



	<b>Guideline Document Supplementary Note</b>		
<b>Ref: SN:002:04</b>	<b>RE: Summary of key HSE support roles / groups in the implementation of the Governments <u>Transitional Protocol - Good Practice Guidance for Continuing to Prevent the Spread of COVID-19 (Jan 2022)</u></b>		
<b>Issue date:</b>	May 2020	<b>Revised Date:</b>	June 2022
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<b>Note:</b>	<p><i>The information provided is for general guidance only, should you require more specific advice please contact the <a href="#">Health &amp; Safety Help Desk</a>.</i></p> <p><i>The management of any occupational safety and health issue(s) remains the responsibility of local management.</i></p>		

<b>Key Amendments</b>
<p>The document has been reviewed in light of Governments <a href="#">Transitional Protocol - Good Practice Guidance for Continuing to Prevent the Spread of COVID-19 (Jan 2022)</a>. Reference to “HSE Return to Workplace Protocol removed.</p>

This Supplementary Note provides a brief description of several key support roles/groups, in order to assist Responsible Persons in the interpretation of the Government’s [“Transitional Protocol - Good Practice Guidance for Continuing to Prevent the Spread of COVID-19 \(Jan 2022\)”](#) These key support roles/groups are as follows:

- National Health and Safety Function
- Health and Safety Officer (or safety specialist) in CHOs/Hospital Groups
- Elected Safety Representatives
- COVID-19 Response Manager
- Lead Worker Representative

For further information, see [Work Safely -arrangements for COVID](#) webpage.

**Role of the National Health and Safety Function (NHSF):**

The NHSF provides strong and dynamic support to duty holders and combines expert resources with best practices to deliver the highest possible standard of service across the following key Occupational Safety and Health (OSH) support areas:

- Policy, procedure and guideline development
- Statutory occupational safety and health (OSH) training
- Audit / inspection, and
- Information and advice

In line with the above the Function has a broad spectrum of resources available through a dedicated [helpdesk](#) and [web-pages](#). A suite of COVID-19 specific resources developed by the Function can be found [here](#).

The NHSF sits within the Workplace Health and Wellbeing Unit.

### **Role of the Health and Safety Officer (HSO):**

The role of the HSO or local safety officer is to promote a positive safety and health culture within their area of responsibility and assist management and duty holders in securing the effective implementation of the safety management system.

“Competent safety specialists have a key role to play in the effective implementation of changes to work activities and the implementation of infection, prevention and control measures in the workplace.

### **Role of Safety Representative as selected or elected under Section 25 of the Safety Health and Welfare at Work Act 2005 (2005 Act):**

The rights of the Safety Representative are set out in legislation. A clear process is in place for the appointment of Safety Representatives.

A Safety Representative may consult with, and make representations to, the employer on safety, health and welfare matters relating to the employees in the place of work. The employer must consider these representations, and act on them if necessary.

The intention of these consultations is to prevent accidents and ill-health, highlight problems, and identify means of overcoming them. Consultations are particularly important when changes are taking place, for example when a safety statement or safety and health plan is being drawn up, or new technology or work processes, including new substances, are being introduced. They also have a part to play in dealing with long-established work practices and hazards.

Note: A Safety Representative has rights and not duties under the 2005 Act.

For further information see our [safety consultation and safety representation](#) webpage.

### **Role of the COVID-19 Response Manager:**

This role is suggested to assist sites and services in managing adherence to the “[Transitional Protocol - Good Practice Guidance for Continuing to Prevent the Spread of COVID-19](#)”. This will, in turn, help facilities and services ensure legal compliance, to discharge their duties under the Corporate and Local Safety Statements and, ultimately, help reduce the risk of the spread of COVID-19 in the workplace. The key roles of the COVID-19 Response Manager are as follows:

1. Oversee compliance with the requirements of the Return to Work Safely Protocol
2. Ensure areas of non-compliance are escalated to an agreed Senior Manager
3. Ensure an employee contact log is maintained
4. Ensure emergency plans and first aid procedures are reviewed and updated

5. Appoint a Lead Worker Representative(s) (LWR) for each site (*Number(s) to be proportionate to the workplace*<sup>12</sup>)
6. Provide the LWR(s) with information and training in relation to their role
7. Ensure LWR(s) receives induction prior to their return to the workplace
8. Consult with the LWR(s) and Safety Representative(s) on the implementation of control measures
9. Agree a means of regular communication with the LWR(s)
10. Agree with the LWR(s) the type and frequency of COVID-19 inspections<sup>1</sup>

See Annex 1 of this document for further information.

### **Role of the Lead Worker Representative (LWR):**

A key role in each workplace since the pandemic began has been that of the Lead Worker Representative (LWR). In summary the LWR is concerned with working collaboratively with the employer to assist in the implementation of measures and monitor adherence to the measures to prevent the spread of COVID -19. The LWR is charged with ensuring that COVID-19 measures are strictly adhered to in their place of work.

The key roles of the LWR are as follows:

1. Undertake the required training
2. Work collaboratively with the employer to ensure, so far as is reasonably practicable, the safety, health and welfare of employees in relation to COVID-19
3. Promote good hygiene practices such as washing hands regularly and maintaining good respiratory etiquette along with maintaining social distancing in accordance with public health advice
4. To assist in monitoring adherence, carry out inspections at a frequency and type agreed with the COVID- 19 Response Manager
5. Assist in keeping fellow employees up to date with the latest COVID-19 advice and promote good hygiene practices, good respiratory etiquette and social distancing in accordance with public health advice
6. Escalate areas of non-conformity to the COVID -19 Response Manager
7. Consult with fellow employees, raise their concerns and provide timely feedback
8. Share relevant information with the Safety Representative(s)

See Annex 2 of this document for further information.

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<sup>1</sup> Consider factors such as size and number of premises, complexity, number of staff, geographical dispersal, nature of service, etc. (non-exhaustive)

<sup>2</sup> This role may be assumed by existing Safety Reps by agreement

## Annex 1

### Determination of the COVID-19 Response Manager:

It is within the remit of the management of each site /service to determine who, at high level would be best placed to discharge the functions as set out above. It is not anticipated that the role would require specific safety qualifications – the key purposes of the role are governance, escalation, coordination and consultation. This person shall have the appropriate level of seniority and management skills and have sufficient time, capacity and access to resources (including information and training on COVID-19) to deliver on the functions of the role.

It is suggested that the COVID-19 Response Manager would be a member of the hospital/service management team<sup>3</sup> with strong links (or part of) safety/risk committee as appropriate, would ideally be in a position to link with the emergency response team and infection control team (if available) and empowered to make LWR appointments.

In multi-occupancy sites it may be possible for the Site Management Team/Committee (or similar if available) to take on the roles and functions of the COVID-19 Response Manager if any one service/occupant represented is unwilling or unable to take on the role. In such cases it would be essential that the Team would meet regularly (suggested not less than weekly for the immediate term/RTW phase), that the role would become a specific standing prioritised agenda item for the Team/Committee, that the Chair of the meeting would ensure appropriate allocation of necessary actions and timely close-out of any such actions through regular updates and an option of escalation. Again this would rely on the Chair (and the Site Management Team/Committee) being of sufficient seniority to influence such action. It is noted that the Chair would not take on responsibility for the completion of remedial actions/tasks, Safety Legislation and site/service Safety Statement provides that responsibility would rest with the relevant responsible persons/management and staff.

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<sup>3</sup> Where a workplace is shared by a number of services and there is no single management structure, appointment of the COVID-19 Response Manager will be by collective agreement and documented in the Site Safety Statement

## Annex 2

### Determination of the Lead Worker Representative:

The employer is responsible for the appointment of the LWR or, where necessary, more than one LWR. The nomination process has been agreed through national engagement with the Staff Panel of Trade Unions and is detailed in a National HR Memo of 22<sup>nd</sup> July 2020 (Nomination and Appointment of Lead Worker Representatives).

The number of representatives appointed will, ideally, be proportionate to the number of workers in the workplace and these key personnel will be clearly identifiable in the workplace and receive the relevant and necessary training by their employer.

In determining whether more than one LWR is required the following should be considered:

- The number of employees to be represented
- The nature of the work
- The operation of shift systems
- The number of workplaces under the employer's control spread over many locations
- The constituency of the employees to be represented, including variations between different occupations and distinct locations within the place of work, e.g. a large hospital, where a wide variety of different work activities take place within a single workplace.

The Lead Worker Representative is entitled to have reasonable time off work, without loss of remuneration, to enable him or her:

- Acquire the necessary knowledge and training and
- Discharge the functions of the role

The COVID-19 Response Manager should provide the LWR with the necessary facilities as far as reasonably practicable to enable them to consult with employees or prepare any submissions or reports. This may include access to a meeting room, photocopier, communications and equipment.

Management and staff shall consider any representations made by the Lead Worker Representative in relation to any COVID-19 measure and so far as is reasonably practicable, take any action that he or she considers necessary or appropriate with regard to those representations.

In terms of the escalation process, in the first instance the LWR shall make representation to local management, where agreement cannot be reached, the issues shall be escalated to the COVID-19 Response Manager and if the matter remains unresolved referred to the relevant union(s).

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<sup>i</sup> The COVID-19 Response Manager and the Lead Worker Representative shall, having regard to the nature and extent of the hazards in the place of work, agree the frequency or schedule of inspections. It is anticipated during all the return to work phases, inspections are conducted at least daily