International Labour Organization

▶ # Employment-Intensive Investment Programme (EIIP) Guidance

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Adjusting labour practices in employment-intensive works in response to COVID-19

Purpose

This note offers guidance on preventive and mitigation measures to be taken for employment-intensive works being implemented during the current coronavirus disease (COVID-19) crisis, and in the aftermath when the virus remains a threat. It also supplements such measures already established at employment-intensive construction sites. The note was developed by the ILO's Employment-Intensive Investment Programme (EIIP) to provide guidance along with a series of recommendations to its public works programmes and other employment-intensive projects operating during or in the aftermath of the COVID-19 crisis.

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For general information about the EIIP, see: http://ilo.org/eiip.

1. Current situation and need for additional measures

On 11 March, 2020, the World Health Organization (WHO) declared COVID-19 to be a pandemic. This public health crisis rapidly produced an economic and labour market shock, leaving many workers in both developed and developing countries at risk. With the rapid transmission of the virus through human-to-human contact, physical distancing (minimizing physical contact between healthy individuals and infected individuals and those suspected to be infected) has become key to preventing the spread of the virus. As such, governments in different countries have introduced various measures to restrict physical contact and movement of people between countries and regions, cancelled face-to-face meetings, and partly or almost completely halted socio-economic activities.

Employment-intensive projects in infrastructure works, which require the physical presence of workers, have not been spared from the impact of the crisis. These projects now face challenges in continuing with their activities. Some employment-intensive projects have been suspended

indefinitely, [1] while in other countries such as Tunisia, in line with national measures and in consultation with the donor, activities have continued with more rigorous measures at the workplace to prevent the spread of the virus. These additional occupational safety and health (OSH) measures include the maintenance of a minimum distance between workers at all times, the provision of protective equipment and the implementation of hygiene procedures. They are supported by awareness-raising campaigns, such as the display of posters for all workers and the provision of training on additional OSH measures, and fully integrating these preventive measures into the workplace.

Every project must protect the health and well-being of workers. In addition, in view of the socio-economic impact of the crisis, projects should prepare adequately for the return to work with the necessary safeguards, based on the types of employment-intensive works. **In order to minimize the spread of the virus at the workplace, this note provides guidance on some measures to be taken for employment-intensive works both during the COVID-19 crisis and in the aftermath when the virus remains a threat.** OSH measures in ordinary circumstances, as specified in the Safety and Health in Construction Convention (No. 167) and Recommendation (No. 175), 1988, remain valid, and supplement the measures being taken in country-specific contexts and in accordance with contractual obligations.

As the virus spreads through human-to-human transmission, greater awareness of preventive measures needs to be raised among various stakeholders, including governments, contractors, construction site managers, workers and local communities, not only at construction sites, but also through project offices, workplaces, material and tool storage facilities, and community spaces, among others. Therefore, one of the main objectives of this guidance note is to serve as a basis for dialogue with different actors in line with the instructions of government authorities.

2. Measures to be taken when planning and implementing employment-intensive works

Planning in the context of COVID-19

Before any decision to launch or continue with an employment-intensive project is made, the project managers should conduct an evaluation and risk assessment. The observations should then be discussed through social dialogue to assess the capacity of contractors, site supervisors and workers to implement specific components of construction works under the prevailing restrictions imposed by government authorities and in the light of the resources and organizational capacities required to implement the necessary preventive measures presented in this guidance. **If contractors, site supervisors, workers or public health authorities are unable to fully or partially meet the requirements of the measures outlined below, work on sites should be suspended.** Projects may also be suspended as a result of government restrictions or increased infection rates within local communities.

Preparedness planning

Contractors should properly record workers' contact details and daily attendance, in the event that a case is confirmed among project workers, contractors or clients and their contacts need to be traced. **Even when the area is not considered to be exposed to risk, project managers must still develop an emergency preparedness plan**, disseminate it to workers and employers,

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[1] EIIP projects in Jordan, Lebanon, Mozambique and South Africa were required to suspend all activities; in Mauritania, all training activities were postponed, even though construction works continued as of 19 March 2020.

and regularly monitor and update it. The emergency preparedness plan should include, among other information:

1. a directory of COVID-19 hotlines/task forces, channels and responsibilities for communication in the event of confirmed or suspected cases, the location of the nearest competent medical facilities with sufficient staff, and arrangements for the isolation of any person who develops COVID-19 symptoms at work;
2. mitigating measures to prevent the spread of the virus within the community, including health surveillance;
3. clear guidelines, agreed by relevant stakeholders, on situations that should trigger the suspension or closure of works;
4. the duration of any required suspension and the specific conditions for lifting it (such as the withdrawal of restrictions, commuting arrangements, physical distancing), with additional mitigation measures in order to resume work, to be discussed and agreed through social dialogue in accordance with government measures and local regulations;
5. potential risks and a contingency plan for the construction works if the spread of COVID-19 increases to the extent that implementation is no longer possible, with the possibility of enacting a force majeure clause in accordance with the organizational contracts management mechanism (terms and conditions) and in consultation with the donor.

Focal points

A large proportion of EIIP projects involve extensive training of contractors, workers and government authorities, whose technical and managerial capacities are demonstrated through the subsequent implementation of construction works. If project managers, in consultation with key stakeholders, decide to continue with training and construction works, then **project managers or a project team (hereafter "project managers") should facilitate the establishment of a team with appointed focal points for COVID-19 responses**. That team should consist of various stakeholders, including contractor(s), site supervisor(s), and workers' representative(s), with at least one woman representative and/or a representative with a disability, if possible. Where an OSH officer is in place, the OSH officer should lead the team. Each focal point should undertake the relevant responsibilities outlined in this guidance (a summary of responsibilities is appended to the guidance). Project managers should instruct and train all focal points to execute their respective roles, with the support of public health authorities when feasible. One way of supporting the implementation of such training is to include an item in the bill of quantities for the engagement of a public health official.

Management and monitoring

A designated focal point should request workers to wash their hands and should measure the body temperatures of all workers, contractors, drivers and machine operators when they arrive at the workplace, to monitor fever symptoms. Non-contact thermometers should be used for this purpose. Those who have a fever (a temperature of 37.3 degrees Celsius or higher) should be required to return home and stay there. The focal point should also monitor other symptoms, such as respiratory symptoms or difficulties in breathing, and ensure that workers are not exposed to potential risks (such as travel, contact with sick people, participation in large gatherings). Access by third parties to project sites and the physical distance between workers should be strictly monitored by the focal points, in order to avoid the risk of contagion.

Project implementation

The spread of COVID-19 varies greatly from one country to another. Therefore, whether employment-intensive works can continue will depend on the level of risk in the area and on governments' policy measures to restrict people's movements and socio-economic activities. The

decision on whether to proceed with project implementation has to be made on a case-by-case basis, in close consultation with: (1) government authorities, to obtain reliable information; (2) contractors, to gauge their availability in view of potential logistical difficulties; (3) community members, to communicate the safety measures to be taken to enable them to participate safely in project activities; and (4) the donor, for final approval. Women might need special facilities and extra flexibility, since care activities at home could demand more of their time.

Physical distancing

Existing data indicates that COVID-19 is transmitted from one person to another through respiratory droplets (such as sneezing or coughing) or physical contact. According to WHO guidance, any person who is within 1 metre of someone who has COVID-19 is at risk. [2] Therefore, **worksite managers must ensure that workers maintain a safe working distance of at least 1 metre** between each other (including material delivery workers) unless it is unavoidable. In cases where greater distance is required by government policies, projects should follow those instructions. Distancing should be maintained even in areas where the threat of the virus is not known to be imminent.

With the current threat of COVID-19, it is strongly recommended that site supervisors make extra efforts to allocate work in a manner that allows workers to keep a safe distance from each other, with due consideration for productivity. Therefore, it is suggested that group work should be avoided and that each worker should instead be assigned individual work tasks, to ensure sufficient distancing between workers. Task work is a common approach for organizing employment-intensive works and may also contribute to safe physical distancing within the workforce.

Contractors may also consider introducing shift work or staggered working time to reduce concentrations of workers in the same space, when applicable and where possible.

Accommodation and transportation

When accommodation or transportation is provided for workers as part of the project, the requirement for physical distancing must also be applied in those situations, taking into account any particular requirements for women and workers with disabilities.

It is especially important that project managers and contractors should pay close attention to transmission risks when the project provides accommodation for its workforce in temporary camps. Contractors should ensure, in consultation with project managers, that the physical planning of the camp can accommodate the requirements for physical distancing and sanitation, including the provision of water facilities, crowd management and the prevention of large gatherings, with clear upper limits on the number of people allowed to be present at any given time in each facility. [3] If a worker develops mild symptoms, a separate living area should be assigned, which should be accessible only by public health authorities or those with appropriate protective equipment. In principle, project managers should prioritize activities in areas that do not require transportation of workers during the crisis, as transportation poses a significant risk of infection.

Sick leave

Any worker who develops mild symptoms of COVID-19 should immediately be required to self-quarantine at home for at least 14 days, and the case should be reported to the health

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[2] WHO, "Getting Your Workplace Ready for COVID-19", 3 March 2020.

[3] Inter-Agency Standing Committee, *Interim Guidance: Scaling-Up COVID-19 Outbreak Readiness and Response Operations in Humanitarian Situations, Including Camps and Camp-Like Settings*", Version 1.1 (IFRC, IOM, UNHCR, WHO: 17 March 2020).

authorities immediately. If a worker develops serious symptoms, such as breathing difficulties or a high fever, project managers should immediately contact the nearest designated medical facility for testing (if possible) and arrange logistics. Care should be taken to minimize the risk of contact with other people while the worker is in transit. The same procedure applies to those who have been in close contact with the worker. In consultation with the national health authorities and in line with the preparedness plan, project managers should advise all workers to seek guidance from their healthcare service provider if they suspect that they may have symptoms. Project managers and contractors should create an environment in which all workers feel safe to report symptoms if they have been exposed to a risk and ensure that confidentiality is maintained.

Compensation during sick leave and quarantine

Different countries have different legislative frameworks for compensating workers when they are unable to work due to illness. In addition, COVID-19 necessitates a further discussion among social partners on arrangements for workers who are not ill but are not allowed to enter the workplace because they have had contact with someone who has contracted or potentially contracted the virus. **The current crisis should serve as an opportunity to define the scope of general conditions for sick leave and quarantine before the start of a project, or to clarify them in employment contracts**. Contractors and workers need to abide by established conditions of employment, including the right to paid sick days and to an adequate number of quarantine days, in view of national legal requirements and local practices, available project resources and donor obligations, and taking into consideration monitoring measures such as temperature screening. This dialogue could also explore various options, such as reimbursement for contractors who compensate their workers (with the necessary supporting documents), replacement of a worker by a relative (not living in the same household), or compensatory coverage for medical costs, among others.

Health insurance

Workers on employment-intensive projects should have access to accident insurance to cover costs from occupational injuries. Accident insurance should also cover the costs of healthcare for problems resulting from the workplace. **Project managers should clarify whether accident insurance covers healthcare costs, especially costs related to the treatment of COVID-19, both on and off sites**. If the accident insurance does not cover such costs, project managers, along with various stakeholders, should accelerate their efforts to **ensure that workers have access to health insurance**.

Awareness-raising campaigns and communication

Training of workers and employers on the basics of OSH is not only a necessity but can also help to reduce workplace accidents and injuries, while maximizing productivity. In the context of the current crisis, it is of utmost importance that workers, contractors and public authorities understand the importance of preventive measures both at the workplace and at home. Before any works start, OSH training including awareness-raising sessions on measures to protect against COVID-19 should be organized to engage relevant stakeholders. including, but not limited to, government authorities, contractors, site supervisors, workers and local communities. **Project managers and contractors, in consultation with workers' representatives, should engage government authorities and clearly communicate their commitment to reducing the risk of exposure to COVID-19 at the workplace and to taking on the relevant responsibilities**.

Training

When organizing awareness-raising sessions before the start of construction works or skills development training, it is important that the organizer should consider the potential risk from COVID-19, as a participant might be infected and unknowingly expose others to the virus. Therefore, the organizer must consult the central and local government authorities to obtain reliable information on the infection rate of COVID-19 in the area where the training is expected to be held, and verify the information with public health authorities. When the training takes place, the organizer should abide by the maximum number of participants allowed in the venue, arrange the seating to ensure that there is sufficient space between participants and, if held indoors, ventilate the training room (by opening windows, for example). Information on the training arrangements should be recorded so that it can be shared with public health authorities in the event of an emergency.

In addition, alternative options should be considered where a large gathering is not feasible, such as online awareness-raising sessions or technical training in smaller groups through mobile training facilities.

Posters, handouts and social networks

Preventive measures must start from workers understanding the risk of the virus and the necessity of the proposed measures. It is therefore crucial to provide clear and unequivocal messages focusing on what people should do to reduce the risk, and the actions they should take if they think they may have contracted COVID-19. For this purpose, **it is essential that awareness-raising posters are displayed throughout the construction site or handouts with the necessary information are shared among stakeholders and ideally posted on social networks to reach a wider audience**. Central or local authorities may have already developed either general or sector-specific materials for the same purpose, so it is advisable to check with them to avoid duplication. The materials must be factually correct and should not instil fear and suspicion among the population, as that could have negative consequences. Perceptions, reviews and feedback from workers and contractors at the work site and from local communities should be monitored by focal points to ensure a safe level of social cohesion among community members. Their concerns need to be responded to through trusted communication channels (focal points), especially to address any stigmatization and discrimination of sick people or any negative behaviours associated with the outbreak.

Information-sharing

The spread of the virus in local communities may incite fear and anxiety, causing high levels of stress and affecting productivity. For site managers and workers to cope with stress, it is important that they have accurate information. During training and project implementation, a focal point should **hold at least one briefing with an update on the status of COVID-19 each day, at a specific time**. The sessions serve as an opportunity to share the information released by national or local health authorities. The site manager should be the person designated to collect and share the updated information. Workers must be informed that they are entitled, in accordance with the relevant laws, to leave a workplace where there is an imminent and serious threat to their life or health. They should also immediately inform their supervisor if they notice any such threat. Where feasible, mobile telephones and social media should be considered for information-sharing.

Water and sanitation

Even in ordinary circumstances, it is vital that essential facilities are in place to provide water for drinking and handwashing, and hygienic eating areas for all workers' well-being and to enable them to maintain their performance. In the current situation with the spread of COVID-19, water,

soap and sanitation should be at the core of preventive measures taken at worksites. All partners must be well informed about the following areas in particular, and the facilities should be included in the bill of quantities so that contractors can enforce the provision.

Handwashing

Separate sanitary facilities for men and women should be made available, which are well maintained, sufficient in number and conveniently and safely located. Since construction works usually move from one place to another, the provision of mobile sanitary facilities is useful. Handwashing facilities should ideally be located within 5 metres of toilets and within easy walking distance from eating areas. **Sanitary facilities are indispensable to prevent the spread of the virus and must be provided by contractors.** A focal point should regularly inform and remind workers and contractors at construction sites of the importance of thoroughly washing their hands with soap (which should be refilled regularly) and water for at least 20–30 seconds (or 40–60 seconds if their hands are visibly dirty) at regular intervals and: [4]

- **before** eating food;
- **before** entering the workplace;
- **before** and **after** treating a cut or wound;
- **after** using the toilet;
- **after** using construction tools;
- **after** blowing their nose, coughing or sneezing;
- **after** touching an animal, animal feed or animal waste;
- **after** touching waste.

A focal point should also regularly advise workers and contractors to avoid touching their eyes, nose and mouth with unwashed hands. Washing hands with soap and water is the most effective way to get rid of germs and viruses on hands. Sanitizing hand rub dispensers can also be put in prominent places around the workplace; however, washing hands with soap and water is more effective than hand sanitizers, and these hand sanitizers should be considered a complementary method to be used when the provision of WASH facilities in nearby space is potentially infeasible.

Drinking water

Currently there is no evidence of COVID-19 in the water supply, and the persistence of the virus in water is still unknown. [5] However, a laboratory study indicates that coronaviruses could potentially remain infectious in water contaminated with faeces. [6] It is known that **filtration and disinfection counteract the virus**. [7] In areas where centralized safe water supplies are not available, basic water treatment techniques, such as boiling or using high-performance filters, are effective in removing or destroying viruses. Project managers and contractors should consult public health authorities to ensure that appropriate water filtration or purification equipment is provided. Separate cups for drinking water should also be made available to each worker and should be washed thoroughly after use.

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[4] Centers for Disease Control and Prevention (CDC), "Handwashing: Clean Hands Save Lives: When and How to Wash Your Hands", accessed on 25 March 2020.

[5] As at 25 May 2020.

[6] Lisa Casanova et al., "Survival of Surrogate Coronaviruses in Water", *Water Research* 43(7), April 2009.

[7] WHO and UNICEF, "Water, Sanitation, Hygiene, and Waste Management for the COVID-19 Virus: Interim Guidance", accessed on 24 March 2020.

Personal protective equipment, tools and behaviour

Employment-intensive works require a range of hand tools and safety equipment. They can be hazardous when not properly used, and thus ordinary OSH measures should always apply. In the current circumstances with the spread of COVID-19, sanitation measures should be applied to the use of tools and equipment. Project managers should also consider purchasing other preventive supplies, tools and equipment specifically designed to combat COVID-19, which should be procured by contractors through bills of quantities. Advance procurement of preventive equipment, such as soap, surgical masks, tissues and hand sanitizers, to be stored at the office is recommended (see the list appended). [8]

Medical masks

Wearing a medical mask is one preventive measure that can limit the spread of the virus. However, the **use of medical masks alone is insufficient to prevent infection**, as there is still a risk of contagion if a person touches a virus- or bacteria-infected mask and subsequently touches their eyes, nose or mouth. [9] Medical masks must be used if a worker develops symptoms (such as fever, fatigue, cough, sore throat or difficulty breathing). Any worker who develops such symptoms should be required to self-isolate with a medical mask, and should be informed of the following measures that must be taken when wearing a mask:

- **Wash hands with soap and water before** putting on the mask.
- **Avoid touching the mask** while wearing it.
- **Wash hands with soap and water if the mask is touched accidentally**.
- **Cover mouth and nose** thoroughly with the mask.
- **Do not touch the front of the mask** when removing it, but untie it from behind.
- Replace the mask with a new one as soon as it becomes damp.
- Do not reuse single-use masks.
- Properly dispose of single-use masks in a designated waste disposal bin immediately after use.

Although the types of non-medical masks that are effective are not yet known, certain features should be taken into consideration, such as: (1) numbers of layers of fabric/tissue; (2) breathability of material used; (3) water repellence; and (4) shape and fit of mask.

Sanitation, tools and equipment

Employment-intensive projects maximize the effective use of light tools and equipment. It is important to **keep them and personal protective equipment (PPE) in a sanitary condition** by regularly cleaning them with soap and water and storing them in a safe location. In order to maintain workspaces (such as project offices, construction sites and materials facilities) in a proper sanitary condition, each worker and contractor must properly clean, and sanitize when necessary, all equipment regularly. [10] To promote sanitation at the workplace, awareness-raising posters or displays should be provided in each project in relation to the following, which require particular attention:

- **Hand tools and equipment**: Wherever possible, hand tools and equipment should not be shared between workers during the current pandemic. All surfaces of hand tools and equipment that are directly touched by multiple workers should be wiped down with soap

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[8] WHO, "Getting Your Workplace Ready for COVID-19".

[9] WHO, "Advice on the Use of Masks in the Context of COVID-19: Interim Guidance", 6 April 2020.

[10] "Cleaning" refers to the removal of germs, dirt and impurities from surfaces, whereas "disinfecting" refers to the use of chemicals to kill germs on surfaces.

and water (or sanitizing liquid) regularly, every day. These include safety helmets and boots, visibility vests, gloves, goggles and earmuffs or earplugs, among others.

▪ **Medical masks**: Reusing non-single-use cloth masks with poor filtration may increase the risk of infection. Reusable masks should not be shared by workers. These masks should be washed with soap and water every day after use.

▪ **Waste disposal bins**: Any waste of consumable products should be disposed of in designated disposal bins.

Focal points should develop suitable safe procedures for the disposal of possibly infected solid waste (such as tissues and other used cleaning consumables and materials) to eliminate any potential hazard. Unless there is a suspected or confirmed case of COVID-19 infection among workers, disinfection of all tools and equipment is not mandatory, but project managers should consider having disinfectant available in case of emergency. In the event of any suspected or confirmed cases, disinfection of tools and equipment should follow the specific instructions from public health authorities, including the use of certified disinfectants. [11]

Behaviour

All workers (not only individuals who develop symptoms) should be instructed to **use their elbow to cover their nose and mouth when sneezing or coughing**, which protects effectively against not only COVID-19 but also other diseases. Persons with a runny nose should be advised to blow their nose with tissue paper and dispose of it immediately in the designated waste disposal bins. Frequently touching the nose, eyes and mouth directly can increase the risk of infection. **Handshaking and other greetings involving physical contact should be avoided** at all times during and after the crisis, for as long as the virus still remains a threat.

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[11] CDC, "Cleaning and Disinfection for Community Facilities", accessed on 11 April 2020.

Appendices

Appendix 1: Checklist for project continuity (non-exhaustive)

Projects can **continue** if:	- there are no government restrictions on employment-intensive types of works - a risk assessment has been conducted and an emergency preparedness plan developed, both of which have been agreed on by the relevant stakeholders - common PPE is in place - a monitoring and management system is in place - all stakeholders understand or develop an awareness of the importance of sanitation measures and are willing to implement them - workers can maintain physical distancing
Projects must be **suspended** if:	- government restrictions have been enacted for employment-intensive types of works - either contractors, site supervisors, workers or public health authorities are unable to meet the requirements of the measures outlined in the guidance, either partially or fully - public health authorities have advised project managers to suspend activities in view of the infection rate within local communities - a worker, contractor, site supervisor or a member of their household develops symptoms of COVID-19 - other locally agreed conditions make suspension necessary
Projects may **resume** if:	- government restrictions for employment-intensive types of works are withdrawn - public health authorities consider it safe to resume works in target areas - the locally required duration of suspension due to a potential case of COVID-19 among relevant stakeholders has expired, specific conditions have been met and the restart has been authorized by governments and public health authorities - contractors, site supervisors, workers, government and public health authorities, and local communities agree, and the works are able to fully meet all requirements outlined in this guidance

Appendix 2: Stakeholders' responsibilities

Action	Persons responsible
Evaluation of implementation capacities and development of contingency plans	Social dialogue, in consultation with public health authorities
Preparation of emergency preparedness plans	Project managers, in consultation with public health authorities
Production of awareness-raising posters, handouts and social media articles	Project managers
Dissemination of awareness-raising materials	Focal points, with support of project managers
Supply of water points/equipment and personal protective equipment (PPE)	Contractors, based on clear instructions by project managers
Regular cleaning to sanitize tools and equipment	Arranged by focal points and implemented by everyone
Control of physical distancing and monitoring of people's temperatures, symptoms and risk exposure	Focal points
Information-sharing and communication	Focal points, in consultation with public health authorities
Arrangement of social security (health insurance and compensation) for all workers	Social dialogue
Implementation of all OSH measures	Contractors and site supervisors ensure a safe workplace Project managers inspect OSH measures implemented by contractors and site supervisors Workers abide by prescribed measures

Appendix 3: Checklist for common preventive supplies

☐ Soap

☐ Hand sanitizer (for both collective and individual use)

☐ Tissues

☐ Non-contact thermometers

☐ Medical masks (when available locally)

☐ Drinking cups for each worker

☐ Waste disposal bins

☐ Disinfectant (liquid and wipes)

Note: Due to increased demand, certain items in the list may be difficult to obtain. If that is the case, project managers should also explore ways of having these items produced locally as part of the project interventions, to the extent possible.

Appendix 4: Checklist for focal points

☐ A team of focal points has been established, consisting of contractor(s), site supervisor(s) and workers' representative(s), with at least one woman representative and/or a representative with a disability.

☐ Undertake sufficient training, organized by project managers, with the support of public health authorities when feasible.

☐ Oblige everyone to wash their hands with soap and water upon their arrival on site.

☐ Check the temperature of everyone entering the site with non-contact thermometers and monitor other symptoms, such as respiratory symptoms or difficulties in breathing.

☐ Ensure that workers are not exposed to potential risks from transportation, contact with sick people or participation in large gatherings.

☐ Regularly remind contractors, site supervisors and workers of the importance of washing their hands with soap and water (see guidance above), and of avoiding touching their eyes, nose and mouth with unwashed hands.

☐ Regulate the entry of third parties to project sites.

☐ Introduce safe procedures for the disposal of solid waste (such as tissues and other used cleaning materials).

☐ Organize at least one update session daily, at a specific time of day, on the status of COVID-19 in the country and region.

☐ Monitor perceptions, reviews and feedback from contractors, site supervisors, workers and local communities.

☐ Communicate reliable information to contractors, site supervisors, workers and local communities to address stigmatization and discrimination of sick people and to ensure a safe level of social cohesion.

☐ Inform the team and project managers in the event of any potential risk.