-19>.

This includes a \$450 payment for workers who are required to self isolate whilst waiting for results of a Coronavirus test. See <https://www.coronavirus.vic.gov.au/450-coronavirus-covid-19-test-isolation-payment>

5.11 Additional points in relation to coronavirus (COVID-19)

5.11.1 We encourage all employers and workers to work together during this difficult time. Employer Associations and Unions are also available to their members to discuss any of the information in these Guidelines. For further guidance, you can call the DHHS hotline on 1800 675 398.

You can access more information and resources on the DHHS website: <https://www.dhhs.vic.gov.au/coronavirus>

Employers whose employees are feeling anxious and stressed and who contribute to Incolink or Protect may be able to refer their employees to the Incolink Wellbeing & Support Services or Protect Counselling services. If any worker is experiencing difficulties getting food or necessities, they can call 1800 675 398 for support. It should be noted that privacy is important and no private individual information should be shared with other workers or third parties.

6.0 INDUSTRY COVID-19 TASKFORCE

An Industry COVID-19 Taskforce has been established by the Victorian Government to oversee the resources and response capability of the Building and Construction Industry in response to the current health crisis. The Taskforce operates under the auspices of the Building Industry Consultative Committee (BICC), reporting to the Minister for Industrial Relations Victoria and comprises representatives from:

- Chair of Victorian Building Industry Disputes Panel (Chair)
- Victorian Department of Health (DH)
- Victorian Department of Jobs, Precincts and Regions (DJPR)
- Department of Transport (DOT)
- Department of Premier and Cabinet (DPC)
- WorkSafe Victoria (VWA)
- Victorian Building Authority (VBA)
- Employers (MBV)
- Unions (CFMEU)

A dedicated Industry Liaison Officer has been appointed to be the authoritative single point of contact to provide rapid guidance to industry parties for clarification or explanation of these Industry Guidelines.

If further clarification or explanation is required, the Victorian Government Hotline should be contacted on 1800 675 398, then select option 5.

This call will be answered by a specialist team at the Victorian Building Authority who will be able to provide assistance and advice. The specialist team is operating under the auspices and guidance of the Task Force and Industry Liaison Officer.

Industry stakeholders are encouraged to seek on site assistance in applying these Guidelines, which has proven to be helpful in their implementation in specific sites.

Industry Liaison Officer Michael Paynter can be contacted on Ph 0418268555 or by email michael.paynter@dpc.vic.gov.au.

7.0 WHERE TO GO FOR CORONAVIRUS (COVID-19) UPDATES & FURTHER INFORMATION

- Vic Dept of Health and Human Services: www.dhhs.vic.gov.au/coronavirus
- World Health Organisation: <http://www.who.int>
- Aus Dept of Health: <https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert>
- WorkSafe Guidance – Managing the risk of COVID-19 exposure: Construction Industry <https://www.worksafe.vic.gov.au/managing-risk-covid-19-exposure-construction-industry>
- WorkSafe – A simplified checklist for the construction industry <https://www.worksafe.vic.gov.au/managing-risk-exposure-coronavirus-covid-19-simplified-checklist-construction-industry>
- WorkSafe Victoria Preparing for a pandemic: a guide for employers <https://www.worksafe.vic.gov.au/resources/preparing-pandemic-guide-employers>
- Fair Work Australia <https://www.fairwork.gov.au>



Incolink

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Protect

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CBUS

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Email: cbusenq@cbussuper.com.au*

8.0 PARTICIPATING UNIONS AND INDUSTRY ASSOCIATIONS

	Australian Institute of Building	Level 4, 332 Albert Street East Melbourne VIC 3002 Phone: 0412 326 898 Email: SReid@lusimon.com.au
	Australian Manufacturing Workers' Union (AMWU)	251 Queensberry Street Carlton VIC 3053 Phone: (03) 9230 5700 Email: amwu@amwu.org.au
	Air Conditioning & Mechanical Contractors' Association (AMCA)	30 Cromwell Street Burwood VIC 3125 Phone: (03) 8831 2800 Email: shannon.thomas@amca.com.au
	The Australian Workers' Union AWU VIC Branch	685 Spencer Street West Melbourne VIC 3003 Phone: (03) 8327 0827 ben.davis@awu.net.au
	Construction, Forestry, Maritime, Mining and Energy Union (CFMEU)	540 Elizabeth Street Melbourne VIC 3000 Phone: (03) 9341 3444 Email: vicqueries@cfmeu.org
	Civil Contractors Federation (CCF)	9 Business Park Drive Notting Hill VIC 3168 Phone: (03) 9588 7600 Email: ccfvic@ccfvic.com.au
	Electrical Trades Union (ETU)	Level 1/200 Arden Street North Melbourne VIC 3051 Phone: (03) 8329 0000 Email: etu@etuvic.com.au
	Master Builders Victoria (MBV)	332 Albert Street East Melbourne VIC 3002 Phone: (03) 9411 4555 Email: ceo@mbav.com.au
	Master Plumbers	15/306-312 Albert Street Brunswick VIC 3056 Phone: (03) 9329 9622 Email: membership@plumber.com.au
	Prefab Aus	Phone: 0400165391 Email: anne.wilson@prefabaus.org.au
	National Fire Industry Association (NFIA)	PO Box 403 Petrie QLD 4502 Phone: 07 3882 2273 Email: info@nfia.com.au
	National Electrical and Communications Association (NECA)	12/222 Kings Way South Melbourne VIC 3205 Ph: (03) 9645 5533 Email: necavic@neca.asn.au
	Plumbing and Pipe Trades Employees Union (PPTEU)	52 Victoria Street Carlton South VIC 3053 Phone: 03 9662 3388 Email: info@ppteu.asn.au
	Property Council of Australia	136 Exhibition Street Melbourne VIC 3000 Phone: (03) 9650 8300 Email: vic@propertycouncil.com.au
	SPASA Australia	8/13 King William Rd Unley SA 5061 Phone: 1300 021 482 Email: askus@spasa.com.au
	Urban Development Institute of Australia (UDIA)	Victorian Office 409 Melbourne VIC 3004 Phone: (03) 9832 9600 Email: info@udiavic.com.au

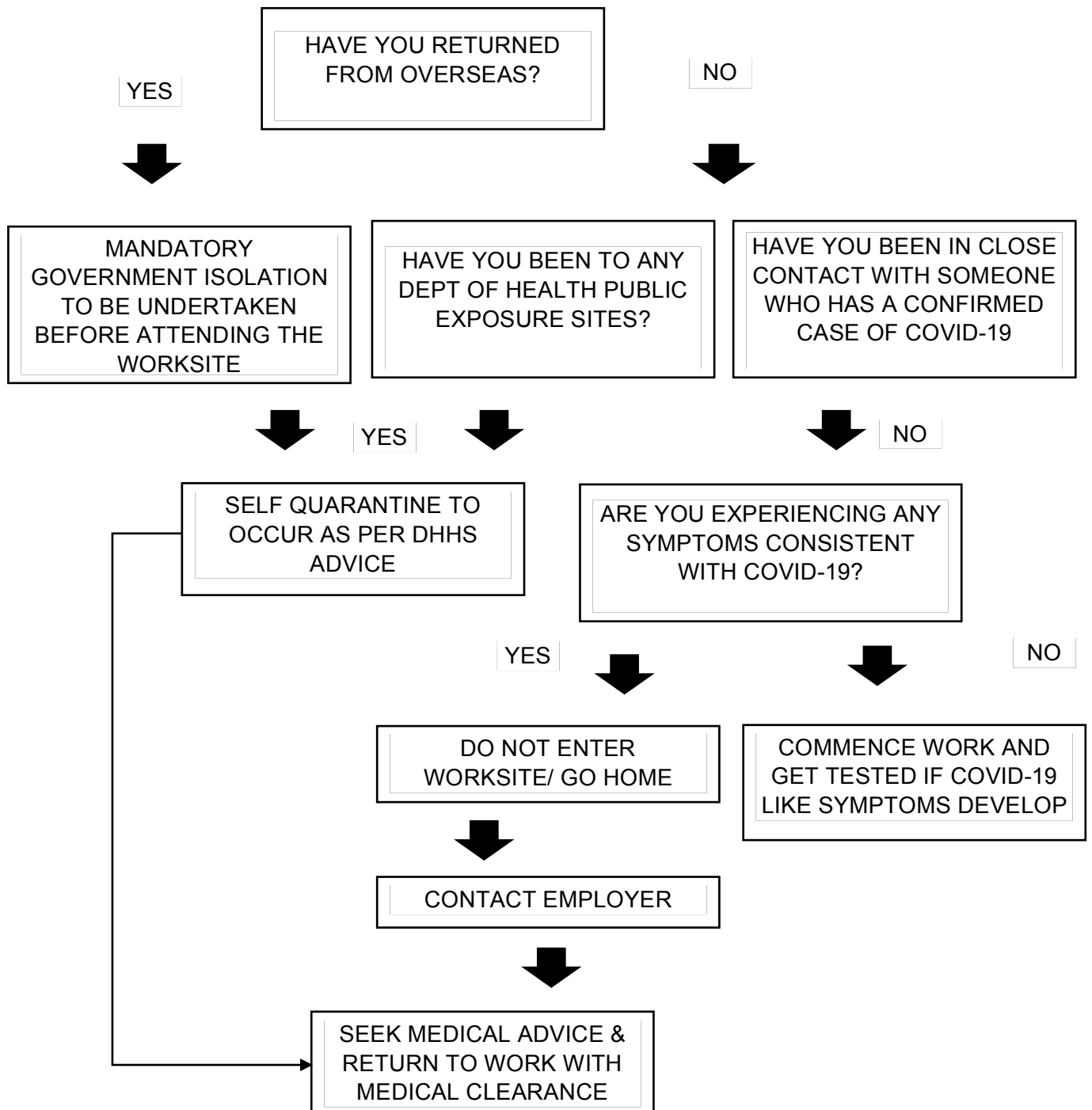
9.0 ATTACHMENTS

- 9.1 Employee screening and self-Isolation flowchart.
- 9.2 What to do if a worker is experiencing some of the COVID-19 symptoms but has not been diagnosed flowchart.
- 9.3 What to do if a worker has been identified as having had close contact with someone diagnosed with coronavirus (COVID-19) flowchart.
- 9.4 What to do if a worker has been identified as being in casual contact with someone diagnosed with coronavirus (COVID-19) flowchart.
- 9.5 DHHS Cleaning and disinfecting to reduce COVID-19 transmission Building and Construction Sites
- 9.6 COVID -19 Rapid Industry Guidance – Protocol for Temperature Screening in the Building and Construction Industry – August 2020
- 9.7 COVID -19 Rapid Industry Guidance – Advice on Airflow and Ventilation in the Building and Construction Industry – March 2021

ATTACHMENT 9.1

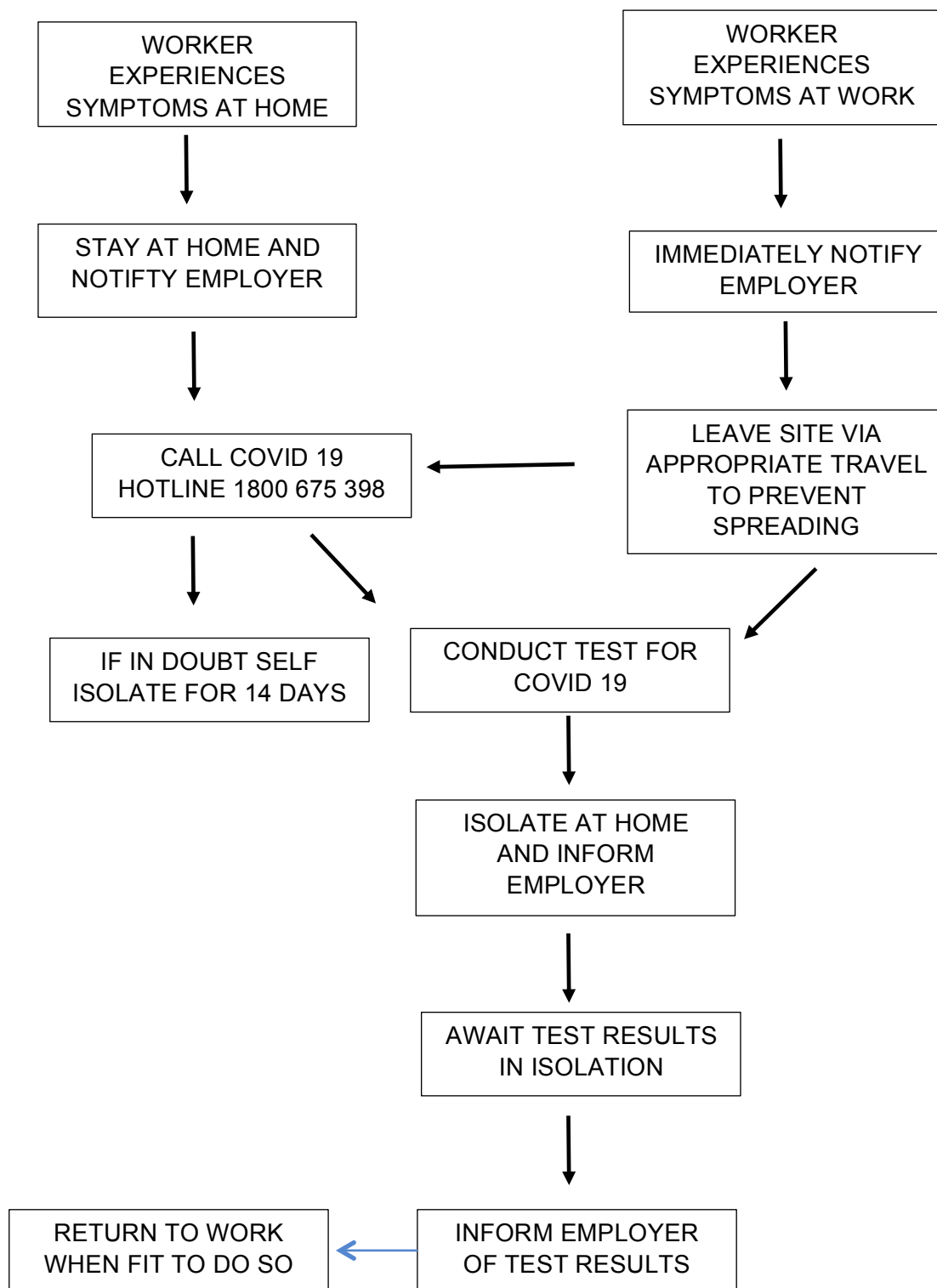
EMPLOYEE SCREENING AND SELF ISOLATION

To minimise the introduction of Coronavirus (COVID-19) on site, a screening process has been recommended for worksites to ensure all workers have declared they have not been overseas or in contact with anyone who has coronavirus (COVID-19). The below flow chart outlines questions to be asked and the process to be followed.



COVID-19 SYMPTOMS INCLUDE: COUGH, FEVER, TIREDNESS, SHORTNESS OF BREATH

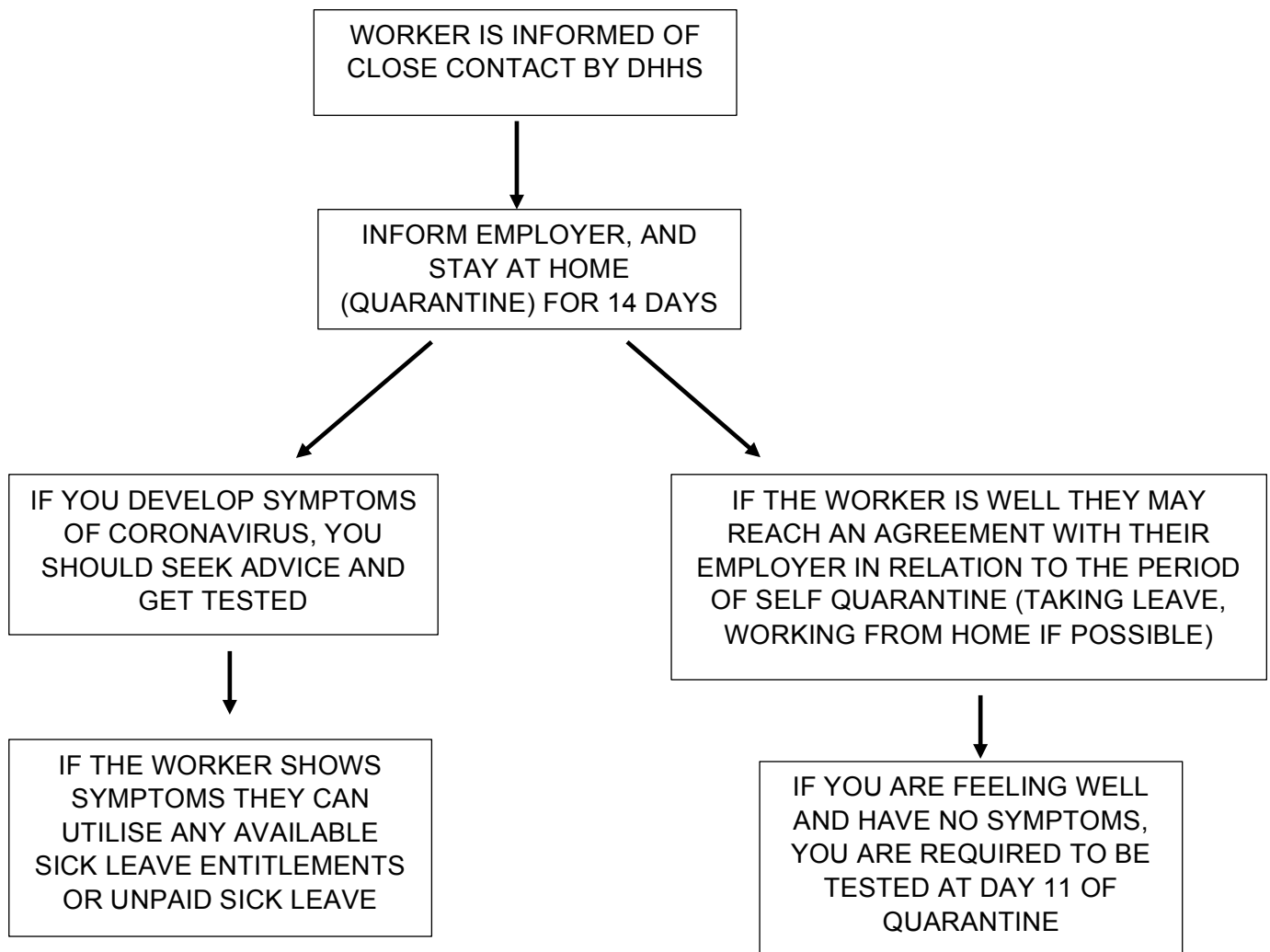
ATTACHMENT 9.2 WHAT TO DO IF A WORKER IS EXPERIENCING SOME OF THE COVID-19 SYMPTOMS BUT HAS NOT BEEN DIAGNOSED?



COVID-19 SYMPTOMS INCLUDE: COUGH, FEVER, TIREDNESS, SHORTNESS OF BREATH, LOSS OF TASTE AND SMELL

ATTACHMENT 9.3

WHAT TO DO IF A WORKER HAS BEEN IDENTIFIED AS HAVING HAD A CLOSE CONTACT WITH SOMEONE DIAGNOSED WITH CORONAVIRUS? (COVID-19)

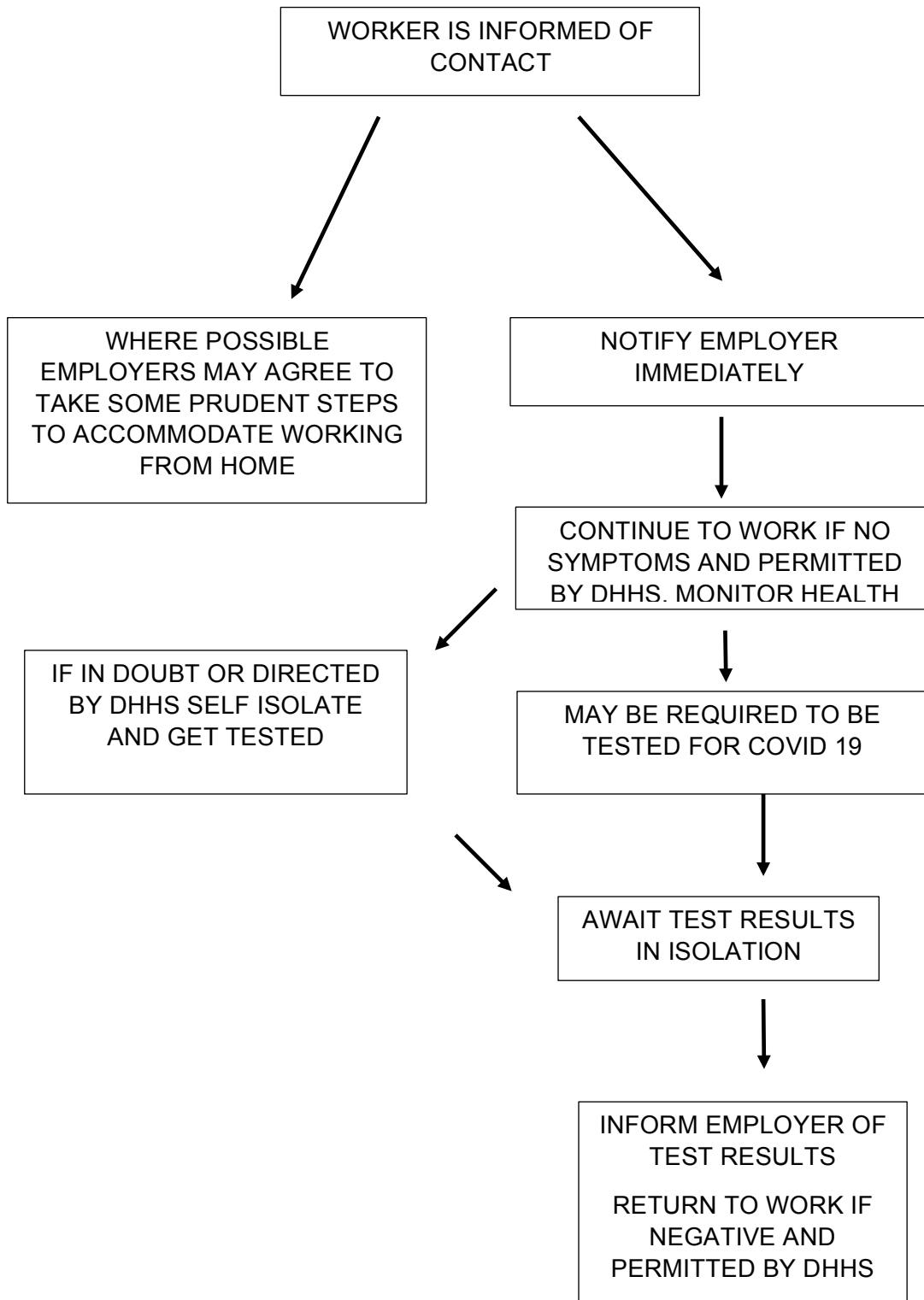


WHERE A WORKER IS EXPERIENCING HARDSHIP AND THEY RECEIVE INCOLINK OR PROTECT REDUNDANCY CONTRIBUTIONS, THEY SHOULD CONTACT INCOLINK/PROTECT FOR ASSISTANCE

CLOSE CONTACT IS DEFINED AS:

1. PRIMARY CLOSE CONTACTS – someone who has had face to face contact or spent time in a closed space with someone who has coronavirus (COVID-19) or someone who has been in an outbreak or other setting where there is a higher risk of transmission of coronavirus (COVID-19)
2. SECONDARY CLOSE CONTACTS – someone who has had face to face contact with a primary close contact at least 24 hours after them being exposed to coronavirus (COVID-19)

ATTACHMENT 9.4 WHAT TO DO IF A WORKER HAS BEEN IDENTIFIED AS BEING IN CONTACT WITH SOMEONE DIAGNOSED WITH CORONAVIRUS? (COVID-19)



How to clean and disinfect after a COVID-19 case in non-healthcare settings

Information for cleaners, business owners, managers and individuals

19 September 2020

Introduction

This guide provides advice on cleaning and disinfecting for facilities or workplaces after an employee, resident or visitor* has been diagnosed with COVID-19. While this advice is primarily for facilities and workplaces, the same principles apply for schools, childcare centres, factories, accommodation facilities[#] and private homes.

Every workplace should already have an established routine cleaning schedule. The routine schedule should include cleaning of [frequently touched surfaces](https://www.health.gov.au/resources/publications/coronavirus-covid-19-information-about-routine-environmental-cleaning-and-disinfection-in-the-community) <<https://www.health.gov.au/resources/publications/coronavirus-covid-19-information-about-routine-environmental-cleaning-and-disinfection-in-the-community>>. Examples of these include light switches, doorknobs, stair rails, lift buttons, phones and computers, EFTPOS machines, counters and desks.

General information for multi-dwelling properties that includes routine cleaning is available from the [department's website](https://www.dhhs.vic.gov.au/apartments-and-multi-dwelling-properties-coronavirus-covid-19) <<https://www.dhhs.vic.gov.au/apartments-and-multi-dwelling-properties-coronavirus-covid-19>>

More specific information is available in this document for accommodation facilities and private homes when there has been a confirmed COVID-19 case.

There is no requirement for a certificate of cleaning and disinfection to be issued in order for the premise to begin operating as before.

COVID-Safe cleaning plans for businesses

It is a requirement that every facility and workplace prepare a COVID-Safe plan. This must include an action plan and protocols[^] to manage cleaning and disinfection following notification of a confirmed COVID-19 case. Specific information may be found at [Safe Work Australia](https://www.safeworkaustralia.gov.au/covid-19-information-workplaces/industry-information/general-industry-information/cleaning) <<https://www.safeworkaustralia.gov.au/covid-19-information-workplaces/industry-information/general-industry-information/cleaning>>.

Your plan should include the following:

- Engagement of suitably qualified cleaning personnel.
- Allocating personnel responsible for overseeing the process.
- List of cleaning agents, disinfectants, tools and equipment.
- Validated method of disinfection.
- Processes for ensuring cleaning equipment is clean.
- Storage and accessibility of cleaning equipment.
- Availability of [personal protective equipment \(PPE\)](#).
- [Education and training of cleaning personnel which should include the following:](#)
 - [knowledge of appropriate](#) cleaning products and chemicals including safe handling
 - waste and laundry management
 - hand hygiene
 - how to safely put on and remove PPE.

*Visitor, for the purposes of this guidance may include students, children, residents, clients, patients and 3rd party providers.

#Accommodation facilities may include supported residential services, high rise towers, boarding houses, boarding schools and hotels

^Every facility should have clearly written protocols to direct cleaning staff.

Basic training for cleaners

The education and training of cleaning personnel engaged to carry out decontamination cleaning should include:

- Basic infection control, hand hygiene and PPE training for [COVID-19](https://www.health.gov.au/resources/apps-and-tools/covid-19-infection-control-training)
<<https://www.health.gov.au/resources/apps-and-tools/covid-19-infection-control-training>>

Optional but highly recommended training:

- VET (Vocational Education & Training) training via an RTO (Registered Training Organisation):
 - The [Accredited training unit: HLTINFCOV001](https://training.gov.au/Training/Details/HLTINFCOV001)
<<https://training.gov.au/Training/Details/HLTINFCOV001>> - Comply with infection prevention and control policies and procedures.
 - [List of RTOs](https://training.gov.au/Search/SearchOrganisation?nrtCodeTitle=HLTINFCOV001) < <https://training.gov.au/Search/SearchOrganisation?nrtCodeTitle=HLTINFCOV001>> approved to offer this course

Why environmental cleaning is important

Commonly COVID-19 spreads through close contact with an infected person and is typically transmitted via respiratory droplets (produced when an infected person coughs or sneezes).

It can survive on surfaces, depending on the type of surface and the ambient temperature. Less likely than droplet transmission but possible, the employee may acquire the infection if they touch a contaminated object or surface, then touch their mouth, nose or eyes.

What happens when there is a confirmed case with COVID-19

DHHS will contact the facility or workplace if an employee or visitor has been diagnosed with COVID-19 and has been considered infectious while on the premises. The facility or workplace will need to be thoroughly cleaned and disinfected before it can be re-opened and staff can return to work.

A member of the DHHS outbreak team may undertake an onsite assessment or request specific information about the site layout, and, following discussions with the facility manager, establish which areas are required to be cleaned and disinfected (e.g. areas within the facility/workplace used/visited by the case, such as offices, bathrooms and common areas).

The area(s) will need to be closed to prevent ambulant traffic prior to and during cleaning and disinfection. When cleaning and disinfection begins, if possible, outside doors and windows should be opened to increase air circulation.

Information for cleaners

The importance of cleaning AND disinfection

Disinfectants may be inactivated by the presence of organic matter therefore physical cleaning must be undertaken prior to the application of a chemical disinfectant.

- **Cleaning** refers to the mechanical action, using a detergent and warm water to remove dirt.
- **Disinfection** is the use of chemicals to kill germs. It is important to remember to **clean** with detergent **before** a disinfectant is used.

Use of personal protective equipment (PPE) when cleaning

The risk of acquiring COVID-19 when cleaning is not as great as the risk when face to face with a sick person who may be coughing or sneezing.

- Avoid touching your face, especially your mouth, nose, eyes and the PPE (i.e. mask and eyewear) whilst cleaning.
- Recommended personal protective equipment (PPE):
 - Perform hand hygiene before and after removal of PPE.
 - Mask and eye protection such as protective goggles or a face-shield. These act to prevent you inadvertently touching your face with contaminated hands and fingers, whether gloved or not.
Prescription glasses are not protective.
 - Disposable gloves.
 - Plastic apron or a disposable gown should be worn to protect clothing from damage by the cleaning and disinfectant solutions.
 - Coveralls may be worn but only if training has been undertaken.
 - The Department of Education and Training has produced a [demonstration video](https://vimeo.com/420124799/030d5447f8) <<https://vimeo.com/420124799/030d5447f8>> of the steps to be undertaken when donning (putting on) and doffing (taking off) PPE with a gown and with coveralls.
- PPE should be removed and discarded into the appropriate waste stream before going on breaks and on completion of the cleaning job.

Preparation

Prepare your equipment

- Gather all equipment (cleaning equipment, disinfectant solution, plastic bags). You may need signage to prevent unauthorised people from entering the cleaning area.
- Before you begin, make sure your equipment is clean. For example — wipe down your mop handles, use clean mop heads and make sure your buckets do not have residual dirt.

Prepare yourself

- **Perform hand hygiene**
- **Put on your PPE**

Prepare the area

- To facilitate cleaning and disinfection of all surfaces:
 - remove clutter and discard disposable items/waste
 - items that are not used repeatedly or frequently touched, that is within the last 24 to 72 hours should be placed in a clear plastic bag and stored (for example, paper documents).
- For items that require laundering, arrange for these to be sent to a commercial laundry or washed in an on-site washing machine (if available).
- Remove crockery and cutlery. Place in an on-site dishwasher (if available) or wash in hot soapy water.
- Identify soft furnishings which need to be cleaned with the steam cleaner.

Prepare the neutral detergent and the disinfectant solution:

- Follow manufacturer's instructions for appropriate dilution and use (see Appendix one).
- Wear gloves and eye protection when handling.
- Solutions should be made up as they are needed. Pre-diluted bleach solutions lose potency over time and on exposure to sun-light and as such need to be made up fresh daily.
- Only use bleach on non-porous surfaces as it may damage other surfaces.

Clean and disinfect

- Thoroughly clean surfaces using detergent and water.

- Apply disinfectant to surfaces using disposable paper towel or a disposable cloth. If non-disposable cloths are used, ensure they are laundered and dried before reusing.
- Ensure surfaces remain wet for the period of time required to kill the virus (this is known as contact time) as specified by the manufacturer. If no time is specified, leave on the surface for 10 minutes.
- Wipe disinfectant off surfaces to prevent damage.
- Remove and discard gloves. If gloves are reusable, wash with soap and water after use and leave to dry. Wash hands with soap and water or use an alcohol-based hand rub immediately after removing gloves.

2-in-1 products combine a detergent and TGA listed hospital grade disinfectant product with activity against viruses. These may be used as long as the manufacturer's instructions are followed regarding dilution, use and contact times for disinfection (that is, how long the product must remain on the surface to ensure disinfection takes place).

Swabbing surfaces for COVID-19 after cleaning, is not required. A visual inspection is sufficient.

Choice, preparation and use of disinfectants

Disinfectants containing $\geq 70\%$ alcohol, quaternary ammonium compounds such as benzalkonium chloride or diluted household bleach including products containing sodium hypochlorite are suitable.

[If purchasing any product from a supplier always ask for a material safety data sheet \(MSDS\). If the product is purchased in store, carefully read the instructions on the label, follow the application and the safety instructions.](#)

Disinfectants that may be used for COVID-19 can be found in the [Australian Register of Therapeutic Goods \(ARTG\)](#) <<https://www.tga.gov.au/disinfectants-use-against-covid-19-artg-legal-supply-australia>>.

A household or commercial grade virucidal disinfectant is suitable to use in non-healthcare workplaces. It must be one that can kill viruses. This should be written on the label as virucidal or anti-viral.

- The most readily available disinfectants are chlorine-based products (household bleach). To achieve the correct dilution, follow the manufacturer's instructions or use the chlorine dilutions calculator to achieve a 1000 parts per million (ppm) dilution.
- For the chlorine dilutions calculator refer to [Appendix 1](#).
- Once diluted, bleach solutions lose potency over time and on exposure to sun-light and so must be made up prior to use.

Cleaning and disinfection of carpets and soft furnishings

Soft furnishings or fabric covered items (for example, fabric covered chairs or car seats) that cannot be wiped clean or washed in a washing machine should be steam cleaned.

Use hot water extraction* cleaning equipment that releases at a minimum of 70 degrees Celsius under pressure must be used to ensure appropriate disinfection. Allow to dry thoroughly before re-use.

**Hot water extraction is a method of carpet cleaning that involves a combination of cleaning agents and water being injected into the carpet at high pressure and soil being removed by a vacuum. It is sometimes inaccurately called steam cleaning because steam escapes incidentally from the hot water.*

Management of linen, reusable cleaning equipment, crockery and cutlery

If there are items that can be laundered, such as towels, linen, mop heads, reusable cleaning cloths and toys launder them in accordance with the manufacturer's instructions using the hottest setting possible. Do not shake dirty laundry as this may disperse the virus through the air. Dry items completely.

Contain all linen and reusable cleaning equipment (that is, mop heads & cleaning cloths) before removal from the area in a plastic bag. Transport promptly for immediate washing.

Wash crockery and cutlery in a dishwasher on the hottest setting possible. If a dishwasher is not available, hand wash with hot soapy water and allow to air dry.

Cleaning of electronic equipment

Electronic equipment includes the following: printers, mobile phones, tablets, touch-screens, remote controls, mouse and keyboards.

For electronic equipment follow the manufacturer's instructions for cleaning and disinfection products.

If no manufacturer guidance is available, consider the use of disinfectant wipes or alcohol-based wipes containing at least 70% alcohol.

- Information for Apple devices may be found [here](https://support.apple.com/en-us/HT204172) <<https://support.apple.com/en-us/HT204172>>
- Information for Microsoft devices may be found [here](https://support.microsoft.com/en-us/help/4023504/surface-clean-and-care-for-your-surface) <<https://support.microsoft.com/en-us/help/4023504/surface-clean-and-care-for-your-surface>>
- Information for Hewlett Packard may be found [here](https://support.hp.com/us-en/product/samsung-xpress-sl-c480-color-laser-multifunction-printer-series/16462546/document/c00292159) <<https://support.hp.com/us-en/product/samsung-xpress-sl-c480-color-laser-multifunction-printer-series/16462546/document/c00292159>>

Cleaning Screens

Always refer to the manufacturer's guidelines as the types of screens vary. It will depend on whether or not the screen has a glass covering over an LCD screen. LCD screens should not be cleaned and/or disinfected with a disinfectant wipe, alcohol based wipe, or glass cleaner as this may leave a glare causing film.

LCD screens should only be cleaned with a microfibre cloth dampened with water. A mild soap may be used but check with the manufacturer guidelines.

Cleaning tips

- Turn the power off and unplug device.
- Use lint free or micro fibre cloths.
 - Avoid abrasive cloths, towels, paper towels or similar items
- When using a disinfectant it is important to follow the contact time on the label.
- Start by cleaning the screen. Wipe carefully in one direction, move from the top of the screen to the bottom, then commence on the hard, porous surfaces and finish with the power cords and other cables.
 - Avoid excessive wiping or rubbing.
 - Don't let liquids/moisture into any openings. Do not submerge the item into a cleaning solution.
 - Don't use aerosol sprays, bleaches or abrasive cleaners.
 - Spray solutions should only be used when sprayed into a lint free cloth.
- Ensure all surfaces have completely air-dried before turning the device on after cleaning.
 - Allow laptops to fully dry before closing.
- Keyboards
 - Remove debris with a small vacuum cleaner fitting.
 - Use a moist cloth with recommended solution or disinfectant wipe to clean/disinfect.

Private accommodation facilities

General information

Private accommodation facilities, such as private homes, multi-dwelling properties, student accommodation and boarding houses should have in place a routine cleaning and disinfection plan for frequently touched areas.

If a resident is a confirmed COVID-19 case they should be isolated from the other residents. Specific information on quarantine and isolation is available on the [department's site](https://www.dhhs.vic.gov.au/self-quarantine-coronavirus-covid-19) <<https://www.dhhs.vic.gov.au/self-quarantine-coronavirus-covid-19>>.

[Choice and preparation of disinfectants](#) has been described in this document.

Cleaning a private residence when a COVID-19 case remains on the premises

When a resident is sick and isolated within a home, the cleaning and disinfection of frequently touched (non-isolation) areas should continue daily by the other residents. The living space designated for the COVID-19 case should not be cleaned by other house members while the resident remains infectious. The other residents will be deemed close contacts by the DHHS and will be in quarantine.

Residents may provide cleaning equipment to the confirmed case if appropriate (that is if the confirmed case is well enough to clean their own environment). If a bathroom area needs to be shared between a confirmed case and other residents, the confirmed case should clean and disinfect after each use. If the cleaning cannot be undertaken by the confirmed case, a fellow resident, wearing a mask and gloves should wait as long as possible before cleaning and disinfecting and prior to being used by other residents.

Clothing and bedding, if soiled, may be laundered in a domestic washing machine using the hottest possible setting (as previously described) and then dried in a tumble dryer. The confirmed case should clean and disinfect all areas that they were in contact with whilst undertaking laundering.

There may be some occasions when the confirmed case needs to leave the isolation area. This may be to use the bathroom facilities or launder clothing and bedding. If this is essential, they should inform the fellow residents so they have time to apply a mask, they should also wear a mask, perform hand hygiene prior to leaving and ensure physical distancing of 1.5 metres is maintained.

Cleaning a multi-dwelling property or boarding house when a COVID-19 case remains on the premises

The site or property manager should maintain the environmental cleaning and disinfection schedule as outlined in the [guideline for multi dwelling properties](#).

Cleaning when the confirmed case is no longer infectious

When the resident is no longer infectious and/or the other residents are no longer deemed close contacts the following cleaning and disinfection should be undertaken as soon as possible.

1. Using detergent and water, clean the furniture from cleanest to dirtiest (e.g. toilets are cleaned last) and high to low.
 - Walls and ceilings may not need to be cleaned unless there is evidence of gross contamination with respiratory secretions. If required, clean only to touch height and include frequently touched areas
 - Cleaning cloths may be disposable or reusable.
2. Using TGA listed/bleach disinfectant solution, clean the furniture from high to low (as above)
3. Allow for contact time of disinfectant (refer to product information)
4. Wipe off residual disinfectant.
5. Items that may be laundered such as bedding, towels, cushion covers and reusable cleaning cloths should be placed in a domestic washing machine using the hottest possible setting (as previously described) and then dried in a tumble dryer or air dried (and if possible outside on a clothes line)
6. Soft furnishings that cannot be laundered such as furniture, curtains and carpet may be spot cleaned with warm soapy water and vacuumed.
7. Carpets should be vacuumed.
8. Hard floors should be mopped with disinfectant solution.
9. When cleaning is completed
 - Clean and disinfect the reusable cleaning equipment such as mops and buckets, and vacuum cleaner by wiping down (steps 1-4).
 - Reusable cleaning cloths should be laundered.
 - If disposable cleaning equipment used, such as cloths and mop heads, discard into the general waste bin.

Outdoor areas

Public areas (playgrounds, public barbecue areas, parks)

- The risk of transmission from outdoor surfaces such as at outdoor facilities is low as the COVID-19 is unlikely to last for very long periods on outdoor surfaces, given exposure to wind, rain and sunshine (i.e. UV light). Place reminders for the public to adhere to hand and respiratory hygiene and physical distancing principles.
- Local Government Areas (councils) or property managers should have in place a program to clean and disinfect public toilets at least once per day. There should be in place processes that allow the public to report identified soiled surfaces.
- Maintain usual cleaning and disinfecting practices for public barbecues. Provide advice to users of public barbecues to clean them before and after use.

Maintain usual cleaning practices for playgrounds and other similar outdoor areas

Spraying disinfectant on pathways, poles and paths is not an efficient use of resources and has not been proven to reduce the risk of COVID-19 transmission.

Pool areas, hot tubs or spas (private and public facilities)

There is no evidence that the virus that causes COVID-19 can spread directly to humans from water in pools, hot tubs or spas, or water play areas. Proper operation, maintenance, and chemical disinfection of pools, hot tubs or spas, and water playgrounds should kill the virus that causes COVID-19.

Waste

Following a confirmed COVID-19 case at a workplace or facility, any waste generated by deep cleaning or clean up processes should be disposed as clinical waste.

Information on how to dispose of clinical waste can be found at the EPA website: Coronavirus (COVID-19): disposing clinical waste: <https://www.epa.vic.gov.au/about-epa/publications/1901-1>

Coronavirus (COVID-19): Disposing of PPE at home and in the workplace: <https://www.epa.vic.gov.au/about-epa/publications/1898>

Fogging (wet or dry)

DHHS does NOT RECOMMEND the use of dry or wet fogging for COVID-19 cleaning and disinfection.

- Dry fogging, under high pressure with a fine bore nozzle, produces uniformly fine droplets. The droplet size is less than 10 microns. This leaves surfaces dry.
- Wet fogging is a broad term and refers to systems which use significantly lower pressures and variation in the bore size of the nozzle. In some systems the droplet size is between 10-30 microns but other systems the droplet size is greater than 100 microns (misting). Surfaces are always left wet.

Fogging requires specialised training and equipment. While it may be used in some industries for routine environmental disinfection it is **not a recommended** disinfection process for COVID-19 for the following reasons:

1. Fogging alone does not achieve the mechanical action of cleaning (removing dirt and grime).
 - Physical removal of dirt is an important step prior to disinfection and should not be omitted.
2. There are potential health and safety risks associated with aerosolised chemical disinfectants including skin, eye, and respiratory irritation. This risk is increased with prolonged exposure experienced by cleaners and vulnerable occupants such as infants and asthmatics.
3. Fogging may leave high levels of toxic residues. Soft furnishings may continue to release the chemicals for a long time after treatment resulting in potential occupational exposure risks.
4. There is significant risk that fogging will not give the disinfectant sufficient contact with the surface to disinfect it effectively.

- Factors that may inhibit adequate disinfection include the following: fogging is carried out too quickly, the mist is too fine and too close to the surface, or the air flow is too great.
5. Fogging chemicals, if allowed to go the HVAC system (heating, ventilation, air conditioning) may result in potential occupational exposures to other building users.

Alternative cleaning methods not outlined in this guideline

If an alternative option is suggested as a COVID-19 solution due diligence is required.

The efficacy of alternative disinfection methods, such as ultrasonic waves, high intensity UV radiation, and LED blue light against COVID-19 virus is not known.

The DHHS does not recommend the use of sanitising tunnels. There is no evidence that they are effective in reducing the spread of COVID-19. Chemicals used in sanitising tunnels could cause skin, eye, or respiratory irritation or damage.

The DHHS only recommends the use of the disinfectants against [COVID-19 that are registered](#) as previously described in this document.

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<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/disinfecting-your-home.html>
<https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>

Example CHECKLIST for workplaces (Page 1)

Personal Protective Equipment

Mark

box with: ✓ / x/ NA

10. Hand Hygiene (HH) is available – Handwashing facilities or hand sanitiser	
11. Gloves – (May be reusable or disposable)—must perform HH before putting on and taking off	
12. Disposable face mask – Before removing perform HH. Do not touch the front. Use the ties or ear loops to remove.	
13. Protective eyewear or Face shield (May be reusable or disposable) – Prescription glasses are not protective	
14. Plastic apron or full-length disposable gown. Coveralls may be used if trained in donning and doffing. – This is precautionary to protect clothing from the chemicals used.	

Cleaning equipment

15. Large supply of disposable cleaning cloths – Reusable cloths may be used if the site has a process for laundering them. o This maybe a site-based washing machine & dryer or a pre-existing contract with a commercial laundry.	
16. Mop & bucket – Reusable mop heads may be used if the site or the cleaning contractor has a process for laundering them. – Disposable mop heads should be discarded in general waste.	
17. Extension pole for high level cleaning	
18. 2 Step clean Step 1: Neutral detergent Step 2: Bleach Solution or TGA approved disinfectant with virucidal activity – Read the product label to see if it is effective against viruses – Follow the directions for preparation – Strictly follow dilution requirements – Read the label for contact time – Wipe off residual disinfectant after contact time completed.	
OR	
19. 2-in-1 clean – Use a TGA approved 2-in-1 detergent/disinfectant product – Read the product label to see if it is effective against viruses – Follow the directions for preparation – Read the label for contact time	
20. Steam cleaner (basic requirement-- release steam at a minimum of 70°C under pressure) – For soft furnishings or fabric items that cannot be washed in a washing machine or withstand bleach	
21. Large supply of plastic waste bags – Check with site manager where these will go.	

Example CHECKLIST for workplaces (Page2)

Area preparation

22. Define the area to be cleaned. – This will be determined in discussion with the DHHS outbreak team and the senior manager of the workplace. – They will include areas within the workplace used/visited by the COVID-19 positive case such as offices, bathrooms and common areas.	
23. Close off area to be cleaned – Use signage to prevent accidental entry by others – If possible, open outside doors and windows to increase air circulation just prior to cleaning and disinfection.	
24. Remove clutter and discard disposable items/waste into general waste bags, seal and dispose	
25. Quarantine items that need to be kept. – Place items in a clear plastic bag and store for 72 hours (e.g. paper documents).	
26. Items that require laundering. – Do not shake laundry – Arrange for these to be sent to commercial laundry or washed in an on-site washing machine (if available). In workplaces where there are children i.e. schools or childcare centres, this may include dress up clothing.	
27. Remove crockery and cutlery – Place in an on-site dishwasher (if available) or wash in warm soapy water.	
28. Identify soft furnishings which need to be cleaned with the steam cleaner	

Cleaning and Disinfection

29. Using detergent and water, clean the furniture from cleanest to dirtiest (e.g. toilets are cleaned last) and high to low. – Walls and ceilings may not need to be cleaned unless there is evidence of gross contamination of respiratory secretions. Walls may only need to be cleaned to touch height and frequently touched areas. This should be discussed with the DHHS outbreak team.	
30. Using TGA listed/bleach disinfectant solution, clean the furniture from high to low (as above)	
31. Allow for contact time of disinfectant (refer to product information)	
32. Wipe off residual disinfectant.	
33. Steam clean soft furnishings	

After

34. Clean all re-usable cleaning equipment with disinfectant solution – Wipe down mop handles, buckets and steam cleaner	
35. Bag cleaning items that need to be laundered in a plastic bag and arrange to be laundered	
36. Remove all waste into general waste	
37. Site inspection with facility manager and DHHS outbreak team representative	

Appendix 1

The most readily available disinfectants are chlorine-based products (household bleach). To achieve the correct dilution, follow the manufacturer's instructions or use the chlorine dilutions calculator (see Table 1) to achieve a 1000ppm dilution. Once diluted, bleach solutions lose potency over time and on exposure to sunlight and so must be made up prior to use.

Chlorine dilutions calculator

Household bleach comes in a variety of strengths. The concentration of the active ingredient — hypochlorous acid — can be found on the product label.

Table 1. Recipes to achieve a 1000 ppm (0.1%) bleach solution

Original strength of bleach		Disinfectant recipe		Volume in standard 10L bucket
%	Parts per million	Parts of bleach	Parts of water	
1	10,000	1	9	1000 mL
2	20,000	1	19	500 mL
3	30,000	1	29	333 mL
4	40,000	1	39	250 mL
5	50,000	1	49	200 mL

For other concentrations of chlorine-based sanitisers not listed in the table above, a dilutions calculator can be found on the department's website.

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ATTACHMENT 9.6

COVID-19 Rapid Industry Guidance (Amended August 2020)

Protocols for Temperature Screening in the Building and Construction Industry

Note: These protocols are required to be adopted as a minimum in any documented company procedure for Temperature Screening.

1 What is the purpose of Temperature Screening?

Temperature screening is a potential identification measure to reduce the risk of workplace infections and particularly the spread of the COVID-19 virus in the building and construction industry. These protocols have been developed by the COVID-19 Rapid Industry Group for implementation as part of a suite of measures to maintain a safe working environment for our stakeholders.

Specifically, temperature screening is proposed as a pre-requisite to enter building and construction industry sites or alternatively, as an optional access requirement at certain locations or at certain times.

2 What equipment is to be used and how does it work?

A non-contact infrared thermometer will be used for the test, with an accuracy of +/- 0.2 degrees celsius.

These thermometers require no skin contact.

These units will be commercially manufactured and calibrated thermometers.

3 Who is to operate the equipment?

The thermometers will be operated by suitably trained staff, using the following PPE:

- Respiratory Mask
- Approved gloves
- Eye Protection and/or face shield

There must be provision for the regular cleaning of the thermometer and replacement and disposal of PPE at the testing location.

4 What training is required to use the equipment?

The minimum requirement is for Level 2 First Aid and the required training to use the equipment in accordance with manufacturer's specifications.

Such personnel may be a

- Staff member
- Supervisor
- First Aider
- Health and Safety Representative

5 Where is the Screening Location?

The screening location should be set up in an area that is clearly visible near the entrance to the site, however it must not obstruct the site entrance and must allow for the workers to maintain physical distancing requirements in the vicinity of the entrance to site. Appropriate signage and messaging should be provided to explain the process to the workforce.

6 How is the Testing Conducted?

The thermometer uses infrared light (similar to a TV remote) to read body temperature. It is not a laser and will not cause harm to the skin or eyes.

The thermometer is held near the forehead, but does not touch it and takes a reading in one second. It is cleaned before and after each reading

7 What is the expected temperature range?

There is not universal agreement on what is a 'normal' temperature, However, any temperature over 37.5C is abnormally high and is usually caused by an infection or illness.

8 What happens if the range is exceeded?

If the worker's temperature exceeds 37.5C, the worker will not be allowed to enter site. The worker will be required to rest in an agreed area and be re-tested after 30 mins. Should the temperature remain above 37.5C after the second infrared test, the worker will be required to undergo a further temperature test using an ear thermometer.

9 Is there a supplementary test and how is that done?

An ear thermometer will be used to conduct a secondary temperature test for workers who remain above 37.5C after the second infrared test. A trained first aider will operate the ear thermometer, which is to be commercially manufactured and calibrated.

If the worker remains over 37.5C after the ear thermometer test, they may not enter site and should seek medical advice and clearance before they can resume work

ATTACHMENT 9.7

COVID-19 Rapid Industry Guidance (March 2021)

Advice on Airflow and Ventilation in the Building and Construction Industry

This information is provided in conjunction with the Building and Construction Industry COVID-19 Guidelines. Please seek the advice from an accredited provider for the installation of any HVAC system.

“Ensuring heating, ventilation and air conditioning (HVAC) systems are well-maintained and operating properly is important for indoor workplaces to manage the risk of COVID-19 transmission. This includes any risks associated with the HVAC system being restarted after a period of shutdown.” Safe Work Australia

1 COVID-19 and Airborne Transmission

Aerosols emitted from a person with COVID-19 can pose a risk of airborne transmission. With the newer, more transmissible variants of the coronavirus now present in Australia, the role of Heating, Ventilating and Air Conditioning systems (HVAC) is even more important in reducing the risk of transmission through the air on building and construction sites.

2 What is the risk in the Building and Construction Industry?

The possible risk to workers in the building and construction industry arises when they are required to congregate in an enclosed area. This may be in any one of the following examples:

- Site offices
- Crib rooms and changing sheds
- Ablution Blocks
- During tool box or pre-start meetings
- When working in enclosed spaces with others
- When travelling in vehicles

3 What are the best precautions that can be taken?

The simplest and best precautions that can be taken wherever possible involve increasing ventilation in a given space and diluting the aerosol concentration in the air. This includes:

- Congregating outside whenever possible
- Opening doors and windows in enclosed rooms (windows in vehicles)
- Turning on air conditioners and extraction fans and
- Where adequate fresh air is available to be accessed, ensure that they are set to **Fresh** to minimise air recirculation and the units are properly maintained, filters cleaned etc.
- If you have exhaust fans in restrooms and other facilities, check they are functional and operating continuously and at full capacity when the building is occupied.
- Exhaust should be directed outdoors and away from windows and air intake systems of your building and that of any surrounding buildings.

4 What else can we do?

In circumstances where ventilation and air movement is minimal (for example in basement crib rooms and ablution facilities) the next options are to consider:

- Provide supplementary mechanical ventilation arrangements for adequate air dilution while ensuring that potentially contaminated air is not blown past multiple people and is exhausted appropriately.
-
- Room Air Purifiers. These are commercially available units that will work to scrub the air through filtration and may also include UV treatment to potentially kill viruses including SARS-CoV-2. *See below for Supplementary Note on Room Air Purifiers*

5 Where can I get further information and seek advice?

The building and construction industry engages experts in HVAC systems including contractors associated with the Air Conditioning and Mechanical Contractors' Association. HVAC practitioners can provide guidance specific to your site situation, which will depend on a range of factors including building design, use and occupancy and effectiveness of current airflow.

6 Don't forget about the Density Quotient!

The density quotient of one person per two square metres applies where electronic contact tracing is in operation. However, this does not mean that you have to allow the maximum number of workers in an area at any one time and staggering of meal and crib breaks is a good way of achieving this.

7 Where can I get more information?

See below source material and further information.

- AMCA Position Statement
https://amca.com.au/Public/News/News_Items/202006/Ventilation-can-help-reduce-risk-of-airborne-transmission-of-COVID-19.aspx
- Key COVID-19 Building Services Advisory Notes (AG Coombs)
<https://www.agcoombs.com.au/covid-19-building-services-resources/>
- Safe Work Australia Fact Sheet -Improving Ventilation in Indoor Workplaces
<https://www.safeworkaustralia.gov.au/doc/improving-ventilation-indoor-workplaces-covid-19>

4 March 2021

Supplementary Note on Room Air Purifiers

Room Air Purifiers can be portable on casters or wall mounted. They can be placed/secured in a room and generally require a normal power outlet.

There are number of different types. For this purpose they can be categorised into:

- 1 Recirculating filter units featuring a fan, a high performance particulate filter, sometimes a carbon filter to remove odours and or sometimes a ionisation stage to assist with 'clumping' small particles together for better filtration. They will not generally remove all very small aerosols or free virus particles however can significantly **clean** the air.
- 2 Recirculating filter units which provide a high level of filtration/air cleaning as described in #1. above, and include a **disinfection** section that typically uses UV radiation to inactivate bacteria and viruses.

Unlike a room air conditioner these units require significant maintenance to retain their effectiveness. The high air flows, type of filtration and the environment they will likely work in mean that filters will load up with dust and contaminants relatively quickly and require regular replacement. Given the potential contaminated nature of the loaded filters their removal, disposal and replacement require particular attention/safe work methods.

Should you require further information and/or assistance with installation of an air purifier in your particular circumstances, please contact an authorised supplier and installation contractor.