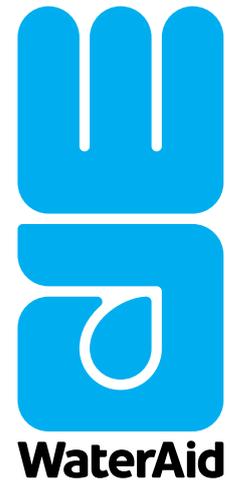


ADVISORY NOTE

Post Lockdown: Precautions and Considerations

May 2020 | Version 1



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The Novel Coronavirus pandemic has led to a five-week long lockdown in India. The end of the lockdown does not imply the end of the pandemic, but assumes that the rapid spread of the pandemic would have abated to some extent. The risk of infection, however, will remain for some months to come. Keeping this in mind, WaterAid India staff, partners, and field staff must be well-informed and take necessary precautions to protect themselves, and consequently, their families and colleagues, from Coronavirus as they return to office and their routine tasks.

Purpose of this document

This document is to advise WaterAid India (WAI) staff, partners, and field staff on the precautions they need to take to protect themselves from COVID-19 while undertaking work tasks, including working in the office, travel (domestic and international), field visits, organising and attending meetings and workshops. This document is a work in progress, and will be updated as new information and guidance is made available by the Government of India and the World Health Organization (WHO).



1 Overarching precautionary measures to be taken by all staff

Assessing travel safety based on Government classified zones – Green, Orange, Red

Travel to Red Zone districts/areas to be avoided until the districts/areas are considered as Orange or preferably Green zones.

To ascertain travel safety, a weekly dashboard will be maintained, drawing from Government sources, comprising all WAI intervention States, districts and cities. All areas will be classified as Red, Orange or Green zones. This dashboard will be shared with all WAI staff every Friday.

Handwashing with soap at critical times¹ or use of alcohol-based hand rubs

All staff to wash their hands with soap and water at critical times at home and in the office (especially before eating, after using the toilet, after coming into the office from outside).

Use of medical masks and cotton face covers

Homemade face covers can be used by WAI staff at the following times:

- Travelling by public transport to and from the office
- Travelling by taxi (to and from the office, and for field visits)
- During field visits
- Face covers must be made well (double layer of cotton cloth) and cover the nose and mouth appropriately²

Medical masks can be used when:

- Travelling by train, air or by bus (and in stations, airports and bus terminals)
- When staff have a sick family member at home with flu like symptoms
- When staff develop a cough, cold in the field, or if presenting with symptoms in the office

Availing work from home or leave when presenting with symptoms of fever, cough, difficulty breathing (subject to HR Policy on work from home)

Work from home policy to be revised to permit work from home for a two-week period under the following conditions:

- After returning from international travel (quarantine for 2 weeks post travel)
- If presenting with mild symptoms of cough, fever, and well enough to undertake work tasks in a timely and efficient manner³
- If a family member is presenting with mild symptoms of cough, fever, difficulty in breathing, and the WAI staff member is able to execute work tasks from home, in a timely and efficient manner

¹ Critical times of handwashing: after sneezing, coughing, after coming from outside and after contact with anyone with symptoms of cough, fever, cold; before and after defecation, after cleaning a child's bottom or changing diapers, before feeding a child, before eating and before and after preparing/ handling food

² <https://www.mohfw.gov.in/pdf/Advisory&ManualonuseofHomemadeProtectiveCoverforFace&Mouth.pdf>

³ A team member, with mild symptoms, can avail of leave as well

⁴ A team member, with a family member with mild symptoms, can avail of leave as well

Domestic travel (Flight, train, bus, taxi)

CONSIDERATIONS

- Travel to areas in States and districts classified as Red Zones
- Travel to areas in States and districts classified as Orange and Green Zones
- Accommodation in hotels in general and in hotels that have served as COVID-19 care centres, quarantine centres

Do

- Limit field travel to areas, states and districts classified as Red Zones to essential travel only. Ensure all precautions and protective measures are taken
- Undertake travel to areas classified as Orange Zone, keeping in mind mode of transport and potential risks, and maintaining all necessary precautions
- Undertake travel to areas classified as Green Zones, and ensure all precautions are taken
- Wear mask, if travelling by air, train, bus
- Practice social distancing (to the extent possible) in airports, train and bus stations, and when traveling to Red and Orange Zone areas
- When using taxi service to travel to the field, no more than 3 people (excluding driver) to be seated in an Innova or other SUV taxi, and no more than 2 people (excluding driver) to be seated in a sedan taxi
- Depending on the weather, consider not using the AC and rolling down the windows (may be difficult during peak summer and monsoon)
- Practice handwashing at all critical times, including after a flight, train and bus travel
- Bathe and wear fresh clothes after a flight, train, bus travel, and at the end of field work every day
- Eat only well-cooked food (including meat), and avoid raw foods and salads
- Carry own water bottle with clean water when in the field
- Carry an Emergency Kit with alcohol-based hand rub, masks, and gloves
- Inform your family, flatmate or close friend (if living away from family) about your current location
- Consult doctor immediately if presenting with symptoms of cough, fever, difficulty in breathing, sore throat, unusual fatigue or tiredness. Inform doctor of travel history
- Stay in empanelled hotel accommodation only if needed, carry and use own bed linen, towels and hand towels
- On returning home from travel, immediately wash hands with soap, bathe and wear fresh clothes, and wash all clothes used during travel
- Single occupancy room to be provided to WAI staff when undertaking essential traveling until June-July 2020
- Double occupancy room to be provided to all WAI staff from August 2020 onwards (if area is Green Zone for the home district/ city/State for all participants)
- For non-WAI staff, single room occupancy to be provided



✘ Don't

- Undertake travel if presenting with symptoms of dry cough, fever, difficulty in breathing

Checklist

- Emergency kit: Mask, alcohol-based hand rub, contact numbers of WAI admin colleague and Regional Manager, contact details of nearest hospital
- Admin team to check with empanelled hotel vendors if hotels have been adequately cleaned and sanitised, and to ascertain if the hotel was a COVID-19 Care Centre or quarantine facility
- Admin team to check with empanelled taxi vendors if their vehicles have been adequately cleaned and sanitised

Important resources

[WHO document: Getting the Workplace ready for COVID-19](#)

[MOHWF Covid-19 Live Dashboard](#)



International travel (Flight)

CONSIDERATIONS

- Travel to countries with high case load as per data (e.g., UK, USA, Canada, Sweden, Australia) and with imposed travel restrictions
- Travel to countries with low case load (with limited or no travel restrictions)
- Accommodation in hotels

✓ Do

- Follow WaterAid's global guidance on international travel
- Limit travel to countries with high case load history to essential travel only
- Practice social distancing in transport hubs and when in public
- Wear mask when travelling by air, train, bus
- Practice handwashing at all critical times, including after a flight, train and bus travel
- Bathe and wear fresh clothes after a flight, train, bus travel
- Eat only well-cooked food (including meat), and avoid eating raw foods and salads
- Carry an Emergency Kit with alcohol-based hand rub, masks
- Inform your family, flatmate or close friend (if living away from family) about your current location
- Stay in empanelled hotel accommodation only

- On returning home from travel, immediately wash hands with soap, bathe and wear fresh clothes, and wash all clothes used during travel
- If returning from a high case load country, consider a two-week quarantine with work from home

✗ Don't

- Undertake travel if presenting with symptoms of dry cough, fever, difficulty in breathing

Checklist

- Emergency kit: Mask, alcohol-based hand rub, contact numbers of WAI admin colleague and Regional Manager, Contact details of nearest hospital
- In country Admin team to check with empanelled hotel vendors if hotels have been adequately cleaned and sanitised
- In country Admin team to check with empanelled taxi vendors if their vehicles have been adequately cleaned and sanitised



4 Field activities (Intervention areas)

I. CONSIDERATIONS:

Travel to the field areas

- Travel to areas in States and districts classified as Red Zone
- Travel to areas in States and districts classified as Orange or Green Zones
- Accommodation in hotels in general and in hotels that have served as COVID-19 care centres, quarantine centres
- Conducting community meetings in intervention areas
- Commissioning construction activities

✓ Do

- Wear masks when in the field
- Minimal physical contact with community members
- Conduct community meetings in the field only in areas that are classified as Orange or Green Zone
- Conduct meetings in open spaces or large halls where physical distancing measures are possible
- If meetings are essential, keep number of participants to maximum 15 (inclusive of WAI staff). Hold multiple meetings if reaching out to large number of community members
- Encourage community members to maintain physical distance of 1-2 meters when attending meeting

- Encourage those who are unwell or have symptoms to not attend the meeting. Take contact details and communicate details of meeting over phone (if possible)
- Keep a mobile or temporary hand washing station with soap and water for all meeting attendees to wash their hands before starting the meeting
- During community meetings post lock down, enquire about the community, challenges faced, and coping mechanisms. Ask about WASH related needs as well. Reiterate messages on hygiene, hand hygiene, personal hygiene, especially during disease outbreaks, including (but not just) COVID-19
- Encourage meeting participants to wash their hands on leaving the meeting
- Refer to WaterAid global guidance on 'working with communities during COVID-19' (link to online resource provided under important resources, also available in Annexure 3) and 'Working with construction contractors during COVID-19' (link to online resource under important resources, also available in Annexure 4)

✗ Don't

- Conduct meetings with more than 15 participants
- Conduct meetings in closed spaces, with limited space
- Shake hands

Checklist

- Soap and water at all meeting venues
- Mobile or temporary handwashing stations

Important resources

WaterAid [COVID-19 Guidance](#) on working with communities directly or through partners

WaterAid [Guidance](#) for working with construction contractors during COVID-19

II. CONSIDERATIONS:

Working with communities

- Reduce direct physical contact with communities to avoid risk of transmitting the virus
- Ensure safe hand hygiene and social distancing in all interactions with the community and between community members

✓ Do

- Identify ways to engage remotely – especially during awareness campaigns
- Keep communities updated about the outbreak
- Coordinate with other organisations and stakeholders working in communities to reduce physical exposure and communicate efficiently
- Engage separately with women and men in communities (remotely or face to face) to understand different needs and perspectives
- Establish clear communication channels and share contacts of WaterAid/ Partner staff
- Customise the communication channels as preferred by the communities (phone, text, WhatsApp, Facebook)
- Use local dialect to communicate the messages clearly

- Support the groups to identify vulnerable people in the community and how they can be supported in case of outbreak
- Map current health seeking behaviour with different groups, and coping mechanisms for similar diseases
- Discuss preparedness plans and establish community action plans
- Discuss how community groups can best support WASH activities (including awareness activities) in the community
- Map access to soap and water for handwashing in households, schools, AWCs and health facilities. Ensure access to water and soap in all settings

✗ Don't

- Organise face-to-face meetings
- Undertake any 'public-facing' work outside of the office or home refrain by staff with underlying health conditions (e.g. chronic lung, heart or kidney conditions, diabetes, immunocompromised), or with vulnerable people in their household
- Visit any designated healthcare facilities that are treating suspected or confirmed COVID-19 cases

Checklist

- PPE
- Hand sanitiser/ alcohol hand rub
- Medical insurance

References: Annexure 3



III. CONSIDERATIONS:

Working with construction contractors

✓ Do

- Follow all national/ state requirements regarding the COVID-19 response including restrictions on work, travel and social distancing
- Consult with local authorities/ community leaders about the construction
- Undertake activity basis the criticality identified as per the community's need
- Ensure less than 6 workers on site at a time – provide facility for handwashing, PPE and briefing on safety precautions
- Set up a clear activities list and their timelines
- Decide on communication system and schedule
- Create list (with contact numbers) of all the workers that will be onsite both permanently and periodically

✗ Don't

- Engage community during construction
- Proceed with construction of water infrastructure (storage tanks, pipelines, upgrade of existing boreholes to motorised pumping) if it has not been possible to drill, carry out test pumping, spring yield assessment or water quality assessment

Checklist

- PPE
- Hand sanitiser/ alcohol hand rub
- Safety manual (or list of instructions)
- Provision of infrastructure for handwashing

References:

Annexure 4



In the office

I. CONSIDERATIONS:

- Work stations
- Meetings rooms
- Pantry and kitchen areas

✓ Do

- Post lockdown, the office space must be cleaned with detergent and a mild disinfectant before staff return
- At the end of each work day, desks, chairs, commonly used tables and chairs (in meeting rooms, kitchen), commonly touched surfaces like door handles, kitchen counters, handwashing stations, bathrooms, and objects like key boards, laptops, phones must all be cleaned and disinfected
- Alcohol based hand rubs to be placed near work stations (one bottle for each room or set of cubicles)
- Handwashing stations and bathrooms to have sufficient soap for handwashing
- Tissues to be placed at each work station
- Dustbins to be provided at each work station to discard used tissues
- Air dry hands, or use paper towels or hand dryers. Provide dustbins near handwashing stations to discard used tissues
- Display posters on handwashing, and prevention measures to be taken, and contact details of labs and hospitals with testing and treatment facilities to be posted in the office
- Use office-based air conditions and coolers in accordance with guidelines provided by the Indian Society of Heating, Refrigerating and Air Conditioning Engineers ([ISHRAE](#))

- Sit away from air conditioner to avoid direct blast
- Ventilate the office every day. Use fans to circulate the air
- Ensure cleaning and maintenance of all air conditioners in WAI offices (once a year, particularly before onset of summer months)

✗ Don't

- Use common towels to dry hands

Checklist

- Gloves, mask, and essential cleaning supplies, including disinfectants, mops, wiping cloths to be provided to cleaning staff
- Stock of soap and alcohol-based hand rubs to be maintained in all offices
- Cleaning schedule to be developed and monitored (for office and utility areas)
- Protocols for usage and disposal of masks and gloves
- Airing office by opening windows in the office (where possible)
- List of laboratories and hospitals for testing and treatment
- Regular maintenance of all air conditioners and coolers in the office (especially before the onset of summer)
- Health insurance for colleagues

Important resources

[MoHFW document: Guidelines on disinfection of common public spaces including offices](#)

[ISHRAE COVID-19 Guidance Document for Air Conditioning and Ventilation](#)



II. CONSIDERATIONS:

General advice to all staff

✓ Do

- Wash hands on entering office, before proceeding with work tasks
- Practice handwashing at all critical times
- Use handkerchief or tissues to cover mouth and nose when coughing or sneezing
- Wash your own plates, tea cups, water glasses

Checklist

- Posters on hand hygiene, personal hygiene, physical distance, washing of plates, cups, glasses

III. CONSIDERATIONS:

Staff who are unwell or have symptoms

✓ Do

- Avail sick leave or work from home when presenting with symptoms of cough, fever, difficulty in breathing, sore throat, unusual fatigue
- Consult doctor immediately if presenting with symptoms of cough, fever, difficulty in breathing, sore throat, unusual fatigue or tiredness. Inform doctor of travel history
- Staff who have any symptoms of cold or cough who must attend office, should wear a mask and maintain physical distance from other staff

Checklist

List of labs and hospitals offering testing and treatment services

IV. CONSIDERATIONS:

Handling of office and kitchen supplies

✓ Do

- Packages/post coming to the office must be handled with care. Front desk to collect all such packages. Concerned person to collect the package from the front desk, remove and discard the packing material (e.g., plastic, paper, envelope) in a dustbin at the front desk itself, before taking the contents of the package to their desk. Hands to be washed with soap, or cleaned with alcohol-based hand rub after handling any external package
- Milk, tea and coffee packets, biscuits, and other food provisions coming into the office should be kept in a designated area, and wiped clean. Food packets should be handled by one person in the office (and this person should use gloves when receiving food packets and storing them). Person in charge of kitchen/pantry should encourage staff to wash hands/clean with alcohol-based hand rubs before taking water making coffee/tea and taking food items from the kitchen
- Individual water bottles and glasses to be placed at each work station. Name/initials of each staff to be pasted on the bottle and glass to prevent use by others
- Bottles and glasses to be washed every day at the end of the work day

Checklist

- Guidance to front desk on handling external packages
- Dustbin at front desk to discard wrapping materials
- Guidance to kitchen staff on cleaning protocol

V. CONSIDERATIONS:

Support to staff

✓ Do

- Posters on handwashing, use of alcohol-based hand rubs, safety measures to be displayed prominently in the office, including reception area
- HR and Management to assure staff that these measures are precautionary and will be lifted when areas of operations are classified as Green Zones
- HR/Admin staff to maintain contact details of hospitals and laboratories in the region where testing and health care services are provided for suspected and confirmed cases of COVID-19

VI. CONSIDERATIONS:

Office vendors

✓ Do

- Receive vendors at the reception and take packages at reception only. Encourage vendors to clean hands with alcohol-based hand rubs
- If vendor needs to enter the office (e.g., to fix printer), ask them to wash their hands or clean their hands with alcohol-based hand rub



6 Meetings

I. CONSIDERATIONS:

Organising meetings with external participants
– logistics and arrangements

✓ Do

- Meetings with non-WAI staff, and with WAI staff from other locations to be held using digital/virtual platforms, unless face-to-face meetings are essential. Essential meetings include: meetings with critical donors, Government officials for urgent tasks
- If external meetings are essential and must be held in the office, encourage visitors to wash their hands with soap and water or use alcohol-based hand rubs on entering the office
- Ensure seating arrangements are made to maintain six feet distance between meeting attendees
- Maintain names and contact details (email and phone numbers) of all external persons attending meeting for at least one month. Inform meeting participants if there is any suspected or confirmed case of COVID-19 who attended the meeting
- Clean and disinfect meeting room after meeting

✗ Don't

- Conduct external meetings in the office if any staff is unwell
- Conduct external meetings in public venues (e.g., Hotels, meeting and conference venues) until cleared by SMT, Admin team and Heads and Regional Managers

Checklist

- Alcohol-based hand rubs
- Soap for handwashing with posters on handwashing steps
- Cleaning and disinfection of meeting room after meeting

Procurement of agency/consultant

I. CONSIDERATIONS

Procurement process

Do

- Procurement processes to be conducted online to the extent possible
- In-person meetings to be conducted for final round of interviews. Physical distance to be maintained during meetings. If the consultant or any member of the external team is unwell, reschedule meeting or ask that the team member join on phone

II. CONSIDERATIONS:

On-boarded consultants and agencies

Do

- Ask that agencies providing consultancy services (e.g., research) provide health insurance to all employees, especially field-based/field-level employees. Specify in contracts that it is desirable that all employees and field staff recruited for field-based assignments have health insurance
- Ask that individual consultants have (personal) health insurance. Specify in contracts that it is desirable that the consultant recruited for field-based assignments have health insurance
- Provide on-boarded consultant/ agency with necessary information on COVID-19, and specify all precautionary measures to be taken while executing field-based tasks
- Carefully consider travel to areas and districts classified as Red Zones, and facilitate essential travel only
- Insist that budgets of consultant/agency include masks, alcohol-based hand rubs for all field staff
- All field staff to be provided with contact details of labs and hospitals for diagnosis and treatment



External meetings and engagements (outside of WaterAid office premises)

I. CONSIDERATIONS

Individual fund raising (IFR) at public places (e.g., malls)

✓ Do

- Undertake IFR engagements in public places only in cities and areas within cities classified as Green Zones
- Keep alcohol-based hand rubs at the kiosk and use frequently
- Disinfect table at the start and end of each day
- Maintain at 2 meters' distance when speaking to potential donors
- Display poster on handwashing and precautions to be taken to protect against Coronavirus and COVID-19
- Display poster with WaterAid India website and contact details, and details on donation. Encourage potential donors to take contact details on their phones

✗ Don't

- Shake hands with potential donors
- Provide handouts
- Handle phones, pens of potential donors

Checklist: Emergency kit comprising alcohol based hand rubs and masks

II. CONSIDERATIONS

WaterAid staff and Partner staff attending external meetings, workshops, conferences

✓ Do

- Maintain physical distance of at least 1 meter from other participants
- Wash hands with soap, or use alcohol-based hand rubs to clean hands frequently
- Ask organisers for policy on informing participants if anyone has been diagnosed with COVID-19

✗ Don't

- Shake hands

Checklist: Alcohol based hand rub

III. CONSIDERATIONS:

Community meetings (in intervention sites)

✓ Do

- Essential community meetings to be held
- Panchayat to be informed of all meetings
- Participant names and contact details to be noted and maintained. If anyone attending the meeting is COVID-19 positive, other participants to be notified and asked to seek health services
- Maintain physical distance of at least 1 meter between participants
- Wash hands with soap, or use alcohol-based hand rubs to clean hands frequently
- Ensure that handwashing station with soap and water is available to enable participants to wash hands before meeting

✗ Don't

- Shake hands

Checklist: Alcohol based hand rub



Exposure risk

I. CONSIDERATIONS:

If any WAI or Partner staff has been diagnosed with COVID-19

✓ Do

- Treat COVID-19 positive staff with respect and care
- Support them by providing information on health insurance, and enquiring about other support that the staff and his/her family may require
- Enquire if the family requires any assistance, and provide information to family on quarantine measures, and health services
- Inform work related contacts that the person has interacted with so that they may quarantine themselves
- Allow staff to avail sick leave and work from home until fully recovered

✗ Don't

- Discriminate against those who have COVID-19

II. CONSIDERATIONS:

If any staff suspects exposure to COVID-19 patient

If any staff has a family member (who lives with them) or flatmate who has been diagnosed with COVID-19

✓ Do

- Support staff to seek testing services
- Encourage staff to quarantine and work from home (if well enough to work)
- Provide support by providing information on health insurance, and enquiring about other support that the staff and his/her family may require
- Enquire if the family requires any assistance, and provide information to family on quarantine measures, and health services
- Inform work related contacts that the person has interacted with so that they may quarantine

✗ Don't

- Discriminate against those who have COVID-19



WAI Internal Advisory Note
Post-lockdown precautions and considerations

1 ANNEXURE

**List of testing labs and
health care facilities for
COVID-19 treatment**

<https://covid.icmr.org.in>

2 ANNEXURE

www.covidhotspots.in

COVID-19 Guidance on working with communities directly or through partner

Date of Last Revision: 1/04/2020

This document aims to provide WaterAid staff and partners with guidance on ways to work with communities considering the restrictions on travel and face to face contact that are in place to prevent the spread COVID-19 (Coronavirus), whilst recognising that community communication is an essential part of the response.

This guide must be reviewed and adapted in conjunction with any advice or instruction issued by local government or public health authorities. We must respect any local government restrictions but should strive to go above and beyond government advice and take pre-emptive action to restrict disease spread where we can.

We should always seek to maximise benefit to the communities we serve, while minimising the risk exposure for our staff, partners and community members. This guidance note aims to help find ways to support communities with the minimum of risk.

PRINCIPLES

- **Apply 'do no harm' principles.** It is strongly advised for WaterAid staff and partners to reduce direct physical contact with communities due to the risk for staff, partners and communities of transmitting the virus.
- **Community engagement and empowerment is essential** as part of the response to COVID-129 and to strengthen long term resilience. When restrictions make it impossible to engage face-to-face then find ways to engage remotely. (see below)
- **Two-way communication** is essential to provide communities with reliable and accurate information about the outbreak, and ensure they are fully involved in planning the response.
- However, where it is still necessary and possible to go to communities, based on the local status of the outbreak and government guidelines, **ensure safe hand hygiene and social distancing in all interactions** with the community and between community members. Avoid work that brings groups of people together and reinforce messages about hygiene and social distancing.
- **Coordinate with other organisations and stakeholders** working in communities to reduce physical exposure and communicate efficiently.
- **Engage separately with women and men in communities** (remotely or face to face) to understand different needs and perspectives. Find out about and engage with people in vulnerable situations to understand their risks.



ESTABLISH WAYS OF SUPPORTING COMMUNITIES WITHOUT PHYSICAL CONTACT

- **Map the key stakeholders** in the area who form a network of people close to the communities to work with during the COVID-19 outbreak and identify focal persons from each organisation or group. Include local government officers, traditional authorities, religious leaders, community leaders, WASH committees, community groups, private sector, school teachers, health facility staff, women's organisations/ networks, youth networks and networks of disabled persons organisations to get different perspectives.
- **Make sure people know who to contact in WaterAid and partners** and there are clear communication channels within organisations to keep relevant people updated and ensure consistent communication between WaterAid, partners and different stakeholder groups.
- **Agree what are the most appropriate and trusted communication channels** with these different groups. Establish which methods people prefer, what they have access to and what is most easily understood. Different groups are likely to have different preferences. For example, phone, text, WhatsApp, Facebook
- **Discuss key terminology with communities and use appropriate language.** Different languages or dialects may express signs, symptoms, perceptions of disease in using different words. Establish what the most easily understood words are with each group to better tailor communication plans and ensure information is being delivered using terms that communities can understand.

PREPAREDNESS PLAN – TO BE SET UP EITHER FACE TO FACE WHERE POSSIBLE OR REMOTELY

- Support the groups to **identify vulnerable people in the community** and how they can be supported in case of outbreak
- **Find out about current health seeking behaviour with different groups**, and coping mechanisms for similar diseases. Use this to plan with communities how this may be different if coronavirus is confirmed in their area.
- **Discuss preparedness plans and establish community action plans** with key members of the community to discuss what preparedness measures they can undertake themselves, how they will alert relevant authorities in case of a suspected case, and initial actions they can take to minimise spread and to support others in the community. Make clear that WaterAid as a WASH agency is not able to support people who are sick.
- **Discuss how community groups can best support WASH in the community**, without encouraging face to face meetings. This will include hygiene behaviour change messaging, handwashing, managing and maintaining water supplies, and sanitation. Make sure they are aware of the need for social distancing and reducing contact between households. Identify specific individuals to contact for essential tasks like maintaining water supplies.
- **Check access to soap and water for handwashing** in households, schools, health facilities and food sellers. Map access and where there are gaps using existing data and information from communities. Where possible increase availability of soap, water and

handwashing devices in the best way that makes sense for your context, in collaboration with others working in the areas.

REGULAR UPDATES USING AGREED COMMUNICATION CHANNELS

- **Agree on a plan for regular briefings** with communities and stakeholders to discuss community updates and formulate response plans.
- **Keep communities updated about the outbreak**, providing accurate factual information, allowing time for to respond to questions from communities and discussions about how to respond.
- **Create an FAQs sheet** that can be updated regularly as questions come in and new information becomes available. Use the data to inform programming, information for communities, and advocacy at cluster level.
- **Maintain regular communication with WASH Cluster, MoH and other stakeholders.** Discuss preparedness measures with communities and bring feedback from communities to these meetings. Support communities on development of context specific plans to protect outbreak plans. Share relevant information with community contacts, including reliable and regular updates of epidemiological data about the outbreak. This should include which genders, age groups or vulnerable groups may be more affected to better target responses.

WHERE PHYSICAL CONTACT IS STILL ESSENTIAL AND PERMITTED

- We should refrain from asking any WaterAid or partner staff with underlying health conditions (e.g. chronic lung, heart or kidney conditions, diabetes, immunocompromised), or with vulnerable people in their household, from undertaking any “public-facing” work outside of the office or home
- Avoid visiting any designated healthcare facilities that are treating suspected or confirmed COVID-19 cases.
- Avoid travel between provinces, regions or states – both because of the possibility of short notice domestic restrictions being imposed, possibility of fuel shortages and through our social responsibility to not aid the spread of COVID-19.
- Finally, any decision to undertake community engagement work must be balanced with our ability to manage any associated risks. For example, would we be able to provide Protective Equipment to WaterAid and partner staff (e.g. hand sanitiser)? Do we have adequate medical insurance in place?



4 ANNEXURE

Guidance for working with construction contractors during COVID-19

Date of Last Revision: 31/03/2020 (version 1)

Important Note:

1. If/when a CP decides to move ahead with construction works, approval by the CD is mandatory. The CD needs to be given all details on context and information needed and make an informed decision afterwards. The only way to move ahead is if we can ensure compliance to our “do no harm” approach and social distancing by the workers/partners with the protective equipment and hygiene in place. Please see below for guiding questions on making a decision about continuing construction work.

2. If a decision is made to move ahead with construction works by the CD, the RTA needs to be informed so that safety measures and a specific plan can be put in place. The RTA will coordinate support to countries and link in the COVID-19 Technical Advisory Group so that safety guidelines are clear and can be implemented and link with WaterAid’s overall COVID-19 response guidance.

SHOULD CONSTRUCTION ACTIVITIES CONTINUE?

The general advice, during the coming 3 months, is no – unless in exceptional circumstances (see note above). In making a decision whether or not to continue with construction work the following should be considered:

- Government requirements – partners must follow all national requirements regarding the COVID-19 response including restrictions on work, travel and social distancing.
- Consult with local authorities/ community leaders – are they happy with contractors continuing to work?
- The welfare of workers (contractor, casual labour, partner & WaterAid staff) takes precedence and should not be compromised – we must comply with our ‘do no harm’ approach.
- How critical is the activity? Can some elements be postponed (for example, completing training of a pump mechanic after installing a waterpoint but leaving the committee training until later). Should resources be temporarily diverted to other aspects of the COVID-19 response?
- What is the risk of continuing work without adequate supervision? Lack of supervision by partner or WaterAid staff could impact on Health & Safety on the construction site and could adversely impact the quality of the work (which may be expensive/ difficult to remedy later).

DECISION TO STOP CONSTRUCTION WORK

- Ensure that the construction site is made safe before leaving, eg are excavations properly sealed and fenced off, are incomplete latrine blocks fenced off
- Note that unlined excavations (e.g. trench for pipeline) may collapse if left. If the pipeline can be installed first that may avoid re-digging the trench later – but only if the work can be done according to the normal quality standards and safety recommendations for staff re: COVID-19.
- Ensure that all equipment, materials and chemicals are removed from site and securely stored or securely stored on site. Take particular precautions for hazardous materials (e.g. fuel, chlorine HTH powder).
- Materials which may expire, e.g. cement. Can any of this be returned to the supplier? If storing cement for a prolonged period, make extra effort to ensure it is stored appropriately (e.g. raised from the floor on pallets, covered, no more than 10 bags high).
- Communicate clearly with the community and local authorities about why it has been necessary to temporarily stop the work. They may have some good ideas about what can be done to ensure materials and equipment is kept safe. They will also be able to warn children not to tamper with excavation seals or site fencing.
- Complete payments as far as possible and ensure clear expectations with the contractor and casual workers. Will the contract need to be adjusted?
- If the work is on a new or rehabilitated water source and it's not possible to complete it, ensure as best you can that the community have access to other safe water sources for the interim period. (In the worst case,

if this is not possible, then you may need to provide advice on household water treatment for example).

- Update the donor.
- After 3 months, further discussions will be needed to re-evaluate the scenario and whether any work can restart. The technical focal people will be in touch with further guidance in the coming months.

DECISION TO CONTINUE WORK

During this outbreak, construction work should only be continued in exceptional circumstances and following the basic guidelines below:

- Fewer than 6 workers on site at a time. All must practice social distancing and wash hands regularly. A water bowser should be provided with water for handwashing. Suggested temperature check each day, if possible. PPE should be worn. Workers should be given a safety briefing on how to protect themselves while on site and while traveling to the site.
- No community engagement. Communities like to hang around and watch the work, but this must be actively discouraged and community labour (e.g. making bricks, digging, etc.) may not be possible.
- It is not advisable to proceed with construction of water infrastructure (storage tanks, pipelines, upgrade of existing boreholes to motorized pumping) if it has not been possible to drill, carry out test pumping, spring yield assessment or water quality assessment. There is always a level of uncertainty associated with drilling and borehole upgrades and it is best to wait until it is certain there is sufficient water of a suitable quality available before proceeding with construction of storage and pipework.



Recommendations for remote management to ensure quality of the work:

1. Prepare a complete works document package that should be available at any time by all contractors. This should include, among others, drawings lists, BOQs, details required, technical specifications and requirements, team structure, technical standards and guidelines to adhere.
2. Set up a clear activities list and their timelines. In this list of works it should be clear all technical specifications and requirements as well as a clear timeline for all construction components. It should also be clear if there are key milestones where approval from the WaterAid or Partner supervisor is needed before continuing (approval may be conditional on receiving photo evidence of the quality of the work).
3. Decide on a solid communication system and schedule (preferably once a day) update by the contractor teams. Since you're not going to be able to oversee every step of your renovation in person, you'll need to set up easy ways to communicate remotely, as well as a detailed schedule with your contractor. Communication will take the place of site visits, so it's important to get it right. These updates should:
 - a. Contain all information pertaining to the work being done as per plan. Any information item should be given in sufficient detail to make it fully understandable.
 - b. Be given orally in a phone call.
 - c. The information orally given above should be recorded in a works report. The format and topical sequence should be standardized, so that the report at one period would be readily comparable to reports at other periods. The report should include:
 - i. Written narrative of progress.
 - ii. Photo documentation of all-important elements of progress.
 - d. Report receipt should be acknowledged.
4. Share the list of all the workers that will be onsite both permanently and periodically.



**For any queries or comments,
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