



JOINT MEDIA RELEASE BY WESTERN AUSTRALIAN BUILDING AND CONSTRUCTION INDUSTRY ASSOCIATIONS AND UNIONS - (DATE)

Construction industry leaders renew call for COVID safety on WA sites

A coalition of Western Australian construction industry associations and trade unions has released an updated COVID-19 risk management guide and renewed its call for constant vigilance and close observance of infection avoidance protocols on all WA construction sites.

The Construction Industry Leaders Group, comprising twelve industry associations and trade unions, released their first *COVID-19 Health, Safety and Wellbeing Guideline for the Western Australian Building and Construction Industry* in May last year. Since then, WA's building and construction industry has continued to operate safely, with appropriate physical distancing, hygiene and other controls in place to minimise the risk of transmission of the virus. To date there have been no known cases of COVID-19 on Western Australian construction sites.

MATES in Construction CEO and Leaders Group chairman Liam Cubbage said that with lockdowns in New South Wales, Victoria and South Australia causing serious disruption and affecting livelihoods, it was timely to remind everyone in the WA construction industry of the need to re-double their on-site efforts to manage the risk of the virus.

"Clearly the higher transmissibility of the Delta virus variant and the resulting lockdowns in other states have underlined the fact that here in WA, we can't be complacent for a moment about following the distancing and hygiene protocols," Mr Cubbage said.

"If we don't adopt the highest of standards at our sites, we increase the risk of our industry being disrupted if there are community cases in WA."

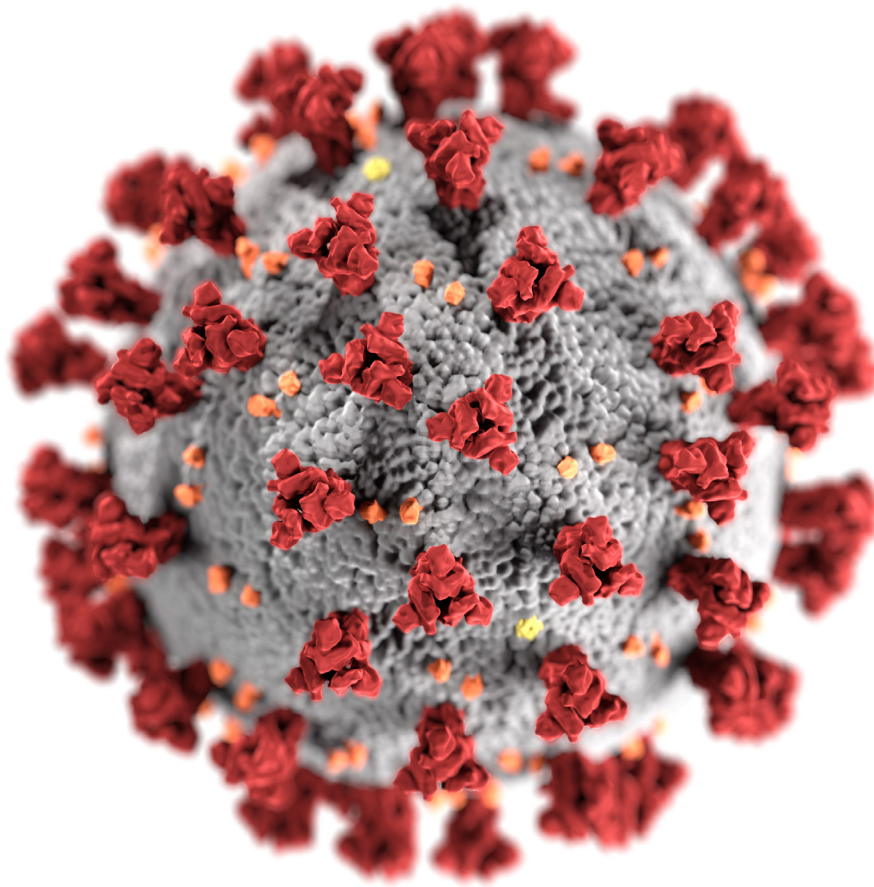
Mr Cubbage said the twelve organisations were united in urging all people employed in the industry to get vaccinated. "Vaccination is the single most important measure to bring the pandemic and its dramatic dislocation of communities to an end," he said.

"In the meantime, we urge all stakeholders in the WA construction industry to commit to taking every possible action to minimise the potential for an outbreak within Western Australia in general, and within the construction industry in particular."

The building and construction industry employs over 120,000 West Australians, 94% of who are employed in small businesses, and turns over around \$33 billion each year.

The guideline is attached, and is also available through participating organisations: CFMEU Construction & General Division WA; Civil Contractors Federation WA; Construction Contractors Association of WA; Construction Training Fund; Electrical Trades Union - Electrical, Energy & Services Division, WA Branch; Master Painters & Decorators Australia; Master Plumbers and Gasfitters Association WA; MATES in Construction; National Electrical & Communications Association WA; National Fire Industry Association; Plumbing and Pipe Trades Employees Union; and ReddiFund.

COVID-19 health, safety and wellbeing guideline for the Western Australian building and construction industry



CFMEU
CONSTRUCTION



COVID-19 (coronavirus) health, safety and wellbeing guideline for the Western Australian building and construction industry

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Purpose

The purpose of this Guideline is to provide a consolidated up-to-date source of reliable information for all members of the Industry to assist them to effectively manage the health, safety and wellbeing impacts of COVID-19.

Scope

This Guideline should inform activities of all people and organisations who have a role in the safe and reliable operation of the Construction Industry.

The Guideline is relevant to all sectors of the Industry including, commercial and residential building, civil construction, and construction on resource sector sites.

The Guideline is designed to be an additional source; it is not intended to replace information provided by individual Industry organisations or companies.

The Guideline is relevant to all personnel attending on a building site or project, including management, staff, employees, contractors and service providers, as applicable.

The Guideline seeks to be consistent with other information made available by each of the organisations that have endorsed the Guideline.

If there are any inconsistencies between this Guideline and other information provided by an industry organisation or Government, clarification should be sought from the relevant industry organisation. For this purpose, and for all enquiries regarding this Guideline, the following contacts should be used:

Organisation	Name	Phone	Email
CFMEU Construction & General Division WA	Bob Benkesser, OS&H Officer	(08) 9228 6900	bbenkesser@cfmeuwa.com
Civil Contractors Federation WA	Andy Graham, CEO	(08) 9414 1486	agraham@ccfwa.com.au
Construction Contractors Association	Peter Moore, CEO	0419 800 733	ccawestaust@gmail.com
Construction Training Fund	Tiffany Allen, CEO	(08) 9244 0100	tallen@ctf.wa.gov.au
Electrical Trades Union - Electrical, Energy & Services Division, WA Branch	Peter Carter, State Secretary	0403 601 991	peter@etuwa.com.au
Master Painters & Decorators Australia	Amanda Dawes, CEO	(08) 9471 6673	amandad@masterpainters.asn.au
Master Plumbers and Gasfitters Association WA	Murray Thomas, CEO	(08) 9471 6617	murrayt@mpawa.asn.au
MATES in Construction	Brad Geatches, CEO	(08) 9463 6664	bgeatches@micwa.org.au
National Electrical & Communications Association WA	Carl Copeland, Chapter Secretary	(08) 6241 6100	Carl.Copeland@necawa.asn.au
National Fire Industry Association	Glen Chatterton	(07) 3882 2273	gchatterton@nfia.com.au
Plumbing and Pipe Trades Employees Union	Brian Bintley, State Secretary	0477 551 505	b.bintley@ppteu.asn.au
ReddiFund	Kieron Gubbins, CEO	0439 285 833	kgubbins@reddifund.com.au

The Guideline will be regularly updated to reflect changes resulting from Government announcements, directions of the Western Australia Chief Health Officer and best practices.

The up-to-date Guideline is available at the websites of each of the above organisations.

Background

During the first 16 months of the Pandemic WA's Construction Industry has continued to operate, including during lock-downs. The Industry's efforts to manage COVID-19 risk has contributed to this outcome.

The Delta variant of the virus is reported to be significantly more contagious and its transmission in NSW and South Australia has resulted in the Construction Industry in those States being shut-down during wider community lock-downs.

Disciplined management of COVID-19 transmission risk at WA Construction sites will materially reduce the risk of our Industry being shut-down in the event of future in-community transmission of the virus in WA. If all Construction sites do not adopt high standards, both in terms of the procedures they have in place and compliance with procedures, our Industry is far more likely to be disrupted during any future community lockdowns.

State of Emergency

The Western Australian Government has declared a State of Emergency to manage COVID-19. This provides the Chief Health Officer with additional powers to issue directions to help contain the spread of COVID-19 and keep WA safe.

The WA Government has worked effectively with representatives of the Building and Construction Industry ("the Industry") to manage the impacts of COVID-19 on construction employee wellbeing and on the operations of the industry.

This Guideline has been informed by information provided by WA Government authorities including WorkSafe and the WA Department of Health, and also by information prepared by the organisations that have endorsed them. They seek to guide employers and workers through the various health, safety and wellbeing workplace issues they may encounter arising from COVID-19.

Vaccination

Vaccination of as many adults as possible is regarded as the single most important measure to bring the Pandemic to an end and to allow communities to avoid ongoing pandemic related restrictions.

All workers in the WA Construction Industry are urged to get vaccinated, unless they have a pre-existing condition that prevents them from being vaccinated.

Controlling Risks on Site

Safe Work Australia has comprehensive information on managing COVID-19 risk in workplaces, which can be accessed at <https://www.safeworkaustralia.gov.au/covid-19-information-workplaces>.

Each Site should have a COVID Safety Plan developed taking into account this Guideline and information at the WA Government Department of Health COVID-19 website.

Risk Assessment

A risk assessment regarding the risk of COVID-19 to that workplace should be undertaken involving Health and Safety Representatives (HSR's). This is to identify areas and individuals which may be of greater risk. Strategies and controls should be implemented at the workplace to ensure the risk of spreading COVID-19 is reduced as far as practicable. Information on the following subjects is provided to support workplace risk assessments and development of strategies and controls:

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

Maintaining Site Contact Registers

It is very important that all sites have contact registers that must be completed by all personnel entering the workplace.

It is up to the Company controlling the site to decide how information about personnel entering the site is collected, provided the necessary details are recorded (name, phone number, date and time someone enters the premises). The three most common methods used by workplaces and venues are:

1. WA Government's SafeWA app, which provides an easy, safe and efficient digital contact register system. Use of this app is encouraged, and endorsed by WA Health.
2. Paper-based register – suggested formats and templates are available at the WA Government's Department of Health COVID-19 website.
3. Electronic-based register e.g. a form on a tablet at the front of your business.

If the SafeWA or an electronic-based register is used, it is also required to have a paper-based or manual register to ensure access to the Site is inclusive and personnel to choose not to use the SafeWA app to check-in.

Screening Workers Coming to Site

To minimise the risk of transmission of COVID-19 on site, employers should implement a two-phase screening process, which includes:

Initial Declaration – to be completed by all workers (including people who attend site), including current and new-starters. Each worker should declare, to the best of their knowledge, they:

- have not been diagnosed with COVID-19 in the last 14 days;
- are not in a period of 14-day quarantine as directed by a health professional;
- have not been overseas in the last 14 days;
- have not been in contact with anyone who has COVID-19;
- have not been in contact with anyone who has been tested for COVID-19 and is awaiting the result; and
- do not have anyone in their household with symptoms consistent with COVID-19.

Ongoing Declaration – Following the initial declaration, each worker should be asked prior to the commencement of each shift, to the best of their knowledge:

- have they been overseas or interstate in the last 14 days;
- have they been in contact with anyone who has COVID-19;
- have they been in contact with anyone who has been tested for COVID-19 and is awaiting the result; and
- do they have anyone in their household with symptoms consistent with COVID-19.

If a worker declares any of the above, they may be required to self-isolate.

Screening should be conducted while maintaining safe distances or over the phone before entering site, on a mobile app, via text message system, or other non-contact methods. Sharing of pens, notebooks and computers for the declaration process should be avoided.

Physical Distancing

Physical distancing of at least 1.5 metres between workers should be maintained wherever possible. Employers should consider each work task and whether there is a safe alternative way to undertake the work with appropriate physical distancing. Consideration should be given to:

- Marking safe distances in work, transit and break areas (e.g. on floors and walls).
- Different shift patterns to minimise the number of workers onsite (e.g. AM/PM shifts).
- Staggering start times, breaks and finish times to avoid congestion in high traffic areas.
- Minimising workers' contact with each other as they move around the site.
- Planning for how physical distancing will be maintained during inclement weather (e.g. use of lunch or crib rooms and amenities).
- Installing temporary physical barriers (e.g. 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) (e.g. gloves, masks, glasses).

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

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

Hygiene

Good hygiene practices and general cleaning helps to minimise the spread of COVID-19).

Employers must review general hygiene requirements and the cleaning regimes in place.

Employers must display health information in prominent locations on the construction site such as tea rooms, site offices, toilets, foyers, lifts and site entrances.

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 should include:

- Promoting regular hand washing with soap for at least 20 seconds. Employers should facilitate regular hand washing by providing ease of access/additional facilities where possible and by communicating to all workers where hand sanitisers are located and encouraging their regular use.
- Promoting good cough etiquette by covering your cough and sneeze, or cough into your elbow or shoulder.
- Avoiding touching nose, eyes or mouth.
- Providing hand sanitiser and/or hand washing facilities with soap at all site entrances and exits to hoists/plant, amenities and areas/levels of the site.

Employers must ensure that workers have access to appropriate amenities. Employers must review and revise the number and locations of amenities, to reduce movement around the site.

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. Touch-free and swipe through functionality should be provided as this eliminates the need to touch surfaces.
- Access to hand sanitiser.
- Rubbish bins with touch-free lids (e.g. foot pedal bins).
- Thorough and regular sanitation.
- Appropriate waste management systems.

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 (e.g. 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 (e.g. including handles, handrails) are wiped down before and after use.

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.

Cleaning and Disinfecting

Cleaning and disinfection of amenities and meal areas must occur between work group breaks.

Cleaning and disinfection of Personnel Hoists/plant should occur at the end of each hoist/plant operator shift.

Implement regular cleaning and disinfection (minimum of twice daily) to 'Frequently Touched Surfaces', surfaces such as toilets, door handles, stair handrails, light switches, lift buttons, table tops.

There should be an increased frequency of industrial grade cleaning/additional cleaning/disinfecting on sites across all areas with particular emphasis on commonly touched/communal surfaces.

Personnel Hoists

Workers using hoists and lifts may be at greater risk of exposure to COVID-19, because they are required to be in close contact with others and potentially contaminated surfaces.

Control measures to reduce the risk in personnel hoists should include systems of work, physical distancing, personal hygiene, PPE and cleaning. Further guidance material on personnel hoists risk COVID-19 risk control is provided at **Appendix 1**.

Mobile Plant and Vehicles

Wherever possible, one designated person should operate each item of mobile plant (e.g. excavators, loaders, skid steers). If this is not possible, touch surfaces are to be wiped down when leaving the machine.

Where multiple operators are needed, e.g. asphalt pavers, revise workflows as much as possible to minimise close contact. Where close contact is unavoidable, PPE should be worn.

One person per vehicle (i.e. just the driver) is permitted in trucks and single cab vehicles. Two people are permitted in dual cab vehicles, with the passenger seated in the rear on the passenger side.

Truck drivers should remain in their vehicles during loading/unloading of goods/materials, if possible.

Personal Protective Equipment (PPE)

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 (e.g. 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.

Common Areas

Common areas on sites, such as the amenities, pose risks and these are reduced by ensuring the following measures are adopted:

- Time spent in those areas must be limited so as not to breach limits on close contact recommended by the WA Department of Health.
- Staggering of meal breaks and separation of work groups to achieve maximum personal space and reduce the number of people accessing those areas at any one time consistent with the WA Government's requirements (i.e. the total number of persons 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 four).
- Sanitisation must occur between occupation of amenities by different work groups.
- Spread out furniture to ensure physical distancing measures in common areas.
- There should 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 the WA Department of Health (insert link to Department of Health guidelines).
- Workers electing to minimise amenity access.
- Staggered working hours must be considered on sites with appropriate consultation (however, consideration must be given to Construction Management Plans, and workers must be given adequate notice of a change in hours).

Inspections

Additional inspections of sites are likely to be conducted by WorkSafe. Everyone should ensure all measures are in place to ensure compliance. Employers and HSR's are encouraged to work together

to assist in achieving this important objective.

Travel

Adequate arrangements should 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 arriving at the work site and when returning to the work site during work.

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

General Communication

Ensuring everyone is informed is fundamental to managing this pandemic and ensuring the safe operations of construction sites.

These Guidelines have been developed to be communicated to all employers, workers and stakeholders. Everyone is urged to regularly promote and adhere to these Guidelines.

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

Toolbox talks should be regularly conducted, and workers encouraged to put forward ideas for changing work practices to avoid the spread of COVID-19. Where reasonably practicable, pre-start and toolbox meetings should be held outdoors with 1.5 metre spacing.

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, hygiene, and testing when experiencing symptoms.

Vulnerable Workers

The WA Department of Health has identified the following groups of people as vulnerable workers in relation to COVID-19:

- 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 should risk assess roles that may have a higher chance of exposure to COVID-19 and implement controls to address these risks. For example, higher risk roles may include (Peggy/ Cleaner, Hoist/ Lift Operator, First Aider).

Where practicable, vulnerable workers should not be assigned to higher risk roles.

Other Measures

Construction sites are diverse and vary in complexity, therefore employers should apply a risk-based approach and implement reasonably practical controls based on the environment and specific hazards at each site. In addition to the above strategies and controls other measures may include:

- Using alternatives to face to face meetings, where practicable.
- Reducing the length and numbers of people attending meetings, especially for critical

employees, by requiring some, or all, to dial in.

- Consider off-site fabrication.
- Ensure 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.

Additional measures during lockdown

Extra vigilance is essential during lockdown periods. Wearing of compliant face coverings on construction sites will be mandatory during lockdowns, unless performing vigorous work (e.g. scaffolding, steel fixing, concreting, etc). Even while performing vigorous work, a mask should be carried at all times. During lockdowns the 2 square metre rule should be observed where possible especially in restricted, shared areas like lifts and hoists.

What if a worker has been diagnosed with COVID-19?

If a worker becomes a confirmed case of 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.

A diagnosis of COVID-19 is a mandatory notification in WA, and the laboratory or health practitioner who makes the diagnosis must urgently inform the Department of Health.

Following notification to the Department of Health, the Public Health team first contacts the case and undertakes an interview, commencing the contact tracing process.

At the time of notification to the Department of Health, the worker will be at home, as they will be self-isolating after having a COVID test; the employer will be informed either by the worker or by the Public Health team.

A worker who is confirmed as a case of COVID-19 infection will need to go into isolation to prevent further spread of the virus to fellow workers, the public or their family. The Public Health team establishes if the case is safe in their home and may put them in touch with support agencies or health professionals to manage their health and social needs.

A worker with COVID-19 can return to work once they are released from isolation, as determined by the Public Health team; the worker will be told when they are released from isolation. Following the Public Health team determining that the affected worker is no longer required to isolate, the employer will facilitate an immediate return to work.

All confirmed cases of COVID-19 must undergo a detailed interview with a member of the Public Health team to ascertain all close contacts. Employers should work with the Public Health team to identify close contacts in the workplace, so that the correct people are identified and isolated. Close contacts need to quarantine (self-isolate) and these persons will be contacted by the Public Health team and provided with instructions.

Employer organisations and unions can call the WA Department of Health Information Line 13 268 43 if they want more information on the steps to be taken in these circumstances.

The principal/head contractor must advise relevant union representatives and appropriate arrangements should be made to communicate with all site workers as to the required actions, without delay.

All workers on the site must be fully informed of what has occurred as soon as possible, ensuring appropriate privacy considerations are complied with. The WA Department of Health 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 WA Department of Health must be adhered to.

Workers with a confirmed diagnosis of COVID-19 must follow all medical advice provided by their health care practitioner and the Public Health team.

The employer is required to accept any advice and direction of WA Department of Health 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.

Following a 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 WA Department of Health requirements and also manages the risks specific to the site.

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

Large and complex building and construction sites present a greater risk of coronavirus (COVID19) 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 relevant 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.

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 24 hours - this should be conducted by the Site Manager as a minimum.
- Cleaning of the site should be undertaken as per the WA Department of Health advice.
- A cleaner should be engaged to conduct the cleaning in accordance with the above advice.
- All common areas, hoists, plant, equipment and the work areas where the worker had been in the last 24 hours (as per the workplace mapping) should be cleaned.
- Cleaning should be undertaken with no workers on site.
- Upon completion of the cleaning, a signed record should be provided detailing the areas cleaned and the products used.
- This information is to be provided to the HSR and relevant unions.

Safe Work Australia has guidance material on cleaning to prevent the spread of COVID-19 (<https://www.safeworkaustralia.gov.au/covid-19-information-workplaces/cleaning-prevent-spread-covid-19>)

Employers and employees should also ensure that they take steps to prevent employees discriminating against others of a particular race/ethnic background and/or those who have contracted COVID-19. Employers should ensure managers and supervisors have been trained to identify and prevent this kind of discriminatory behaviour and that support is in place for workers who feel they are being discriminated against for these kinds of reasons. Employers should ensure

policies regarding anti-discrimination and privacy are up to date.

Workplace Mapping

If a worker has been confirmed as having COVID-19, those who are potentially affected need to be quickly identified.

Employers, in conjunction with HSR's, should implement processes to record the schedule and work locations for workers, that enables tracing of those who have had contact with the confirmed case.

The record should include:

- day and time work was undertaken;
- members of teams that worked together;
- specific work area on the construction site; and
- any breaks taken, including time and location.

Movement between sites, or areas within large sites, should be minimised.

Where attending multiple sites is necessary (e.g. for (HSR's), first aiders, emergency wardens), movement between sites should be recorded in the workplace mapping.

Workplace Management During Investigation

Following initial notification of a case of COVID-19, the Public Health team will undertake a situational analysis and make a risk assessment of the workplace. The Public Health team will assist the employer with decisions about when and if they need to send staff home prior to the end of a shift, and/or if they need to temporarily close the facility for cleaning, investigation or contact tracing purposes.

Additional Case Finding

Following the notification of a case of COVID-19 in a workplace, it may be recommended by the Public Health team to test other people in the workplace to determine if they have been infected. The Public Health team will provide advice about this (note: testing of asymptomatic people will require approval by the Chief Health Officer, which will be arranged by the Public Health team if needed).

Management of Close Contacts

The Public Health team will work with the site manager to identify all close contacts of confirmed cases of COVID-19 in their workforce. Where appropriate hygiene and physical distancing measures have been taken, a close contact may be considered as:

- an employee who has had greater than 15 minutes cumulative face-to-face contact in any setting while the person was considered 'infectious'; OR
- sharing of a closed space (same room) with a confirmed case for a prolonged period (e.g. more than 2 hours) while the case was infectious. Note, some facilities or work rooms are very large and these situations will be risk-assessed individually.

All close contacts will be required to quarantine (self-isolate) at home for 14 days following their last contact with the confirmed case and follow the Public Health team's directions. Following this period of quarantine, the employee may return to work (testing is not usually necessary).

What if a worker is experiencing COVID-19 symptoms but has not been diagnosed?

The WA Government advises that any person will be considered for COVID-19 testing if they meet the following criteria and another diagnosis is not more likely:

- presenting with a fever ($\geq 38^{\circ}\text{C}$);
- a recent history of a fever (e.g. night sweats, chills); or
- an acute respiratory infection e.g. shortness of breath, cough, sore throat.

COVID clinics are open across the Perth metropolitan and regional areas. People seeking testing in regional areas, where there isn't a COVID clinic should go to a public hospital, health service or remote health clinic. Make sure you phone ahead to advise of your symptoms.

Patients with a GP referral can now be tested for COVID-19 at select private pathology collection centres.

If a worker is away from work and experiences any COVID-19 symptoms, they should call the COVID-19 Information Line on 13 268 4313 and/or seek immediate medical assistance.

If a worker is at work or onsite and experiences any of these symptoms, the worker should immediately advise the employer, leave work and call the COVID-19 Information Line on 13 268 43 and/or seek immediate medical assistance. 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.

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

What if a worker has been identified as being in casual contact with someone diagnosed with COVID-19?

A worker who has been in casual contact with a confirmed case of COVID-19 must monitor themselves for symptoms for 14 days from the time after the casual contact. These people are not required to self-quarantine at home. Casual contact is defined as:

- Spending fewer than 15 minutes face to face with a person who is a confirmed case in the 24 hours before they showed symptoms until the case is no longer considered by WA Department of Health to be infectious; or
- Sharing a closed space for fewer than two hours with a person who is a confirmed case in the 24 hours before they showed symptoms until the case is no longer considered by Department of Health to be infectious.

If the worker does not have any symptoms of COVID-19 (i.e. fever, shortness of breath, sore throat and coughing), the worker can continue to attend work.

A worker who shows symptoms of COVID-19 should immediately notify the employer, leave work and call the COVID-19 Information Line on 13 268 43 and/or seek immediate medical assistance. 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.

Mental Health

Construction employees are over-represented in Australia's tragic suicide toll. The reasons for this include:

- construction workers have relatively less employment and financial security;
- being male dominated, males are less likely to seek or offer help with mental health; and
- alcohol and drugs are commonly consumed and are regularly misused.

The impact of COVID-19 on the lives of all Australians has been dramatic. It adds a further source of pressure and stress on construction workers and their families.

Construction is undertaken in regional WA on a FIFO basis and there is currently a high level of such work underway at new mine developments in the Pilbara. Research has shown that FIFO is a factor that can compound on other issues that are typically contributing to poor mental health and suicide risk. Some companies are seeking to reduce COVID-19 risk by increasing the roster swing duration on site.

MATES in Construction (MATES) provides mental health and suicide support to the Building and Construction Industry through the following integrated services:

- On-site training that increases awareness about poor mental health and suicide, while also increasing propensity to seek and offer help.
- A 24-7 helpline which is available for all employees and direct family members in the Industry.
- Suicide intervention to address people in critical need of support.
- Professional case management support for Industry employees and their direct family members which involves developing a professional support/referral plan, with proven success to significantly improve the circumstances of the people who are supported.

It is critical that employers adopt the following measures to make workers aware that the MATES support is available for them if they are struggling with their mental health:

- MATES Field Officers continue to be available to liaise with site personnel – employers are encouraged to engage with them and support their presence on site.
- Displaying MATES promotional material prominently on site, particularly highlighting the availability of the MATES 24-7 helpline.
- Participating in MATES webinars which will be held most weeks.

Links to MATES COVID-19 support posters can be found at mates.org.au/construction/coronavirus-advice.

We encourage all employers, workers and unions to work together during this difficult time.

For further guidance, you can call the WA Department of Health COVID Information Line (13 268 43).

Where to go for COVID-19 updates and further information

WA Government COVID-19 advice and requirements

<https://healthywa.wa.gov.au/coronavirus>

<https://www.dmirs.wa.gov.au/content/dmirs-covid-19-coronavirus-information>

National COVID-19 advice and requirements

<https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert>

National guidance for managing safety in the context of COVID-19

<https://www.safeworkaustralia.gov.au/>

COVID-19 and Australian workplace laws

<https://coronavirus.fairwork.gov.au/>

<https://coronavirus.fairwork.gov.au/coronavirus-and-australian-workplace-laws/pay-and-leave-during-coronavirus>

Federal Government employee support packages

<https://treasury.gov.au/coronavirus/households>

Federal Government Support for businesses

<https://treasury.gov.au/coronavirus/businesses>

APPENDIX 1 – PERSONNEL HOISTS COVID-19 RISK CONTROL GUIDANCE

It is acknowledged that not all hoists and lifts are identical in size or dimension, and they have varying weight limits. It is always possible to implement a practical number of personnel in any hoist or lift. Numbers in hoists and lifts should be agreed by management and HSR's or safety committees in consultation with the operators who are most at risk.

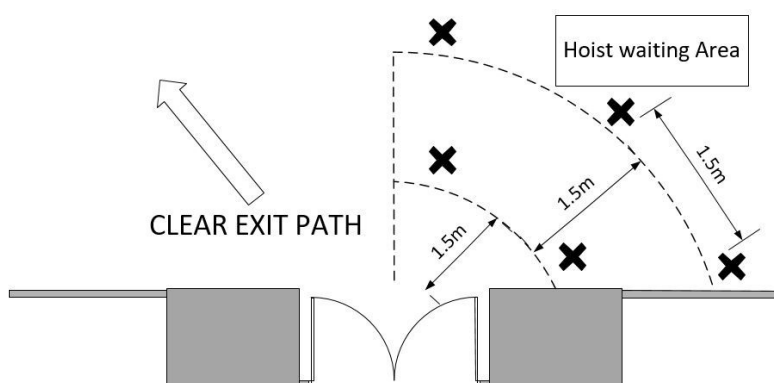
Control measures may include:

- Limiting worker movement between levels and floors on site, where possible and safe to do so.
- Reviewing which hoists are available for use on site and identifying if additional hoists can be used (for example where a partially occupied building is under construction, consider whether a residential lift be used solely for construction persons).
- Physical distancing of 1.5 metres and hygiene systems to be followed when waiting for hoist, 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.
- Determine how many workers can use a hoist at any time (including hoist operator) taking into consideration the limited duration and additional control measures in these Guidelines.
- Mark out hoist floor, identifying:
 - where workers stand
 - what direction they are to face when in the hoist to avoid face to face contact
 - sequencing of entering and exiting.
- Mark the hoist 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
 - advise the cleaning regime in place.
- 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
 - staggering what floors workers are to use the hoists.

Hoist operators may be exposed to additional risks. They should:

- Be provided with PPE that protects them from worker to worker transmission and from touching contaminated surfaces (e.g. 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.
- Where possible, change hoist operator every two hours into a different role.

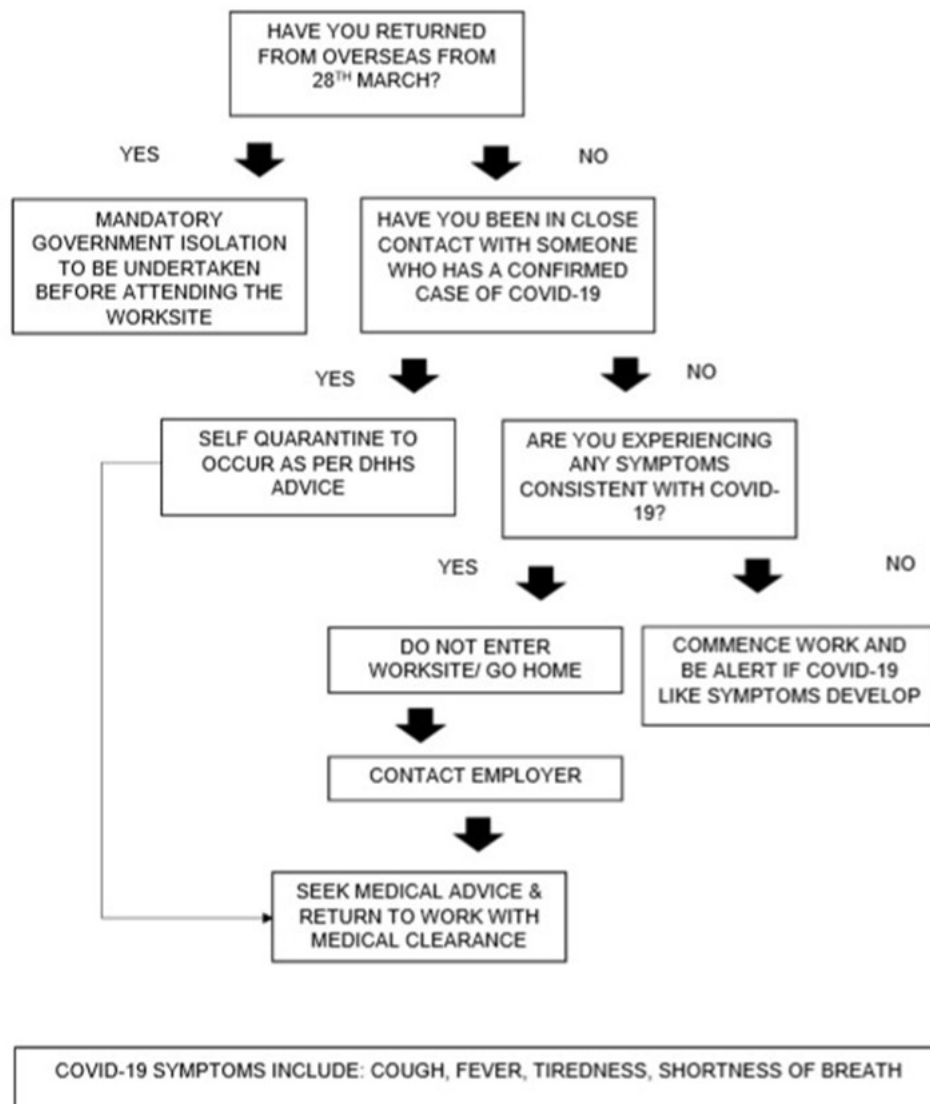
Example of physical distancing in hoist waiting areas



APPENDIX 2 – EMPLOYEE SCREENING FLOW CHART

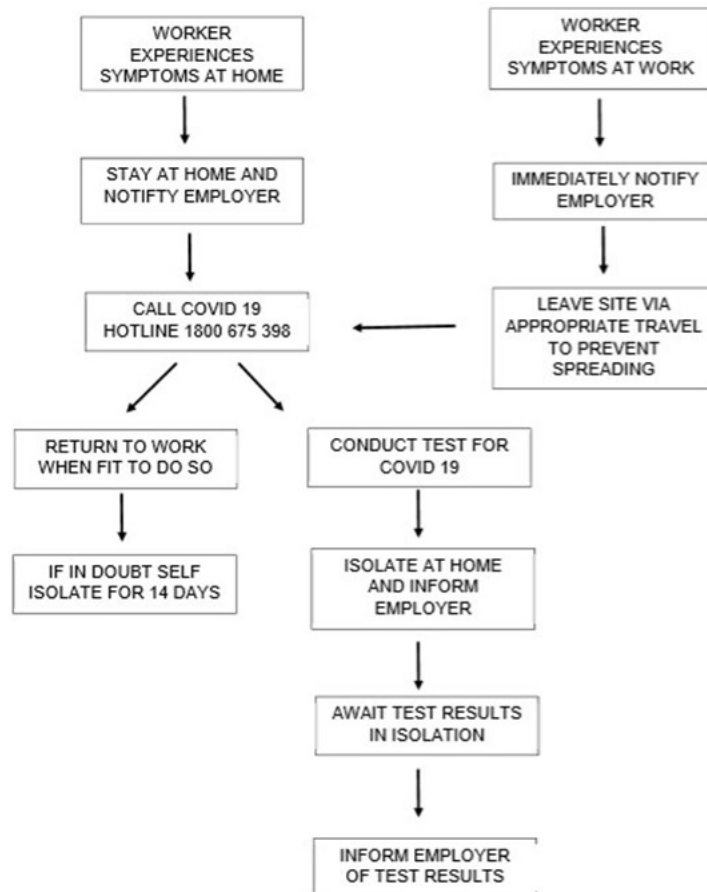
To minimise the introduction of COVID-19 on site, a screening process has been recommended for worksites to ensure all workers have declared they have not been overseas or in contact with anyone who has coronavirus.

The below flow chart outlines questions to be asked and the process to be followed.



APPENDIX 3 – WORKER WITH COVID-19 SYMPTOMS NOT YET DIAGNOSED FLOW CHART

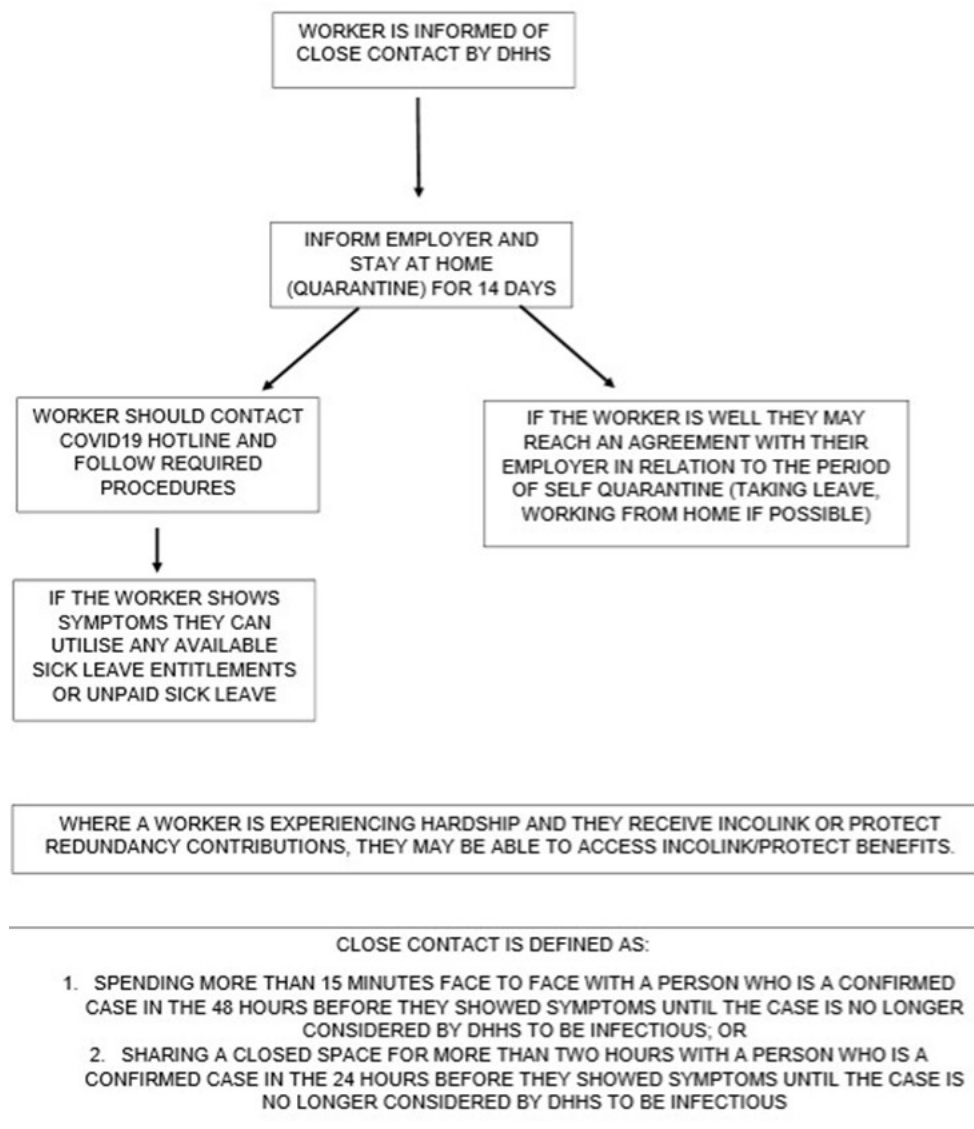
WHAT TO DO IF A WOKER IS EXPERIENCING SOME OF THE COVID-19 SYMPTOMS
BUT HAS NOT BEEN DIAGNOSED:



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

APPENDIX 4 – WORKER HAS HAD CLOSE CONTACT WITH SOMEONE DIAGNOSED WITH COVID-19 FLOW CHART

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



APPENDIX 5 – WORKER HAS HAD CASUAL CONTACT WITH SOMEONE DIAGNOSED WITH COVID-19 FLOW CHART

WHAT DO TO IF A WORKER HAS BEEN IDENTIFIED AS BEING IN CASUAL CONTACT WITH SOMEONE DIAGNOSED WITH COVID-19:

