

Arts Centres – Working with COVID-19

A Framework for Performing Arts Venues

Arts Centres – Working with COVID-19

This document is a companion one to:
Safe Creation and Staging of Work during COVID-19

And in accordance to the guidance set out within:

The Government’s COVID-19 Resilience & Recovery 2021: The Path Ahead
The Department of Enterprise, Trade and Employment’s Work Safely Protocol
The Department of Health’s COVID-19 (Coronavirus): Stay Safe Guidelines
All relevant and recent COVID-19 advice from the HSE, HSA, HIQA and HPSC.



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This document has been produced based on current best practice, legislation and guidance by the Government and agencies of, in response to the COVID-19 pandemic. As the advice issued continues to evolve, this protocol and the measures employers and workers need to address may also change. Therefore, it should be noted that the attached details are non-exhaustive and are also subject to change. This is a general document applicable to Arts Centres. It is not designed to prohibit the introduction of further specific measures in particular sectors or workplaces, as long as they enhance the measures set out in this document. In addition, further supports for employers and workers will be developed and provided where appropriate. This is a living document and will be updated as necessary.

Covid-19 Response Plan Summary

Below is a summary of the areas that need to be addressed in order to ensure safety in the Arts Centre for staff and the public. This charter outlines that the necessary steps have been undertaken in line The Government’s [COVID-19 Resilience & Recovery 2021 The Path Ahead](#), [Work Safely Protocol](#), [the Stay Safe Guidelines](#) and industry best practice. Further details on these steps are discussed in detail in this document. This list can be used as a checklist to aid planning.

Detail	Tick
A COVID-19 response plan has been developed and communicated to staff.	
Appoint Lead Worker Representative(s).	
Carry out a COVID-19 Specific Risk Assessment.	
Update existing occupational health and safety risk assessments and safety statement.	
Update relevant HR policies and procedures.	
Revise emergency procedures considering: <ul style="list-style-type: none"> • Changed internal layouts • Staff training requirements • Emergency and medical procedures. 	
Create and maintain a communication plan for all relevant stakeholders including: <ul style="list-style-type: none"> • Staff • Visiting workers • Contractors • Arts Centre users • Public • Funders. 	
All staff to complete ‘Pre-return to Work Form’ before re-commencing work.	
Provide appropriate training and induction for staff, keeping record of both.	
Address environmental health issues arising from building closures e.g. pest control, legionella.	
Implement your COVID-19 safe operating procedures as identified in your risk assessment and check lists, ensuring regular checks are carried out and records are maintained including: <ul style="list-style-type: none"> • Cleaning regime, including who is responsible and records • COVID-19 capacity calculated for each area within the venue to consider activity type, ventilation, available space and physical distancing requirements • Respiratory hygiene to include safe use, storage and disposal of face masks • Hand Hygiene through information on hand washing procedures and facilities. • Signage, physical distancing floor markers • Identifying and planning for areas where physical distancing cannot be maintained – physical barriers, screens, PPE • First aid and provision of isolation area • Controls in place for movement of people entering/exiting and moving around the Arts Centre • Entry conditions and access control • Continuous review of physical layout of working/public areas to ensure physical distancing is maintained. 	
Develop plan for responding to suspected cases of COVID-19.	
System in place for recording contact details to assist HSE with contact tracing if requested.	
Consider needs of specific groups that visit/work in the Arts Centre including: <ul style="list-style-type: none"> • Children • People with disabilities • Vulnerable/high risk groups. 	

Acronyms

BOH	Back of House
COVID-19	Coronavirus Disease 2019
DBEI	Department of Business, Enterprise and Innovation
ECDC	European Centre for Disease Prevention and Control
F&B	Food and Beverages
FOH	Front of House
FSAI	Food Safety Authority of Ireland
GDPR	General Data Protection Regulation
GP	General Practitioner
HPSC	Health Protection Surveillance Centre
HSA	Health and Safety Authority
HSE	Health Service Executive
HVAC	Heating, Ventilation and Air Conditioning
IPC	Infection, Prevention and Control
ISL	Irish Sign Language
LWR	Lead Worker Representative
OSH	Occupational Safety & Health
NCCEH	National Collaborating Centre for Environmental Health
NSAI	National Standards Authority of Ireland
PD	Physical (Social) Distancing
PPE	Personal Protective Equipment
RA	Risk Assessment
WHO	World Health Organisation

Contents

Introduction..... 6	Respiratory Hygiene21
COVID-19 Resilience & Recovery 2021 The Path Ahead.....7	Physical (Social) Distancing.....23
COVID-19 Response Plan.....9	Signage..... 24
Strategies for dealing with COVID-19 – Key Considerations.....9	Personal Protective Equipment (PPE) 24
Areas to be considered9	Cleaning Protocol and Procedures27
Infection Prevention and Control (IPC) Measures9	Cleaning Guidelines after the Presence of a Suspected Case of COVID-19.....27
Controlled and Uncontrolled Environment 10	Visiting Contractors/Others..... 28
Roles and Responsibilities12	Environmental Health 28
Event Organiser.....12	Emergency Plans..... 28
Employer12	Public Safety..... 28
Lead Worker Representative13	Front of House 28
Staffing Arrangements13	Capacity Considerations 29
Worker Teams13	Visitor Circulation..... 29
Staff Welfare and Well-being14	Disabled Needs Provisions 30
Returning to Work.....14	Children 30
Higher Risk Groups14	Arts Centre Public Areas.....32
Plan for Working from Home/Remotely.....15	Workshops..... 34
How Is COVID-19 Spread?.....15	Children’s Arts & Culture Activities..... 34
Symptoms.....15	Seating..... 34
Close Contact Definitions.....15	Communication Strategy 40
Response Plan if Somebody Presents with Symptoms16	Advance Communication to the public visiting the Arts Centre.....40
Reporting Requirements17	Ticketing Communication40
Isolation area.....17	General Ticketing Procedures40
COVID-19 Contact Tracing Log for Suspected Case17	Appendix 1..... 42
First Aid/Medical Provision17	Outdoor Performance..... 42
Occupational Safety 20	Appendix 2..... 46
COVID-19 Risk Assessment..... 20	Considerations for Audience or Staff..... 46
Hand Hygiene/Hand Sanitising 20	Cleaning Checklist..... 50
	Opening/Closing Doors Checklist51
	Arts Centre Contact Tracing Log for Suspect Case (Sample).....53
	References 54

Introduction

This document provides updated guidance for Arts Centres. It complies with the Government's [COVID-19 Resilience & Recovery 2021 The Path Ahead](#) and [Work Safely Protocol](#), and builds on the three 'Reopening Arts Centres' guidance documents that were released in May and June 2020. Whilst this document refers specifically to Arts Centres it can also be applied to cultural venues and other similar places of entertainment. Equally it can be applied to venues (indoor and outdoor) and other controlled spaces managing audiences and artists.

As a [controlled environment](#), Arts Centres have the ability to operate safe working practices and implement protective measures to address the impact of Covid-19. These measures will uphold confidence for the arts sector to safely engage audiences.

The aims of this document:

- To offer a toolbox of approaches for the safe operation of Arts Centres and the continuity of service while working under the [Government COVID-19 framework](#), [Work Safely Protocol](#) and [COVID-19 \(Coronavirus\): Stay Safe Guidelines](#)
- Enable Arts Centres to provide a safe environment and experience.
- Supporting the Arts Centre as a place of work for staff, the creation of work and the visitor experience.
- Enable the understanding and following of Government guidance and ensure Arts Centres comply with all public health requirements.
- Prepare contingency measures to address possible increased rates of staff absenteeism by specifying role deputies, the cross training of staff members in all performance venue functions and activities and assigning new critical responsibilities to all staff members.
- Provide guidance on establishing spaces for artists and staff to work in.
- Support industry innovation and adaptation as Covid-19 has escalated the push towards digitalisation.

COVID-19 Resilience & Recovery 2021 The Path Ahead

The Government's [COVID-19 Resilience & Recovery 2021 The Path Ahead](#) maps out a framework of restrictive measures for how the COVID-19 pandemic will be managed in the coming months. The plan is set out to account for the varying rates of transmission and recognises the need for society and business to be allowed to continue as normally as possible. It consists of 5 numbered levels on what restrictive measures are in place around the country at any given time based on the pattern and progress of COVID-19. The framework is designed so that either national or county level restrictions can be applied.

All decisions regarding Arts Centres operations require assessment of the risks involved, working to the letter, as well as the spirit of the guidelines, applicable at that time.

	Level 1	Level 2	Level 3	Level 4	Level 5
Organised Events (Controlled Environments with a named event organiser owner or manager). e.g. business, training events, conferences, events in theatres and cinemas or other arts events (excluding sport).					
Organised Indoor Events	Up to 100 patrons permitted in most venues. Up to 200 patrons permitted in larger venues with strict 2m seated physical distancing and one-way controls for entry/exit can be implemented. Business/Work related meetings should take place in line with the Work Safely Protocol .	Up to 50 patrons permitted in pods of max. 6 people. Up to 100 patrons permitted in larger venues with strict 2m seated physical distancing and one-way controls for entry/exit can be implemented. Business/Work related meetings should take place in line with the Work Safely Protocol .	Organised indoor gatherings or events are not permitted.	Organised indoor gatherings or events are not permitted.	Organised indoor gatherings or events are not permitted.
Organised Outdoor Events	Up to 200 patrons permitted in most venues. Up to 500 patrons permitted in outdoor stadia/venues with minimum accredited capacity of 5,000 with robust protective measures in place.	Up to 100 patrons permitted in most venues. Up to 200 patrons permitted in outdoor stadia/venues with minimum accredited capacity of 5,000 with robust protective measures in place.	Organised outdoor gatherings or events of up to 15 people can take place in controlled environments with a named event organiser, owner or manager.	Organised outdoor gatherings or events of up to 15 people can take place in controlled environments with a named event organiser, owner or manager.	Organised outdoor gatherings or events are not permitted.

Attractions & Activities (including museums, galleries and other cultural attractions)					
Attractions	Open with protective measures (max capacity to allow 2m distancing, one-way traffic within the venue). Maximum numbers linked to the capacity, taking account of Public Health Advice .	Open with protective measures (max capacity to allow 2m distancing, one-way traffic within the venue). Maximum numbers linked to the capacity, taking account of Public Health Advice .	All venues closed.	All venues closed.	All venues closed.
Activities	Open with protective measures (a max capacity to allow 2m distancing, one-way traffic) Maximum numbers linked to the capacity, taking account of Public Health Advice.	Open with protective measures (a max capacity to allow 2m distancing, one-way traffic) Maximum numbers linked to the capacity, taking account of Public Health Advice.	All indoor activities closed. Non-contact outdoor activities permitted with max of 15 people with protective measures in place.	All indoor activities closed. Non-contact outdoor activities permitted with max of 15 people with protective measures in place.	Closed.
Work					
Work	Work from home if possible. Attendance at work for specific business requirements and on a staggered attendance basis.	Work from home if possible. Attendance at work for essential on-site meetings, inductions, training.	Work from home unless absolutely necessary to attend in person.	Only essential or other designated workers should go to work.	Work from home unless essential for work which is an essential health, social care or other essential service and cannot be done from home. *see below

Reference: [Fáilte Ireland Guidelines](#)

Full details on the framework: [COVID-19 Resilience & Recovery 2021 The Path Ahead](#)

COVID-19 Response Plan

A COVID-19 Response Plan must be prepared detailing the policies and practices necessary for the employer to meet the Government's 'Work Safely Protocol' and to prevent the spread of COVID-19 in the workplace. This response plan should feed into the venues existing Health and Safety documentation.

The HSA provide a template for a [COVID-19 Response Plan](#) which gives an overview of key areas that employers must assess to ensure compliance with current protocol and to minimise the risk to workers and others.

How the plan will be tested

The COVID-19 Response Plan should be regularly revised, tested and discussed with staff. Testing and exercising allow the plan and organisational procedures to be improved and shows that the COVID-19 Response Plan is fit-for-purpose.

The scenario-based exercises should form part of the staff training and ongoing training requirements. The scenarios listed within this document are samples, for guidance purpose only and can be used as examples during training:

- Exercises should be formally planned, based on a realistic scenario, and involve all relevant staff members, and progressively test all aspects of the plan.
- The exercise goal should be to identify likely sources of breakdown/failure that could impede or negate the response plan and allow revision to be made where potential points of breakdown or failure are identified.
- An exercise report should issue afterwards, identifying the Response Plan revisions required, and indicate the continuing the process of regular testing and adapting of the plan as a live document.

Strategies for dealing with COVID-19 – Key Considerations

In developing a plan and strategies for working through the Government's *COVID-19 Resilience & Recovery 2021 The Path Ahead* and *Work Safely Protocol*, the following should be considered:

- Identifying the centres critical functions and the impact COVID-19 has on these functions.
- Identifying the resources needed.
- Identifying and developing best practice and sectoral innovation, both nationally and internationally.
- Identifying the staffing needed and any upskilling or training.
- Increasing resiliency within the centres systems of work.
- Ensuring that any statutory requirements are fulfilled for ensuring the safety of employees and visitors.
- Expecting future change throughout the industry and remaining flexible.
- Using authoritative sources and resources to help inform your policy and risk assessments.

- Education of audiences to build confidence and reassurance, while also anticipating any changes in audience behaviour.
- Remote planning – removing non-critical teams from on site and assessing the effect of staff absenteeism.
- Developing a risk assessed approach: how you can cater for the physical distancing and COVID-19 protocols. Thought should be given through low to high-risk activities and lean towards developing a range of programmes that would be suited for different restrictions.

Areas to be considered

Arts Centres should identify their critical activities, what inputs are required to maintain them and what areas are more critical than others, example list:

- Gallery/ Exhibition area
- Auditorium/Theatre
 - » Rehearsal Room
 - » Dressing Rooms
 - » Stage
 - » Backstage
 - » Online presenting facilities
- Workshops receiving members of the public to engage in arts activities
- Offices
- Welfare
- Kitchens/Catering facilities
- Outside entrance space/Foyer/Front of House
- Bar
- Café
- Studios.

Consider the new audience experience and the input of stakeholders and affected parties e.g.:

- Audience (in person and online)
- Arts Centre (visitors) including – children, those with disabilities, vulnerable groups
- Artists
- Staff (including permanent, temporary, volunteers, freelance)
- Residencies (company or individual artist)
- Board of Management
- Contractors
- Workshops or resident companies
- Insurance providers
- Funding bodies – Arts Council, National and Local Government
- Regulatory enforcing agencies
- Visiting shows/Artists
- Site concessions – cafés/markets/bars
- Those considered to be in the higher risk groups.

Infection Prevention and Control (IPC) Measures

The [Work Safely Protocol](#) lists Infection Prevention and Control measures that should be implemented in order to

prevent the spread of COVID-19 in the workplace or any other setting. These IPC measures are addressed in the document:

- Hand hygiene
- Respiratory hygiene
- Physical distancing
- Pre-return to work measures
- Dealing with a suspect case of COVID-19 within the workplace
- At-risk workers
- Working from home
- Business travel
- Contractors and visitors
- Cleaning
- Use of PPE
- Customer facing roles

Controlled and Uncontrolled Environment

COVID-19 Resilience & Recovery 2021 The Path Ahead defines a [Controlled Environment](#) as “one where the number of people and the ways that they interact can be actively managed. The owners or organisers can control the number of people coming in and out, and there is space to physically distance.

Controlled environments are those where the number of people present and the ways that they interact can be controlled, where there is a recognised organiser, where people are seated and generally remain in that same seat for the event, physical distancing, hand hygiene can be monitored, and contact tracing can be facilitated. For example, a sports club AGM, watching indoor sport, youth club meetings, AA meetings, conferences, training events, theatre performances.”

The Department of Culture, Heritage and the Gaeltacht has stated that “Businesses/services such as museums, cinemas, theatres and art galleries are deemed to be controlled environments, with appropriate protective measures in place such as physical distancing between people. These venues can continue to operate where appropriate physical distancing and all other protective measures can continue to be maintained”.

Uncontrolled Environments are defined by the [HPSC](#) as “settings where people have open access to the premises and generally don’t know each other and are unlikely to be in close contact with each other for an extended period of time. Examples include supermarkets, retail stores, shopping malls and takeaway-only food outlets.”

Controlled Environment Checklist for Arts Centres/Venues/Locations

Detail	Tick
Nominated event organiser.	
Capacity Control that allows for 2m physical distancing for the duration of the event including entry, circulation and exit.	
PD procedures to support Group bookings (max number people from different households) as per COVID-19 Resilience & Recovery 2021 The Path Ahead guidelines on the date of the event.	
<p>A health screening policy for audience to be communicated in advance where they must not attend if they are:</p> <ul style="list-style-type: none"> • displaying signs or symptoms of COVID-19 or feeling unwell. • required to self-isolate or restrict their movements. • identified as a close contact of a confirmed or suspected case of COVID-19. • not in compliance with the COVID-19 Resilience & Recovery 2021 The Path Ahead travel restrictions at the time of the event. 	
Contact logging system in line with Work Safety Protocol and GDPR.	
An event ticket resale policy and procedure to ensure contact tracing is maintained.	
COVID-19 protocol communication plan to attendees and visitors.	
Sufficient staffing with appropriate briefing and training to implement event specific safety plans.	
Provide space for circulation areas to prevent intermingling between queues for concessions, toilets and other areas where queueing may occur.	
<p>Signage:</p> <ul style="list-style-type: none"> • PD floor markings or similar for areas of queueing. • Use of vertical signage to direct customers to facilitate movement. • Use of clear directional signage indicating locations and routes to toilets and other facilities. • Face coverings. 	
Provision of hand hygiene stations and environmental waste.	
Cleaning schedule in place with ongoing and frequent cleaning of high touch points including toilets.	
Visitors to remain seated or in designated viewing area unless when using facilities.	
Fáilte Ireland guidelines for food and beverage consumption are being followed.	
Face masks to be worn at all times, except when eating or drinking.	

Roles and Responsibilities

Event Organiser

As part of the requirements of a controlled environment Arts Centres will have to nominate a named event organiser as defined within [Health \(Preservation and Protection and other Emergency Measures in the Public Interest\) Act 2020](#):

“in relation to an event in a place other than a dwelling, any person who

- I. engages in the publicising, arranging, organising or managing of the event, or*
- II. receives some or all of the proceeds (if any), from the event;”*

Employer

Employers, workers and/or their recognised Trade Union or other representatives need to continue to have regular engagement about COVID-19 infection prevention and control (IPC) measures in the workplace.

Employers must provide up to date information and guidance to workers. The type of information should include:

- the signs and symptoms of COVID-19,
- how COVID-19 spreads,
- advice about hand and respiratory hygiene and physical distancing,
- the importance of not going to work if displaying signs or symptoms of COVID-19 or feeling unwell,
- use of face coverings/masks, Personal Protection Equipment (PPE),
- cleaning routines and waste disposal.

Procedures and steps to be taken in the event of a suspected or positive case or outbreak in the Arts Centre and the role of public health authorities in managing an outbreak should also be made clear. Employers will also need to provide COVID-19 induction training for all workers, after the re-opening of the workplace following a closure. In addition, given the fact that COVID-19 is equally an issue in the wider community, general advice in relation to measures the staff should follow when not at work, including safe travel to and from work.

A key role in each workplace is that of the [Lead Worker Representative \(LWR\)](#). Each workplace will appoint at least one LWR charged with ensuring that COVID-19 measures are strictly adhered to in their place of work. Further details on this role are provided in the section below.

Employers will also communicate with safety representatives selected or appointed under Occupational Health and Safety legislation and consult with workers on safety measures to be implemented in the workplace. For

further information on the role of Safety Representative, [visit the HSA website](#).

The employer can also use a competent person responsible for managing health and safety (internally or externally) as required to ensure the effective implementation of changes to work activities and the implementation of IPC measures at the place of work.

In keeping the COVID-19 response plan up to date, Employers will continue to:

- develop and/or update their COVID-19 Response Plan.
- implement checks and keeping records where required especially cleaning, training, induction etc.
- develop plans in consultation with workers and communicate once finalised.
- facilitate the appointment of at least one lead worker representative for the workplace, which shall be done in consultation with the workers and/or representatives.
- review and update their occupational health and safety (OSH) risk assessments and safety statement.
- address the level(s) of risk associated with various workplaces and work activities in their COVID-19 business plans and OSH risk assessments. For example, where, how and from what sources might workers be exposed to COVID-19? Consider also exposure to/from the public, visitors, co-workers etc. In this regard, particular locations (canteens, washroom facilities, access/egress points), where staff congregate can be particular hotspots for transmission.
- ensure that where work practices have been changed or modified to prevent the spread of COVID-19, workers are not inadvertently exposed to additional occupational health and safety hazards and risks.
- take into account workers' individual risk factors (e.g. older workers, whether a worker is considered very high risk or high risk due to the presence of underlying medical conditions).
- include measures to deal with a suspected case of COVID-19 in the workplace.
- include the controls necessary to address the risks identified.
- include contingency measures to address increased rates of worker absenteeism, implementation of the measures necessary to reduce the spread of COVID-19, changing work patterns, etc.
- include in the plan any specific communication measures that are required for workers whose first language may not be English. In such workplaces, employers should identify leads who can act as communicators to particular groups. Such leads may also be nominated as the lead worker representative. The HSE have provided [translations](#) of their COVID-19 Resources.
- include in the plan any specific measures or response for dealing with an outbreak of COVID-19.

Lead Worker Representative

Each workplace will appoint at least one Lead Worker Representative (LWR). Their role is to work together with the employer to assist in the implementation of and monitor adherence to the Infection Prevention and Control (IPC) measures in this guidance document to prevent the spread of COVID-19 in their workplace. The number of representatives appointed will ideally be proportionate to the number of workers. The LWR, together with the COVID-19 response management team, should support the implementation of the IPC measures identified in this Protocol. The identity of the person or persons appointed should be clearly communicated to staff. They should also receive the relevant and necessary training by their employer.

Part of the LWR role includes;

- Help put with putting in place the COVID-19 IPC measures.
- Communicate regularly with the employer/manager and assist in providing COVID-19 health advice to co-workers.
- Carry out regular checks that COVID-19 control measures are in place.
- Keep a record of all checks including cleaning and training for all staff.
- Keep a record of non-compliance with COVID-19 workplace controls. Report to your employer/manager any problem areas or non-compliance.
- Listen to the concerns of fellow workers and raise them with your employer/manager.
- Help keep your fellow workers up to date with the latest COVID-19 advice from Government.
- Help as part of a response team managing someone with symptoms of COVID-19 in your place of work.

Further information and a short online course on the role of [Lead Worker Representative](#) can be found on the HSA website.

Staffing Arrangements

Employers are obliged to take reasonable steps to provide a safe place of work for their staff and to allow for business recovery and continuity. In doing so they should facilitate the appointment of at least one Lead Worker Representative (LWR) for the workplace, which shall be done in consultation with the workers and/or representatives. In developing a COVID-19 response plan, the following detail should be considered with regard to staffing:

- What staffing levels are required in the Arts Centre? Consider the entire staffing makeup of the organisation to include permanent, temporary, volunteers and freelancers.
- Ensure appropriate training upskilling and briefing staff in new or changed COVID-19 related roles and responsibilities in a manner that is understood.

- Developing online systems that allow working from home where possible.
- Assess how increased levels of absenteeism could affect critical activities and how this could be prevented, such as by cross-training to ensure cover on roles.
- Update Human Resource policies and procedures to bring them in line with new government guidelines including policies for sickness, absence, well-being, remote/flexible working and training. Any changes should be communicated to all staff.
- In applying this and other guidance, employers must be mindful of their obligations to provide equality in the workplace, especially when considering the particular needs of different groups of workers/individuals.
- Conduct a risk assessment which takes account of any COVID-19 instances or restrictions at the place where security or access control is being provided.
- Ensure that where work practices have been changed or modified to prevent the spread of COVID-19, workers are not inadvertently exposed to additional occupational health and safety hazards and risks

Compliance with measures implemented to reduce the spread of COVID-19 is the collective responsibility of every individual who works in or visits the Arts Centre, including management, workers, freelancers, volunteers, suppliers and public. In support of this and through training and induction, staff should:

- Make themselves aware of the signs and symptoms of COVID-19 and monitor their own wellbeing.
- Not go to work if they are displaying signs or symptoms of COVID-19 or if feeling unwell.
- Immediately self-isolate or restrict their movements at home if they display any signs or symptoms of COVID-19 and contact their family doctor to arrange a test.
- Stay at home, if identified as a close contact of a confirmed case of COVID-19, and not go to work. In such instances, they must also restrict their movements for 14 days.
- Report to their manager immediately if any symptoms develop during work.
- Cooperate with any public health personnel and their employer for contact tracing purposes and follow any public health advice given in the event of a case or outbreak in their workplace.

Worker Teams

Where possible, organise workers into teams who consistently work and take breaks together. Staffing rosters should ensure the separation of key staff in order to limit exposure and protect the ongoing ability to provide a service. Take into account workers in shared accommodation are grouped into fixed teams/pods.

The teams should be as small as is reasonably practicable in the context of the work to be done and ideally there

should be no cross-over between teams. This is to allow for easier isolation should symptoms of COVID-19 be present. In the event of an infection of a staff member this will decrease the risk of losing all staff.

Breaks should be organised in such a way as to facilitate maintenance of physical distancing, for example, placing tables and chairs far enough apart in canteens, reorganising and staggering breaks.

Staff Welfare and Well-being

Consideration will need to be given to the mental health and well-being of all your staff. A support plan for workers should be put in place by:

- Providing ongoing communication to all workers and affected stakeholders
- Having an open-door policy for staff (permanent, temporary freelancers and volunteers) to be able to discuss any concerns they may have.

The HSA website provides general information and advice on [workplace stress](#) and [Work related stress during COVID-19](#).

[Minding Creative Minds](#) offers wellbeing services specifically to the Irish music sector.

Returning to Work

In advance of returning to work staff, residencies, contractors and volunteers are required to complete a 'pre- return to Work Form' or the first time after a workplace closure-to confirm to the best of their knowledge that they:

- have no symptoms of COVID-19
- are not awaiting the results of a COVID-19 test
- are not self-isolating or restricting their movements.
- have not returned from travel abroad, refer to the [latest government travel advice](#)

While the pre-return to work form itself does not need to be resubmitted, employers may request staff to reconfirm that the details in the pre-return to work form remain the same following an extended period of absence from a workplace (e.g., following annual leave) or staff may only access the workplace infrequently.

A sample Return to Work Safely Checklist is available from the [HSA](#).

On returning to, or starting work, every worker must undergo an induction training programme. The training should include current advice and guidance on public health. The HSA have issued an Employees Checklist to inform staff of their individual responsibilities in helping to stop the spread of the virus. This sheet can be given to employees as part of their induction training – [HSA Employee Responsibility Form](#).

Recommended content of the training should include:

- Good hygiene practices including correct hand washing technique, respiratory etiquette and other details of the IPC measures at the workplace
- Physical distancing guidelines and how to adhere to them, including no shaking hands policy.
- [Symptoms of COVID-19](#).
- Changes that have been implemented in the workplace including operational and physical changes.
- What to do if they (or someone around them) is displaying symptoms of COVID-19 both when in work and outside of work. The use of the isolation area and the procedures in place.
- When they can return to work following suspected/ confirmed case COVID-19.
- Who to contact in the workplace if they have any concerns or queries in regard about new working practices?
- Reinforcing of pre-existing safety protocols and procedures, e.g. hard hat policy, working at height, manual handling and sector specific advice.
- The responsibilities of the employee to other employees and the employer, as stated in the [Safety, Health and Welfare at Work Act 2005](#).
- Identify the points of contact for the employer and the Lead Worker Representative.
- Highlighting the [Covid Tracker App](#) and encouraging staff to download it.
- Information on how to receive illness benefits and other Government COVID-19 supports should be made available, [link here](#).

Higher Risk Groups

There are certain groups within the population whose health would be considered at greater risk if they contracted COVID-19. These groups include the elderly and people with certain underlying health conditions. There are two level of higher risk groups:

- very high risk (also called extremely vulnerable)
- high risk.

There is different advice on how to protect each group. The HSE has produced a list of those who are considered to be in the [very high risk and high risk](#) groups.

Staff

Staff who fall into the higher risk groups should be allowed work from home wherever possible.

Those who come into the very high risk (extremely vulnerable) group should seek advice from their occupational health service and healthcare team before returning to work.

Anyone in the higher risk groups who has to attend the workplace, should be preferentially supported by management regarding the 2m physical distancing protocol. They should pay close attention to infection

prevention and control guidance regarding personal protective equipment and hand washing. A risk assessment should be carried out to ensure all possible controls are in place.

Visiting Public

In order to safeguard vulnerable patrons and to reassure them that it is safe for them to visit Arts Centres, it will be necessary to increase the level of protection around them.

Consideration could be given to creating dedicated times when those in high-risk groups can access exhibitions, galleries, workshops or performances. Capacity levels could be set at a lower rate during these times to provide more space for these groups and the lower capacity should mean staff will have more availability to provide help if needed. Other initiatives to protect high risk groups could include prioritised queuing/admission and additional assistance.

Plan for Working from Home/Remotely

Where possible working from home should be encouraged, especially those who fall into the higher risk groups. Taking into consideration the Government's levels 1-5 [COVID-19 Resilience & Recovery 2021 The Path Ahead](#) that outlines where work should continue to be carried out at home/remotely, where practicable and attendance at work should only be for essential reasons. The responsibility for health and safety at work under Safety Health and Welfare at Work 2005 Act ([SHWW](#)) rests with the employer regardless of whether an employee works from home/remotely.

The employer must develop and consult on any working from home policy in conjunction with workers. The HSA have advice on topics such as the key responsibilities for the employer, ergonomic assessments of an employee's home/remote workspace, equipment provision and good practice when using digital technologies. Employees also have responsibilities when they are working from home/remotely. Further detail and advice on working from home/remotely can be found from the [Department of Enterprise, Trade and Employment](#).

How Is COVID-19 Spread?

You can get COVID-19 if you come into close contact with someone who has the virus.

There are three main ways COVID-19 can be spread:

- COVID-19 is mainly spread through close contact and droplets that come from the nose and mouth. For example, from someone who is talking loud, singing, shouting, coughing or sneezing. This happens when people are within 1 to 2 metres of each other and is why keeping a two metre distance from other people is

so effective in reducing the spread. There is increasing evidence that persons with mild or no symptoms (asymptomatic) contribute to the spread of COVID-19 – [ECDC](#)

- COVID-19 can also be transmitted by coming into contact with a contaminated surface. For example, when someone who has the virus sneezes or coughs, droplets with the virus can fall onto surfaces around them. If another individual then touches that surface and then touches their eyes, nose or mouth, they could become infected too.
- Airborne transmission is the spread of a virus in very tiny respiratory particles. This can happen over a longer distance than droplets, such as across a room. To protect yourself, keep indoor spaces well ventilated. There is a higher risk of transmission within indoor rather than outdoor spaces.

Symptoms

It can take up to 14 days for symptoms of COVID-19 to appear. They can be similar to the symptoms of cold and flu.

[Symptoms of COVID-19](#) may include (but are not exclusive to):

- a fever (high temperature – 38 degrees Celsius or above)
- a cough – this can be any kind of cough, not just dry
- shortness of breath or breathing difficulties
- loss or change to sense of smell or taste – this means an individual may have noticed they cannot smell or taste anything or things taste different to normal.

If an individual has symptoms of COVID-19, however mild, they should self-isolate and contact their GP who will be able to arrange a test. If an individual receives a positive test for COVID-19, they should only stop self-isolating when they have had no fever for 5 days and it has been at least 10 days since they developed symptoms.

Further information from the HSE on self-isolation is available [here](#).

The HPSC has produced a self-isolation guide: [For Adults and Children Aged 13 and over](#) [For Children Under 13](#)

It is essential to ensure that all workers (permanent and temporary), contractors, and visitors are briefed to be aware of the symptoms of COVID-19 and asked to stay at home and follow recommended guidelines should they display any symptoms.

Close Contact Definitions

If you are a close contact of a confirmed case, you are required to [restrict your movements](#) for 14 days.

A close contact can mean:

- Spending more than 15 minutes of face-to-face contact within 2 metres of someone who has COVID-19, indoors or outdoors
- Living in the same house or shared accommodation as someone who has COVID-19
- Sitting within 2 seats of someone who has COVID-19 on public transport or an airplane
- Spending more than 2 hours in an indoor space with someone who has COVID-19 will sometimes count as close contact. This could be an office or a classroom. But it will depend on the size of the room and other factors.

Contact Tracing

The [Contact Tracing system](#) is run by the HSE and is the process of identifying persons who may have come into contact with a person infected with COVID-19 and the subsequent collection of further information about these contacts. The '[Work Safely Protocol](#)' advises that all organisations appoint a case manager/designated contact person(s) for dealing with a suspect case and to keep a contact log to facilitate contact tracing in the event of a confirmed case of COVID-19 case. This may be through the use of sign in sheets, clocking systems, visitor logbooks and as a minimum should include name, address and contact number of the individual worker.

Contact details for visiting public could be collected in advance by electronic means for example, (possibly through your ticketing platform) or could be requested at the Arts Centre on the day of their visit. This information should be stored securely in line with General Data Protection Regulations (GDPR) and should be readily available upon request from the HSE to assist with contact tracing. Further information on contact tracing can be found [here](#).

GDPR

Data protection law does not stand in the way of the provision of healthcare and the management of public health. However, measures taken in response to Coronavirus involving the use of personal data, including health data, should be necessary and proportionate. Decisions in this regard should be informed by the guidance and/or directions of public health authorities, or other relevant authorities. Only the minimum necessary amount of data should be processed to achieve the purpose of implementing measures to prevent or contain the spread of COVID-19. The information gathered for the purposes of contact tracing and Public Health must be deleted or destroyed after 28 days. Further information is provided by the [Data Protection Commission](#).

Response Plan if Somebody Presents with Symptoms

The key message is that employees, contractors and visitors should not attend the Arts Centre if they are displaying any signs or symptoms of COVID-19 or are feeling unwell.

The message above can be communicated to the different groups in several ways, including training, information sheets, social media and signage at the centre.

The first aider, or other pre-designated responder, should be contacted if an individual feels unwell and is displaying recognised symptoms. The symptomatic individual should be allowed to make their way home if they are feeling well enough and can do so safely. If not, the designated responder should escort them to the isolation area, remaining 2m away from the patient and ensuring that all other individuals on the premises maintain a 2m distance.

The patient should be given a disposable facemask, if not already wearing one, whilst walking to the isolation area and when exiting the building and advised not to touch any surfaces, objects or people.

Once in the isolation area, the first aider can assess the individual to see if they are well enough to return home, contact their GP by phone from home and isolate there. If the person is not well enough to travel home, then they should contact their GP by phone (preferably using their own mobile phone) to discuss the next steps. Anyone showing symptoms of COVID-19 should not use public transport and an alternative method of transport should be organised.

If the individual displaying symptoms is a member of the general public who is visiting the Arts Centre they may be accompanied by other individuals, who may also need to be considered as suspected cases.

Outbreak (2 or more linked cases)

An outbreak of COVID-19 is when two or more cases of the disease are linked by time, place or person. The management of an outbreak is managed by the local Departments of Public Health to enable the outbreak to be brought under control as quickly as possible. It also requires close engagement and cooperation between the employer, the LWR, the staff, representatives and in particular with the worker(s) affected. Outbreaks in a single workplace, which are not managed and brought under control quickly, can rapidly spread to other workplaces and/or the wider community. Continuous and effective communication between all parties is essential.

Reporting Requirements

Currently there is no requirement within the non-healthcare sector for an employer to notify the Health & Safety Authority if an employee contracts COVID-19.

Isolation area

A suitable isolation area should be identified in advance of it being required. This will be the location where a person experiencing symptoms of COVID-19 can be brought in order to isolate the individual and minimise the risk of contact with others on the premises. The isolation area/room should be easily accessible, bearing in mind it may need to be accessed by members of the public as well as employees, and be accessible for those with disabilities.

An isolation area should ideally be a room where the door can be closed and has a window for ventilation. Where a closed-door area is not possible, an area away from others could be used. Only the minimum amount of furniture should be placed in the room to facilitate easier cleaning and disinfecting when the room has been used and should contain the following:

- Tissues
- Hand sanitiser
- PPE including gloves and surgical facemask
- Disinfectant and/or wipes
- Waste bags or waste bin with lid (pedal bin or non-touch mechanism).

There is also the possibility that more than one isolation room/area may be needed at any one time and a contingency plan should be in place should this occur.

COVID-19 Contact Tracing Log for Suspected Case

A COVID-19 log (see appendix for sample) should be completed as part of your COVID-19 response policy, managed by designated contact person/case manager. It should be filled in if a person presents themselves as feeling unwell at your venue and treated as someone presumed to have COVID-19. It is not intended to be a substitute for First Aid Patient Report form.

The aim of the contact tracing log is to identify who has been in close contact and the areas of the venue that may be affected. Inclusions and functions are:

- To assist the HSE contact tracing process, and provide detailed records for the enforcing authorities (HSE, HSA) should they require further information.
- Workers/contractors/performers/visitors – who have potentially been exposed and what impact it may have on the operations of the venue.
- To obtain critical information for post incident actions required for your place of work to remain functioning.

First Aid/Medical Provision

On-site first aiders will need to provide initial treatment as necessary, or until the emergency services arrive. Management should ensure first aiders receive any necessary training updates and are confident that they can help someone injured or ill.

- Review all first aid procedures to adapt in line with current COVID-19 guidance. The Pre-Hospital Emergency Care Council (PHECC) have issued an update in regards to [COVID-19 and First Aid Provision in the Work Place](#).
- Ensure sufficient resources are available to deliver first aid including adequate supplies of PPE – single use nitrile gloves, disposable plastic aprons, surgical face masks and eye protection.
- Good hand hygiene should be practised during any first aid situation including hand washing with warm water and soap or the use of hand sanitiser before and after providing first aid treatment.
- Understanding of the venue specific response plan for how to deal with a suspected case of COVID-19.
- Identify a suitable isolation room where a suspected case of COVID-19 can be brought. As outlined above, the isolation room should be a separate area to the first aid room. However, your first aid room may need to become an isolation area if a patient receiving first aid treatment shows symptoms of COVID-19 while being examined by the first aider. Contingency plans should identify alternative suitable areas for the provision of first aid should the main first aid room become unavailable.
- If a responder encounters an individual with suspected COVID-19 within the workplace, the patient should be given a disposable mask to wear.

Further information:

[PHECC website](#).

[HSA website – Dealing with a Suspected Case of COVID-19](#)

Scenario 1

Inside your Arts Centre – a member of staff shows symptoms of COVID-19

General detail:

- COVID-19 response plan developed, tested
- All staff and contractors are made aware of the symptoms of COVID-19 via in-house training induction, posters/ information sheets.
- Procedures and training provided to all staff to respond to suspected case of COVID-19.
- Isolation room/area has been identified and is stocked with appropriate PPE.
- Contact log with details of all those visiting the Arts Centre in place to aid contact tracing if necessary (and kept for 28 days)
- Encourage all staff to download the COVID Tracker App.

COVID-19 symptoms	<ul style="list-style-type: none"> • Cough this can be any kind of cough, not just dry. • Fever (high temperature – 38 degrees Celsius or above). • Shortness of breath or breathing difficulties. • Anosmia – Loss or change in your sense of smell and taste. This means you've noticed you cannot smell or taste anything, or things smell or taste different to normal.
Notified staff member	To maintain physical distance from member of staff with suspect symptoms.
Alerting key staff	<p>The notified staff member will contact:</p> <ul style="list-style-type: none"> • The first aider or designated contact person/case manager. <p>Inform that a member of staff member is feeling unwell and displaying recognised symptoms, giving your location. Decide on the best form of communication: radio, mobile.</p>
Immediate response at the initial location	<ul style="list-style-type: none"> • The designated responder to attend and staff member (the patient) to be given a facemask at the scene (if not already wearing one). • The designated responder escorts the individual patient to the isolation area/room. • Advised the patient not to touch any surfaces, objects or people. • Remain at least 2m away from the patient. • Ensuring all individuals on the premises maintain 2m physical distancing.
Key actions by first aider / responder in isolation area	<p>Responder to assess the patient to see if they are well enough to return home and to contact their GP by phone from home.</p> <p>If patient is not well enough to travel home:</p> <ul style="list-style-type: none"> • To contact their GP by phone (preferably using their own phone) to discuss the next steps. • Any patient displaying symptoms staff or public should not use public transport and an alternative method of transport should be organised. • Further detail can be found on HSE COVID-19
Suspect COVID-19 protocol	<p>While waiting for a diagnosis from the GP or HSE.</p> <p>In the meantime:</p> <ul style="list-style-type: none"> • Who may have been exposed to the staff member? • Identify who were they in close contact with through your contact log records. • If a positive COVID-19 diagnosis is confirmed, close contacts of a confirmed case will need to get tested and restrict their movements for 14 days. <p>Close contact and casual contact</p> <ul style="list-style-type: none"> • No personal details of the suspect/confirmed case should be shared.
Key questions to consider in this scenario	<ul style="list-style-type: none"> • Can you continue operating as a place of work? • Have you built in contingency plans to ensure the venue can remain functioning? • Can you keep the venue open if a number of staff have to self-isolate? • What cleaning procedures are in place, are there specialized cleaning contractors required? • Do you have separate work teams (pods) -FOH/BOH/Performers- that work in rotation and do not mix? • If you are open to the public in level 1 & 2. Do you need to consider cancelling the show and what is your cancellation policy? • Insurance cover
Follow up actions	<ul style="list-style-type: none"> • Suspect COVID-19 cases to be reported to senior management. • Incident report to be completed. • Be available to assist with any contact tracing request should a case of COVID-19 be confirmed. • Ensure that staff are aware of government financial supports for the staff required to self-isolate. • Review and amend your Arts Centre policies accordingly.

The scenario listed above is only an example for the purpose of guidance.

Scenario 2

Members of the public attended the Arts Centre 2 days ago and has since tested positive for COVID-19, there is reason to suspect an [outbreak](#).

General detail:

- The Arts Centre will have been notified by the HSE contact tracing team of a suspected outbreak.
- Work with the HSE on all their requests, requirements, and take their guidance.
- The Arts Centre has developed a stakeholder communication procedure.
- Daily contact log kept of all visitors, staff and contractors.
- Ticketing policy in place for contact tracing for members of the public.
- Encourage all staff to download the COVID Tracker App.

Immediate response on notification of confirmed case

Notify senior management and consider the following:

- Inform key stakeholders as per procedure i.e. zoom meeting
- Inform individual staff if they have been in close contact with a confirmed case of COVID-19 if requested by HSE or local department of public health. No personal details of the confirmed case should be shared.

If there is a show the same day, consider the following based on advice from the HSE:

- Close contact assessment, where [outbreak](#) is suspected.
- Postponing or cancelling the event.
- Initiate the communication plan with the public/ticket holders.
- COVID-19 cleaning procedures of the venue.

Employer manager/LWR/case manager

- Employer, manager, case manager, LWR to assist HSE in the process.
- Need to establish a timeline of work/events in the last 2 days.
- Ensure availability of close contact details should they be requested by the HSE.

Management

Communications with staff, contractors and members of the public as per HSE recommendations to remain open, delay schedule, postponement or cancellation of performance or event.

Key questions to consider in this scenario

If there is contingency built into operations, consider the following:

- Do you have separate work teams A & B (FOH/BOH/Performers) that work in rotation and do not mix?
- Can you reopen using the team that potentially were not exposed 2 days ago?
- What are the minimum staffing levels to open the Arts Centre?
- Can the Arts Centre be deep cleaned in time?
- What is your insurance cover?

Follow up actions

- Follow advice given by HSE.
- Incident report to be completed.
- Review COVID-19 plans and update.
- Provide advice and assistance to affected staff members and their well-being.
- Review and amend your Arts Centre policies accordingly.

The scenario listed above is only an example for the purpose of guidance.

Occupational Safety

The good governance of Arts Centres and the responsibility to ensure a safe place of work is that of senior management and Board of Directors, these overall responsibilities cannot be out-sourced on to individual staff roles. The Arts Centre is responsible for the health and safety for staff and others under Safety Health and Welfare at Work 2005 Act. Staff consultation and an inclusive approach is integral to the successful operation of the Arts Centre. Creating and maintaining a safe space for arts workers, audience and centre users requires strong communication and a shared collaborative approach between employers and staff and is essential to achieve success and maximum buy-in.

The Government's [Work Safely Protocol](#) sets out the measures needed in every workplace including developing/ updating a COVID-19 Response Plan including a COVID-19 risk assessment and implementing COVID-19 infection prevention and control (IPC) measures to minimise risk to workers including:

- Hand hygiene
- Respiratory hygiene
- Physical distancing
- Pre-return to work measures
- Dealing with a suspect case of COVID-19 within the workplace
- At-risk workers
- Working from home
- Business travel
- Contractors and visitors
- Cleaning
- Use of PPE
- Customer facing roles

Underpinning all Infection Prevention and Control (IPC) measures is that the BEST way to prevent the spread of COVID-19 in a workplace or any setting is to practice physical distancing, adopt proper hand hygiene and follow respiratory etiquette.

COVID-19 Risk Assessment

Where a risk of exposure to COVID-19 is identified in the COVID-19 response plan, a safety risk assessment should be completed, considerations include:

- Review of existing and normal work arrangements.
- Workspace assessment as regards layout, space and ventilation.
- How might individuals come into contact with other people while in your venue, how frequently and for how long?
- Assessing work tasks where there is close proximity and customer facing roles for either staff or public.
- How do staff travel to and from work?
- Identifying which staff are in the higher risk groups.
- Considering minimum safe level of staffing: how would absenteeism affect operations?

- Putting arrangements in place for if someone becomes unwell on the premises, including designating an isolation area and facilitating the provision of first aid.
- The need for regular reviews of the risk assessment.
- Establishing home working arrangements.
- There is an increased transmission risk, particularly indoors as a result of aerosolisation and droplet dispersal from audiences singing, shouting or having to raise their voices. Event organisers should risk assess activity's considering the event type, audience behaviour, space layout, event duration and ventilation.

In keeping the COVID-19 plan up to date the Arts Centre should ensure that where work practices have been changed or modified, that staff are not inadvertently exposed to additional occupational health and safety hazards and risks.

The welfare and safety of those working from home, current information here from [Citizens Information](#). The NSAI '[Workplace Protection and Improvement Guide](#)' offers guidance on how to complete a COVID-19 Risk Assessment.

Hand Hygiene/Hand Sanitising

Good hand hygiene will help to stop the spread of COVID-19. It is important to encourage frequent hand washing using soap and warm water and that staff are familiar with and follow [HSE handwashing guidelines](#). Between hand washing, the use of hand sanitisers (alcohol (minimum 60%) or non-alcohol based) is recommended. In choosing a hand sanitiser, it is important to ensure that it is effective against Coronavirus.

In addition to a **No Handshake policy**, it is recommended to wash hands:

- After coughing and sneezing.
- Before and after eating.
- Before and after preparing food.
- If in contact with someone who is displaying any COVID-19 symptoms.
- Before and after being on public transport (if using it, consider scheduling to avoid rush hour.)
- At the start and end of a work task.
- Before and after being in a crowd.
- When arriving and leaving the Arts Centre.
- Before and after having a cigarette or vaping.
- When hands are dirty (incl. handling money).
- After toilet use.

Encourage staff to maintain good general hygiene practices whilst at work:

- Install extra hand washing and hand sanitising dispensing units. Alcohol based hand sanitiser will require a fire risk assessment; for conditions of use (see the following section).
- Keep personal workspace free from clutter to facilitate easier cleaning.

- Provide appropriate cleaning resources for staff to be able to use on their personal workspace.
- Hot-desking should be avoided wherever possible, and workspace allocated for individual use. When a space is used by more than one person, the desk/workstation should be cleaned and disinfected before and after each use.
- Provide additional waste bins with lids in workspace, preferably a pedal bin or having a non-touch opening mechanism.
- Staff to bring in their own drinking bottles, which should be labelled.
- The use of shared hand towels should be avoided.
- Work schedules will need to include cleaning, at the beginning and end of each task or session, the responsibility should be on all staff within the working area and on all departments.
- Consideration should be given to the environmental impact of new COVID-19 related working practices and, where achievable, adopt an environmentally sustainable approach.

The Health Service Executive (HSE) has designed resources including posters and videos which are freely available for employers to encourage preventative measures for the spread of the COVID-19. These resources can be found through the [HSE website](#).

Alcohol-Based Hand Sanitiser Dispenser units

Considerations should be given to the safe use and storage of alcohol-based sanitisers. In particular the installation of these dispensers is a fire hazard and should meet the following conditions:

- Individual alcohol-based hand sanitizing dispensers do not exceed a maximum individual capacity of 1.2 litres (40.6 ounces).
- Dispensers are not installed above electrical outlets, light switches, other heat or potential ignition sources.
- Avoid ignition sources immediately after applying hand sanitiser e.g. lighting candle or smoking.
- Dispensers should be located in well-ventilated areas with no open drains or access points to waste/drainage.
- A drip tray to be located under dispensing point and any waste to be disposed of safely and regularly into a fire-resistant waste container.
- Corridors where dispensers are installed have a minimum width of 2 metres and without a combustible floor covering such as carpet.
- Dispensers that project more than 9cm into a corridor must be clearly noted in the Arts Centre's Health and Safety Plan.
- Additional fire extinguishers to be located near dispensing point.
- All storage of replacement alcohol-based hand sanitizing containers on floors, should be limited in quantity to the week's requirements and shall be within approved flammable liquid storage cabinets.
- Bulk storage of these gels should be in a properly

ventilated and fire-resistant room located remotely from the main building, and away from escape route. Smoke detectors should be provided and linked to the main alarm in this space.

- The Arts Centre's fire risk assessment should be reviewed, and a review of training and fire safety measures should be undertaken prior to installation of these dispensing units, with specific reference to these units and the hazard of fire.

Respiratory Hygiene

When coughing or sneezing, the mouth and nose should be covered with either a tissue or the individual's bent elbow. Tissues should be placed into a sealed bin and hands washed. If a person's hands are contaminated and they touch their face, they can then transfer the virus to their nose, mouth and eyes where the virus can then enter their body. This reinforces the necessity for good hand hygiene.

Face Coverings

By law it is compulsory to wear a face covering on public transport and in shops and other indoor settings including theatres, cinemas and museums. Visitors must wear a face covering at all times other than the limited purpose and limited time period necessary to consume food and beverages.

Individuals do not have to wear a face covering if they have an illness or impairment that would make wearing or removing a face covering upsetting or uncomfortable. Children under 13 are also not required to wear a face covering. There are also some exemptions for workers for example, where there is a screen separating the worker from other persons.

Visors are not the best option for offering protection from COVID-19. Visors may stop some spread of droplets from the nose or mouth. This is better than not wearing any face covering. But visors should only be worn by individuals who have an illness or impairment that makes wearing a face covering difficult. Further advice on face coverings and visors can be found [here](#).

Wearing of masks is not a substitute for the Infection Protection Control (IPC) measures outlined (physical distancing, hand hygiene, respiratory hygiene, worker teams' arrangements etc.) but they may be used **in addition** to these measures especially where maintaining physical distancing is difficult. If masks are worn, they should be clean and they should not be shared or handled by other colleagues. A full list of places where masks should be worn can be found on the [HSE website](#).

Ventilation

Ventilation refers to the movement of outdoor air into a building, and the circulation of that air within the building or room. This can be achieved through natural means (e.g.

opening a window) or mechanical means (e.g. a central heating, ventilation and air conditioning).

- Natural ventilation through the introduction of fresh air into the workplace e.g. opening doors and windows. Cross-ventilation is a good option for window ventilation as it facilitates the quick exchange of room air for fresh air through widely opened windows opposite to each other where possible. Propping open internal doors may increase air movement and ventilation rate. (**Note:** fire doors should not be propped open unless fitted with approved automatic closers so that they function as fire doors in the event of an alarm or fire).
- Mechanical ventilation through the use of HVAC (Heating, Ventilation and Air Conditioning) systems. These provide comfortable environmental conditions (temperature and humidity) and clean air in indoor settings such as buildings and vehicles. Switching off air conditioning is not required to manage the risk of COVID-19. However, as many air conditioning units just heat, cool and recirculate the air, it is important to check ventilation systems to ensure that there is an adequate supply of fresh air (from a clean source) and that recirculation of untreated air is avoided. Where workplaces have Local Exhaust Ventilation, the make-up air should ideally come from outdoor air rather than from adjacent rooms.

General recommendations contained within [HSPC Guidance on Non-Healthcare Building Ventilation during COVID-19](#) are listed below. This document provides an overview of the current literature examining the association between ventilation and COVID-19, and is aimed at commercial and public buildings but does not include residential or health care settings.

- Make sure that any mechanical ventilation systems are adequately maintained as per manufacturer's instructions. There is no need for additional maintenance cycles beyond the routine maintenance.
- Where filters are used in the central HVAC system, ensure that these are replaced regularly as per manufacturer's instructions. There is no need for additional cleaning or changing beyond routine maintenance.
- If filters are used as part of a central ventilation system, consideration should be given to installing the most efficient filter for the system (Minimum Efficiency Reporting Value-MERV- 13 to 16; ISO 16890 ePM1 rating 60-90%). HEPA filtration should be considered where air is re-circulated.
- Increase the outdoor air fraction of air inside buildings as much as possible. This can be done by fully opening outside air dampers in mechanical systems or opening windows where available.
- Increase total airflow supply to occupied spaces by increasing number of air exchanges per hour.
- Mechanical fans should only be used where there is a single occupant in a room. If this is not possible, then fans should be directed to exhaust directly to the

exterior environment (e.g. open window), to minimise potential spread of pathogens.

- Disable demand controlled mechanical ventilation if possible. These types of HVAC systems are set to only circulate air when a certain threshold is passed, usually the amount of CO₂ build-up in the room, or the ambient room temperature. If it is not possible to bypass this system, then set the threshold to the lowest possible setting (e.g. 400ppm or less of CO₂) so that the system remains ventilating at a nominal speed.
- Keep ventilation running at all times (i.e. 24/7), regardless of building occupancy. When unoccupied, ventilation can be reduced to the lowest setting.
- Extend the hours of nominal HVAC operations to begin two hours before the building is occupied, and to only reduce to lowest setting 2 hours after the building has emptied. This ensures that rooms are well ventilated before occupancy each day.
- Ensure extractor fans in bathrooms are functional and running 24/7. When the building is occupied, they should operate at full capacity. As with the central HVAC, they can be set to the lowest speed 2 hours after the building is emptied and ramped up again 2 hours before occupancy if the system allows.
- Avoid directing air flow directly onto individuals or across groups of individuals, as this may facilitate transmission of pathogens between individuals.
- Avoid the use of air-recirculation systems in HVACs as much as possible. Use 100% outdoor air if supported by the HVAC system and compatible with outdoor/indoor air quality considerations. If it is not possible to disable the air recirculation system, then HEPA filtration or the highest efficiency filter possible according to the HVAC manufacturer's specifications should be considered.
- While there is evidence in experimental settings that coronaviruses like the SARS-CoV-2 virus deteriorate faster in high temperatures and humidity, the levels that need to be achieved are not attainable or acceptable in buildings. In addition, indoor humidification is not a common feature in most HVAC systems, and would incur additional maintenance and equipment costs. However, low relative humidity (<20%) is known to increase an individual's susceptibility to infection. Where such systems do exist, the advice is to maintain a relative air humidity of 20-60% if feasible.
- Create "clean" ventilation zones for staff that do not include high-risk areas (e.g. visitor reception). This can be done by re-evaluating the positioning of the supply and exhaust air diffusers and adjusting flow rates to establish measurable pressure differentials.

Further information on ventilation is available at:

- [WHO](#)
- [ECDC](#)
- [Safety, Health and Welfare at Work \(General Application\) Regulations 2007, S.I. No. 299 of 2007](#)

- [Federal Environment Agency, Indoor Air Hygiene Commission \(IRK\)](#)
- [CIBSE Ventilation Guidance](#)

Physical (Social) Distancing

Physical distancing (PD) is one of the most important measures in reducing the spread of COVID-19. It does this by minimising contact between people who may be infected and healthy people.

[Physical Distancing](#) involves:

- Keeping a space of 2 metres between people
- Avoiding any crowded places
- Not shaking hands or making close contact with other people, if possible.

There is very little risk if you are just passing someone, but a distance of 2 metres should be maintained as much as possible.

COVID-19 physical distancing will affect an Arts Centres occupancy capacity and in determining revised capacity figures depends on the available space. A revised capacity should consider:

- Entry and exit capacity
- Standing and seating usable space, (including Foyer, Welfare facilities, F&B areas)
- Any effect on emergency arrangements.

When the revised capacity figure is known, a system of access control will be needed to ensure this number is not exceeded and that the name and contact details of all those within the building are captured. If any changes to spaces alters or impacts your fire safety strategy (e.g. fire doors, seating layout escape routes), then this should only be done with the considered advice from a chartered fire engineer.

To assist physical distancing protocol around the venue, the following should be considered:

- Reducing movement by discouraging non-essential trips within buildings, for example, restricting access to some areas or encouraging the use of radios for communication.
- Remote working and online meetings should be encouraged to reduce face-to-face contact.
- In larger, open plan workspaces other measures may need to be used including one-way systems and floor markings.
- Workspaces (including Front of House, dressing rooms, costume workshops, offices) should be spaced out to allow for physical distancing. Furniture may need to be removed, fixed in position or marked 'not for use' to facilitate correct spacing. If this is not possible, consider shift patterns or remote working to reduce the overall number of staff in the workspace at any one time.
- Rooms and workspaces should be given a revised capacity figure with the capacity indicated on a sign

outside the room or workspace.

- Installing screens between workspaces where physical distancing is not possible and customer facing positions. Screens do not need to be floor to ceiling but should be of an adequate height (e.g., cover a person in a standing position) and width to block the pathway from the nose and mouth to the face and workspace of the other persons. Screens may be fixed or mobile depending on requirements including emergency access. Screens should be regularly cleaned with detergent and water and important to ensure there is adequate ventilation. Further advice on screens is given by the Health Protection Surveillance Centre (HPSC) and the National Collaborating Centre for Environmental Health (NCCEH).
- Stagger break times to reduce congestion in circulation areas and breakout areas. Restricting access and staggering the use of green rooms or kitchen facilities, including holding office and back of house breaks at different times.
- Working from home or split shifts to reduce building occupancy levels.
- For busy days in the Arts Centre, a strategy as regards zoning may be applied so that staff movement between areas are minimised and controlled. Staff may be restricted to gallery or theatre spaces, with dedicated welfare facilities for these areas, see fixed team working. Daily inductions may include information on the daily zone/work group arrangements.
- The introduction of physical distancing protocol within the wider community has been especially hard for blind people, and consideration should be given with venue layout and staff training.

Areas of circulation or movement, including corridors and stairwells, where wide enough should have clearly marked and separated direction signs; and, where not wide enough, should be single direction or stop/go with additional measures including:

- Discouraging conversations, phone calls or gatherings in corridors.
- Where corridor has shared access, agree access times for deliveries/collections, to reduce the footfall to a minimum, and establish who may access on other occasions.
- Assessment of disability access and identify users, considering access for circulation and access to toilets and lifts.
- Develop new circulation routes, or access around the building, identify points of higher activity – e.g. relocating storage areas, whilst being cognisant of pre-existing security or fire safety or manual handling requirements.

There may be certain tasks and situations where it is not possible to maintain physical distancing requirements between individuals. Where such a situation has been identified the following questions should be asked:

- What does the task involve, and is it absolutely necessary?
- Are there alternative ways of achieving the task to ensure physical distancing and safety compliance?
- Determine the number of people required for the task to be undertaken safely and use a partnering and worker team's approach.
- As a last resort, if physical distancing cannot be maintained, what PPE should be used to safeguard individuals?

Where the recommended 2m physical distancing cannot be achieved, the following measures should be considered:

- Maintaining a minimum distance of 1m where possible and keeping those involved to the minimum number required to perform the task, minimising any direct worker contact.
- Installation of screens/barriers or use of PPE as identified by specific risk assessment, and in line with Public Health guidance.
- Further increase the frequency of hand washing and surface cleaning.
- Keeping the activity time involved as short as possible.
- Reducing the number of people each person has contact with by considering the use of fixed
- teams, pods or partnering so that each person works with only a few others.
- Opening night gatherings, meet and greet, familiarisation, and so on will need to be considered and assessed to see if tasks can be performed off site: e.g. it is highly probable than post show production notes will not be possible in the auditorium on show days.
- Using back-to-back or side-to-side positioning (rather than face-to-face) for conversations whenever possible.

Signage

The use of signage is an essential tool to inform and remind all Arts Centre users and visitors to adhere to the new working guidelines. Signage should be placed in prominent and relevant positions, reinforcing key messaging around:

- Physical distancing
- Face coverings
- Area and room capacities
- Good hand hygiene
- Respiratory etiquette
- Entry requirements/admission policy
- Symptoms of COVID-19 and what to do if symptoms are experienced while on the premises
- Directional signage including one-way systems and entry and exit points.

Floor/lane markings can be used to advise of pedestrian flow routes around the venue. Physical distancing floor markers must be put in place where queuing is likely to occur.

Signage should be displayed at the entrance to each room/ area showing the maximum number of people permitted in each area to allow for physical distancing regulations to be adhered to, taking into account what it is being used for, available space, appropriate ventilation, room access, duration of use and cleaning requirements.

Signage Resources:

[HSE Resources](#)

[HSA Resources](#)

Personal Protective Equipment (PPE)

Under existing Health and Safety legislation, when employers cannot protect staff by either avoiding certain tasks or implementing other measures, then they must provide the necessary PPE as identified through their risk assessment.

With regards to the transmission of COVID-19, risk mitigating measures, such as physical distancing, good hygiene practices and rigorous cleaning should all be in place. PPE is the **last step** in the hierarchy of risk controls. Where PPE is already being used in a work activity to protect against non-COVID-19 risks, this should continue. The Arts Centre must pay the cost of providing the PPE. The PPE selected must be suitable and fit for purpose and take into account the conditions of the workplace, ergonomics, the wearer's state of health, and it must fit the wearer.

Information and training on the safe use of PPE should be provided to all staff who are required to use it. PPE is recommended for:

- Specific role-based tasks for example, first aiders and cleaners.
- Situations where physical distancing cannot be observed, FOH positions after risk assessment, on stage (Quick Change, Mic Dressing, Costume Maintenance) and gallery tasks.
- A potentially infected individual (when moving to isolation or exiting the venue).

The following PPE resources are available:

Health Protection Surveillance Centre (HPSC) website:

[Video Resources](#)

[Poster Resources](#)

[Health & Safety Authority \(HSA\) Information on PPE](#)

The Arts Centre should consider the implication of COVID-19 and unforeseen risks as a result of changed work practices and is considered in both scenarios that follow.

Scenario 3 – Fire Alarm Activation

A touring company uses a smoke machine which activates the Fire Alarm.

General detail:

- Arts Centre has put all COVID-19 measures in place.
- To facilitate the touring company’s request to use a smoke machine on stage, a detailed fire risk assessment has been carried out and additional staff and control measures are put in place. The use of the smoke machine requires going into theatre mode on stage and auditorium zones (keeping the heat detectors operational).
- The HVAC is on and the Arts Centre has secured procedures in place to have external and internal doors [non fire doors] open front of house and back of house creating as much natural ventilation throughout the Arts Centre.
- The smoke machine effect on stage has been tested several times during rehearsals and has worked well. However, the production uses a significant amount of smoke to counter the increased ventilation within the auditorium.
- The weather forecast is for slight winds increasing over the evening.

The scenario	The Arts Centre is open to the public and the show has commenced.
Incident	<ul style="list-style-type: none"> • All fire control measures are in place. However, due to having the external doors [non fire doors] open for natural ventilation the winds changed direction causing the smoke effect to drift along the access corridors leading to and from the stage. • The front of house manager has notified the stage manager to inform them that the smoke effect is now filling the corridors. • A decision by the stage manager is to isolate the smoke detectors in the in the whole building. • However, the fire alarm is activated for the whole building. • The attending public are concerned and are unsure what to do.
Key questions to consider in this scenario	<p>What do you do?</p> <ul style="list-style-type: none"> • What is the Arts Centre’s policy on fire alarm activation? • Is this a show stop? • Do you evacuate the Arts Centre or isolate the alarm and continue with the performance? • Are you sure there isn’t a fire elsewhere that triggered the fire alarm? • What information do you give the audience? • What impact does this have on your insurance cover? • Was this foreseeable? Should use of the smoke machine have been allowed? • Are you in breach of the fire legislation? Have you consulted with the local fire officer regarding the smoke machine the fire risk assessment and the procedures in place? Attention is drawn to management’s responsibilities under Section 18(2) and associated penalties under Sections 5(3) of the Fire Services Act, 1981, as amended by Part 3 of the Licensing of Indoor Events Act, 2003.

The scenario listed above is only an example for the purpose of guidance.

Scenario 4

Day 4 of the residency and a dancer has called in sick saying they are not feeling well. Rehearsals as part of an Arts Centre residency involve 4 dancers, 1 stage manager and 1 director on a 2-week rehearsal.

General detail:

- All those involved in the residency and are made aware of the symptoms of COVID-19 via induction training, posters/ information sheets.
- As part of the production COVID-19 protocol everybody is advised not turn up for rehearsal if feeling unwell.
- Rehearsal room is spacious and well-ventilated room and show crew operating good physical distancing (PD), hand hygiene and respiratory hygiene practices.
- Strict rules limiting visitors to the rehearsal room, production meetings held on-line.
- Encourage all staff to download the COVID Tracker App.

COVID-19 symptoms	<ul style="list-style-type: none"> • Cough, this can be any kind of cough, not just dry • Fever (high temperature – 38 degrees Celsius or above) • Shortness of breath or breathing difficulties • Anosmia -Loss or change in your sense of smell and taste. This means you've noticed you cannot smell or taste anything, or things smell or taste different to normal.
Notified staff member Immediate response	<p>Need to establish if the dancer's symptoms are similar to COVID-19. If symptoms are similar to COVID-19 advise the dancer to contact their GP and seek further guidance.</p>
Key questions to consider in this scenario	<p>While waiting for a diagnosis from the GP or HSE. In the meantime</p> <ul style="list-style-type: none"> • Do you cancel the remaining rehearsals? • Identify who in the rehearsal room were in close contact through your daily log records • Will you have to notify all dancers in the fixed pod to restrict their movement? • What impact does it have on the production financially? Are there financial supports for the staff required to self-isolate? • If the rehearsals have to be cancelled what are the implications on the show production?
Suspect COVID-19 protocol	<p>Have you built in contingency plans to ensure the production can continue? e.g.</p> <ul style="list-style-type: none"> • Sufficient rehearsal time to factor in losing a performer(s) or show crew. • Can you recast or use an understudy? • Sufficient rehearsal time to factor in delays prior to the performance date. • Are fixed pods in use to reduce risk of transmission between pods or groups? • Planning and arrangement with a medical provider service for prompt COVID-19 testing.
Further Action if required.	<ul style="list-style-type: none"> • Suspect COVID-19 cases to be reported to the producer. • Incident report to be completed. • Be available to assist HSE with any contact tracing request should a case of COVID-19 be confirmed. • Inform individuals if they have been in close contact with a confirmed case of COVID-19. No personal details of the confirmed case should be shared. • Contact details of all those visiting the venue are being recorded to aid contact tracing if necessary. • Review and amend your Arts Centre policies accordingly.

The scenario listed above is a sample and is only for guidance purpose.

Cleaning Protocol and Procedures

Hygiene and cleaning recommendations are a fundamental factor in efforts to stop the spread of COVID-19. A nominated person should liaise with departments to ensure necessary changes to cleaning requirements, that cleaning schedules are being followed, and that adequate cleaning supplies and equipment are in stock.

Definitions:

Cleaning removes germs, dirt and impurities from surfaces or objects. This process does not necessarily kill germs, but by removing them, it lowers their numbers and the risk of spreading infection.

Disinfecting a surface will eliminate the disease-causing microorganisms.

Sanitising reduces of bacteria to safe levels, as set by public health standards, to decrease the risk of infection, may not kill all viruses.

Your risk assessment will help determine your cleaning procedures. If an area needs to be disinfected, it should be thoroughly cleaned first. Disinfection should never be a substitute for cleaning.

- A member of management should be appointed with responsibility for implementing and managing the new cleaning processes within the Arts Centre.
- There should be frequent cleaning of objects and surfaces that are touched regularly e.g. card reader pin pads, handrails, light switches, elevator buttons etc., making sure there are adequate disposal arrangements for cleaning products.
- Work areas and equipment should be frequently cleaned between use. Staff should be provided with essential cleaning materials to keep their own workspace and equipment clean.
- Avoid use of items that are not easily cleaned, sanitised, or disinfected, consider removing soft and porous materials in high traffic areas. Attention should be given to soft furnishings and seating, with manufacturers cleaning and disinfectant procedures for auditorium seating.
- Dance studios will require increased cleaning schedules or the ability for studio users to clean the area themselves. The level of cleaning required will be informed by factors such as the style of choreography, level of occupancy and the duration of rehearsals, it is important to consider the floor as a high touch contact point.
- Where practical and safe to do so, consider keeping high traffic point doors open to limit the use of contact points – with the exception of fire safety doors. Hold-open devices linked to the fire detection and alarm system are recommended to avoid the easy spread of fire and possibly negate your insurance as well as endanger life and property. Note management's responsibilities under current fire legislation.

- When the Arts Centre is open to the public, the cleaning schedule/routine will have to be adapted to take into account the scheduling of events, numbers attending, and areas of your premises in use.
- The use of equipment such as electrostatic sprayers and infection control misters should only be considered in line with Government advice as this develops. At time of publication the Department of Agriculture, Food and the Marine have not approved any biocidal products for use for the control of COVID-19 via fogging/misting/atomisation/aerosol devices.
- The cleaning process can be broken down into pre, during and post event tasks, the cleaning process is continuous and there will always be the need to ensure that the centre is in a presentable and hygienic condition.
- Waste bins should have lids and have pedal/non-touch opening mechanism. Waste should be collected frequently and regularly monitored to ensure bins do not become full.
- Waste from areas where suspected cases have been e.g. isolation area, should be put in a plastic rubbish bag and tied. The plastic bag should then be placed in a second rubbish bag and tied. Label the outer bag with the date. Waste should be stored safely for at least 72 hours and then put in with the normal waste.

A sample cleaning checklist can be found in the appendices.

Cleaning Guidelines after the Presence of a Suspected Case of COVID-19

The following are recommendations for cleaning/disinfecting a room after the presence of a suspected or confirmed case of COVID-19 for example following the use of an isolation room:

- As soon as the suspected case has left the room, keep the door to the room closed for 1 hour.
- Carefully clean all surfaces and furniture in the room with a neutral detergent, followed by decontamination of surfaces using a disinfectant effective against viruses. Disposable cleaning cloths are recommended. Open the window in the room while cleaning is in progress.
- Staff responsible for cleaning after a suspected or confirmed COVID-19 person was present should wear disposable single use non-sterile nitrile gloves and a disposable plastic apron and should avoid touching their face during the cleaning procedure. If an area has been heavily contaminated, such as with visible bodily fluids, from a person with COVID-19, use protection for the eyes, mouth and nose, as well as wearing gloves and an apron. Avoid creating splashes and spray when cleaning.
- Do not allow anyone to use a potentially contaminated room until it has been cleaned/disinfected, and all surfaces are dry.

- Ensure cleaning records are maintained of all cleaning protocols.

Further information on cleaning in non-healthcare settings is available from the [ECDC website](#).

Visiting Contractors/Others

The Arts Centre policy should require that all touring companies and contractors to demonstrate that staff or persons under their care have been properly briefed as regards the COVID-19 policy of the company or contractor and that of the Arts Centre. The incoming touring company or contractor must be able to provide a COVID-19 policy as part of their overall safety documentation submitted including Risk Assessment Method Statements (general and COVID-19 specific), Fire Certificates and Insurance.

A controlled access process should be in place for the Arts Centre including adherence to IPC measures and a system for recording visits by contractors/others should be maintained by the employer and completed by workers as required (contact log).

Induction training for contractors, visiting workers etc. should be provided. The HSA offer a free online course [Return to Work Safely Induction](#) which can also be used. Any specific advice related to the Arts Centre should be in addition to this general induction.

Environmental Health

Due to the COVID-19 pandemic, normal environmental health procedures and regular maintenance checks may not have been taking place. These areas should be identified and addressed before the building is opened to staff and the public.

Legionella

During the COVID-19 pandemic, Arts Centres may have been closed, or their use restricted. This can increase the risk of Legionella growth in the water systems and associated equipment including evaporative air conditioning systems, water fountains, showers, taps, toilets, humidifiers in food cabinets and other equipment if the water systems have not been managed adequately. Before reopening, control measures will need to be in place to avoid the potential for Legionnaires' disease.

Further advice on the prevention of Legionnaires' disease following building closures due to COVID-19 Pandemic is available on the [HSA website](#).

Pest Control

As businesses may close for significant periods it will be necessary to re-establish pest control to deal with any build-up of pest activity during the closure period. Your pest control company will be able to advise you on the best course of action and steps that will need to be taken.

Emergency Plans

Emergency plans must be regularly tested and reviewed. If any changes are made to existing plans this should be communicated to all relevant staff and stakeholders with consideration for how practice and tests are conducted to comply with COVID-19 requirements. However, in the case of an emergency the requirement for personnel safety will supersede the public health physical distancing requirement. Emergency exit plans should reflect that moving visiting public away from the most urgent hazard is the primary consideration. Fire safety plans should include the fire risk associated with the storage of hand sanitiser.

Public Safety

Arts Centres rely on public engagement, participation, and a positive experience for adults and children alike. The key to operating safely as a public venue is by maintaining safe systems of work and the efficient and effective management of agreed capacities, hygiene and safety protocols.

Consider the physical journey for audience and staff (see appendix for detailed considerations).

Critical Action Points

- Facilitating physical distancing
- Rigorous cleaning programme
- Promotion of good hygiene practices
- Clear communication with staff and visitors.

As part of your risk assessment, you will need to analyse the processes in place to allow public access and should identify areas that are likely to be of higher risk, including staff and visiting public interface.

As a controlled environment, Arts Centres have the ability to operate safe working practices and implement protective measures to address the impact of COVID-19. These measures will maintain confidence in the sector to safely engage audiences and visitors.

Front of House

The Front of House staff are the first point of contact where customers begin their venue experience. It is vital that good operating procedures including COVID-19 measures are in place to make the customer feel safe and to create an enjoyable experience.

Front of House Public Access considerations

Ensuring front of house COVID-19 compliance will require:

- Agreed entrance procedures are in place, as regards ticketing, contact information, health screening, queue management, signage and floor markings.
- Internal and external queue management to include physical distancing calculations as regards having

- capacity for expected audience and consider the implications or having to delay the house opening.
- Ensuring all staff are trained and briefed to carry out their functions safely, and where required to advise or assist public whilst maintaining physical distance.
 - All visiting public should be encouraged to use hand sanitiser as they enter the premises. Hand sanitiser units should be placed in prominent positions throughout the Arts Centre with clear signage to encourage use.
 - Installation of screens for increased protection where necessary e.g. box office, reception, cash desk in bar or café.
 - Based on your Risk Assessment ensuring appropriate PPE is available.
 - Late arrivals policy as regards accessing seats.
 - That members of staff and visiting public have been informed in advance of the policy restrictions (see Communications Strategy). Exchange policy for tickets free of charge if ill?
 - Adequate and appropriate safety signage (including COVID-19).
 - Security measures have been agreed, as regards controlling access/exiting, search policy and emergency procedures.
 - Managing access control to maintain agreed capacities.
 - That access to toilets adheres to physical distancing requirements, with the provision of hand washing facilities.
 - Where practical and safe to do so, you have considered keeping high traffic point doors open to limit the use of contact points such as door handles, door bars, and door keypads – except for fire safety doors.
 - Consideration of the provision of a cloakroom: the risk posed from operating the cloakroom is considerably higher due to the physical interaction, you may have to consider not opening your cloakroom.
 - Public contact details (for contact tracing is in place either at the event or via ticketing).
 - Rigorous cleaning, which needs to be visible and proactive and take into account programme schedule, rooms/spaces used, frequent contact surfaces.
 - Working with your Local Authority to consider the impact of your processes, for example queues, in public spaces such as streets/paths, public car parks.
 - Continuous feedback from visitors and audience so that systems can be changed.

Conditions of entry will be informed by current public health advice, these include:

- Wearing of a face mask
- Application of hand sanitiser on entry
- Providing contact details for contact tracing (either on site or electronically)
- Be instructed through advance communication not to attend if they:
 - » Displaying signs or symptoms of COVID-19 or feeling unwell.

- » Required to self-isolate or restrict their movements.
- » Identified as a close contact of a confirmed or suspect case of COVID-19.
- » Not in compliance with the [COVID-19 Resilience & Recovery 2021 The Path Ahead](#) travel restrictions at the time of the event.

Capacity Considerations

The Arts Centre capacity depends on following 2m PD and may vary depending on the type of space/event/show/performance and should be risk assessed accordingly. As stated previously, closed spaces with close contact settings and poor ventilation increase the risk of transmission (with a higher risk of transmission within indoor and enclosed rather than outdoor spaces).

1. Higher Risk Exposure Areas – Convergence, assembly points or spaces
 - » Entrance including ticket collection, cloakroom and any bag checks/foyers/entrances/ exits.
 - » Facilities including toilets/catering/cloakroom (cloakroom may not be allowed to operate)
 - » Auditoria/exhibition space.
2. Circulation areas – Include all areas where visitors move between points
 - » Corridors, stair wells, emergency escape routes
 - » Auditorium aisles.

Visitor Circulation

Circulation of public within your venue will depend on the number of people and available space. Consider all user groups with regard to the changes being made, especially children and access for people with disabilities and those in the (COVID-19) high risk categories. Other measures could include:

- One-way system of movement with circulation plans for small access spaces.
- Visitor self-scanning tickets, avoiding queueing at entrances and counters.
- Use floor markings, signage, barriers to ensure recommended physical distance is maintained, supported by public announcements.
- Zoning to allow for safe circulation and access. Communication between staff managing the different zones will be key to ensuring efficient flow of visitors through the premises and early identification of any issues.
- Ensure access for people with disabilities is maintained. Lifts should be reserved for persons with reduced mobility.
- Special attention to be given to visits by children with families or school groups.
- Guided exhibition tours and educational programmes should be assessed to determine whether they can be delivered safely and that physical distancing measures can be adhered to.
- Stagger entrance and exit times.

Disabled Needs Provisions

Not all disabilities are visible and not all people with disabilities identify as having a disability. Therefore, venues should consider a range of responses. Consideration should be given to the following:

- Any changes to points of entry or exit must ensure continued accessibility for all. Arts Centres that temporarily reduce capacity should still offer enough accessible seating, including companion seats.
- Height of hand hygiene stations should allow easy access for wheelchair users.
- Priority entry to the venue and auditorium should be facilitated for patrons with disabilities, especially if queuing is difficult, particularly people with reduced mobility and people accompanied by a guide dog/ service animal.
- Loss of circulation space for wheelchair users with one-way systems, external queuing arrangements and any possible physical structures to accommodate these, should not be difficult for those with mobility difficulties.
- Many ticketing systems already have the capability of capturing requests for accessible and/or companion seats as well as access services such as audio description, captioning and ISL interpretation. These requests can alert staff in advance of a patron's access requirements. As not all people with disabilities will identify as having a disability in advance, Front of House staff should be trained to deal with requests as they arise and should be familiar with the venue's facilities and access provisions.
- It should not be assumed that ground markings and signage to indicate physical distancing, one-way circulation and room density will be accessible to all patrons with disabilities. Consequently, additional measures should be implemented such as additional information as the point of booking, public announcements, and priority entry.
- Be aware that the use of masks/face coverings may result in communication issues for staff and patrons who lip read. The use of masks with see through panels to be considered.
- Blind or sight-impaired people rely on their sense of touch – this reinforces the need for surfaces and contact points to be cleaned regularly.
- It should not be assumed that all patrons with disabilities are part of a “vulnerable/high risk Group” or “Cocooners” as described by COVID-19 public health advice.

The requirement for COVID-19 public health measures should be considered in the context existing equality legislation. Visiting or Using Arts Centres operating under COVID-19 procedures could be especially challenging for specific impairment groups (people who are Blind or Deaf) who, for reasons of access, need to engage with venue staff to experience what is on offer. The requirement for COVID-19 public health measures should also consider

the existing legal requirement to provide access to these visitors.

The number of people with declared visual disabilities within the arts is small however, most workplaces are going to have a larger number with invisible disabilities or medical conditions. It is especially important that employees are encouraged to self-identify so they are supported appropriately. It should be noted that not all people with disabilities have underlying health conditions. Online resources:

- [Inclusion Ireland: Easy Read Guide COVID-19](#)
- [Aslam](#)
- [COVID-19 Guidelines for Employers to Support a Vision Impaired Employee Returning to Work:](#)
- [Irish Deaf Society Coronavirus ISL Support](#)
- [Coronavirus Guidance for Irish Wheelchair Association Service Users](#)
- [Wheelchair and Assistive Technology Users Precautions for COVID-19](#)

Children

Children and their families, classmates and teachers can make up a regular part of the audience. Special consideration should be given to the distinctive way in which children interact in the Arts Centre setting, whether they attend with a school group or as part of a family unit.

Visiting Public – High Risk /Vulnerable Patrons

In order to safeguard high risk/ vulnerable patrons and to reassure them that it is safe for them to visit it will be necessary to increase the level of protection around them.

- Consideration could be given to creating dedicated times for those in high risk groups to access to exhibitions, galleries, workshops or performances.
- Capacity levels could be set at a lower rate during these times to provide more space for these groups and the lower capacity should mean staff will have more availability to provide help if needed.
- Other initiatives to protect high risk groups could include prioritised queuing/admission and additional assistance.

Scenario 5

A group that includes persons with disabilities is attending your Arts Centre when one member of the group presents to a staff member of feeling unwell.

General detail:

- All staff are made aware of the symptoms of COVID-19 via in house training induction, posters/ information sheets.
- Visitors and member of the public are made aware of the symptoms of COVID-19 in advance notification on tickets, websites, social media and through visible posters / information sheets at the entrance and throughout the Arts Centre.
- Contact details of all those visiting the Arts Centre are being recorded to aid contact tracing if necessary.
- Nominated First Aider/responder has received appropriate COVID-19 training.
- Procedures and training provided to all staff to respond to suspected case of COVID-19.
- Isolation room/ area has been identified and is stocked with appropriate PPE.

COVID-19 symptoms	<ul style="list-style-type: none"> • Cough this can be any kind of cough, not just dry. • Fever (high temperature – 38 degrees Celsius or above. • Shortness of breath or breathing difficulties. • Anosmia -Loss or change in your sense of smell and taste. This means you've noticed you cannot smell or taste anything, or things smell or taste different to normal.
Notified staff member	Maintain physical distance from member of staff/public with symptoms.
Alerting Key Staff	<p>The notified staff member will contact:</p> <ul style="list-style-type: none"> • The First Aider or designated contact person/case manager <p>To inform that a member of the public is feeling unwell giving their location. (decide on best form of communication: radio, mobile)</p>
Immediate response at the initial location	<ul style="list-style-type: none"> • The designated responder to attend the patient and patient to be given a facemask at the scene (if not already wearing one) • The designated responder escorts the individual patient to the isolation area/room. • Advised the patient not to touch any surfaces, objects or people. • Ensuring 2m PD away from the patient. • Ensuring all individuals on the premises maintain 2m PD.
Key Actions by responder in Isolation Area Standard procedure	<ul style="list-style-type: none"> • Responder to assess the patient and if they are well enough to return home. • Contact their GP by phone from home (see key considerations below). • If patient is not well enough to travel home: <ul style="list-style-type: none"> » Contact their GP by phone (preferably using their own phone) to discuss the next steps. (see key considerations below) » Any individual displaying symptoms should not use public transport and an alternative method of transport should be organised. » If the individual displaying symptoms is part of a group, you may have to consider other members of the group as suspected cases.
Key questions to consider in this scenario	<ul style="list-style-type: none"> • The patient has a disability and may require the support of a Personal Assistant (PA), sighted guide or ISL interpreter to be with them. How do you manage this? • What do you do with the remaining members of the group? Consider the emotional state of the group, anxious upset scared? How do you manage this? • Do you stop entry to the venue? • What do you do with the public already in the Arts Centre? • Do you cancel the day's event? • How did the group travel to your Arts Centre? Via public transport, private coach? If it is a suspected COVID-19 case, how does the patient's remaining group travel? • Considerations in developing your Arts Centre procedure policies: (can include all groups) • What is your refund policy? • What is your cleaning procedure for an incident outlined above?
Further follow-up actions	<ul style="list-style-type: none"> • Suspect COVID-19 cases to be reported to senior management. • Incident report to be completed. • Be available to assist with any contact tracing request should a case of COVID-19 be confirmed. • Inform individuals if they have been in close contact with a confirmed case of COVID-19. No personal details of the confirmed case should be shared. • Review and amend your venue policies accordingly.

The scenario listed above is only an example for the purpose of guidance.

Arts Centre Public Areas

Venue spaces are constantly changing and evolving to cater for a new show (e.g. exhibition, performance classes and workshops) with a changing audience of adults and children. Outlined below are considerations for functioning spaces in the Arts Centre.

Galleries and Exhibition spaces

- Capacity for each gallery/exhibition will depend on available area of usable show space, the layout and type of exhibit. Plans/layouts should consider expected dwell time, the expected circulation time, area process times.
- Guidance should be provided on where visitors should move from/to with clear information/signage about the intended paths around the exhibition space.
- Place physical distancing ground marking to indicate physical distancing spacing where congregating might occur, such as in front of exhibits, displays and information signage.
- Room management: ensure clear communication system between staff managing the different areas of an exhibition/gallery to ensure physical distancing can be maintained. Consider use of mobile radios to assist.
- In appropriately sized spaces, create waiting areas where visitors can safely wait until the next area is available, with physical distancing indicators clearly visible.
- To ensure capacity and admission numbers are strictly observed it may be necessary to place a time limit on the visit. These can be communicated as part of the booking system and again during the entry process.
- To manage attendance numbers consider ticketing all your events (including free events) or for a gallery, ticket the traditional times of high interest.
- While guidance and risk assessment may recommend against audio guides or mediators, this may affect the visitor experience of e.g. children, a blind or partially sighted person. This could be addressed by encouraging patrons to bring their own headphones or making audio files available on the venue's website.

Scenario 6 – Gallery Space

A member of the public presents feeling unwell

General detail:

- All staff contractors are made aware of the symptoms of COVID-19 via in house training induction, posters/information sheets
- Visitors and member of the public made aware of the symptoms of COVID-19 in advance notification on tickets, websites, social media and through visible posters/information sheets at the entrance and throughout the venue.
- Contact details of all those visiting the Arts Centre are being recorded to aid contact tracing if necessary.
- Nominated First Aider/responder has received appropriate COVID-19 training.
- Procedures and training provided to all staff to respond to suspected case of COVID-19.
- Isolation room/ area has been identified and is stocked with appropriate PPE.

COVID-19 symptoms	<ul style="list-style-type: none"> • Cough, this can be any kind of cough, not just dry. • Fever (high temperature – 38 degrees Celsius or above. • Shortness of breath or breathing difficulties. • Anosmia – Loss or change in your sense of smell and taste. This means you've noticed you cannot smell or taste anything, or things smell or taste different to normal.
Notified staff member	Maintain 2m physical distancing from member of staff/public with symptoms
Alerting Key Staff	<p>The notified staff member will contact:</p> <ul style="list-style-type: none"> • The First Aider or designated contact person/case manager <p>To inform that a member of the public is feeling unwell, giving their location. (decide on best form of communication: radio, mobile.)</p>
Immediate response at the initial location	<ul style="list-style-type: none"> • The designated responder to attend the patient and patient to be given a facemask at the scene (if not already wearing one). • The designated responder escorts the individual patient to the isolation area/room. • Advised the patient not to touch any surfaces, objects or people. • Ensuring appropriate 2m PD away from the patient. • Ensuring all individuals on the premises maintain 2m PD.
Key actions by responder in Isolation Area	<ul style="list-style-type: none"> • Responder to assess the patient to see if they are well enough to return home and contact their GP by phone from home. • If patient is not well enough to travel home and contact their GP by phone (<i>preferably using their own phone</i>) to discuss the next steps. • Any patient displaying symptoms staff or public should not use public transport and an alternative method of transport should be organised. • If the individual displaying symptoms has been in close contact with the group, you may have to consider everyone a suspect case.
Key questions to consider in this scenario	<p>Do you stop entry to the venue due to a suspect case?</p> <p>Do you delay the next entry to allow cleaning procedure to take place?</p> <p>Communication – how do you inform the to the 10/20 people queueing out-side and growing by 5/10 person every 30 mins? What information should they be given and who is responsible for this?</p>
Further follow up actions	<ul style="list-style-type: none"> • Suspect COVID-19 cases to be reported to senior management. • Incident report to be completed. • Be available to assist HSE with any contact tracing request should a case of COVID-19 be confirmed. • Review and amend your venue policies accordingly.

The scenario listed above is only an example for the purpose of guidance.

Workshops

- The ability to run workshops is dependent on current public health guidance in line with the Government's [COVID-19 Resilience & Recovery 2021 The Path Ahead](#)
- Consider the room size, thorough cleaning schedule, ventilation, facilities, space layout, taking into account physical distancing and the type of workshop planned.
- To ensure capacity and admission numbers are strictly observed, it may be necessary to place a time limit on the workshops and surrounding visit. These can be communicated as part of the booking system and again during the entry process. Consider ticketing for all events, including free events, to allow proper access control.
- Consider seating arrangement in the workshop space, follow government guidance re household groups and physical distancing.
- Ensure provision of hand sanitiser units throughout the space.
- Consider the format and materials required to host the workshop. Avoid the need to share materials – consider the cleaning procedure? Any printed materials, such as handouts should be non-sharing single use or cleanable.
- Provide introductory information on the workshop process and how to facilitate interaction with the attending public.
- Can the workshop cater for all groups including vulnerable groups, children and people with disabilities?
- Are there Outdoor Controlled Environment spaces that can be utilised?
- Can the workshop be accessed online?

Children's Arts & Culture Activities

When providing children's classes for arts and culture activities, the Arts Centre should be vigilant in relation to government advice specifically on:

- allowable groupings
- hand hygiene
- cough etiquette
- physical distancing
- face coverings
- how to identify and respond to signs and symptoms of COVID-19.

Workshop layout should be based on ensuring physical distancing can be maintained, is in line with the [COVID-19 Resilience & Recovery 2021 The Path Ahead](#) Level and takes account of any other capacity restrictions, which may pertain in accordance with child protection or fire safety requirements.

Seating

A nose-to-nose measurement is used when calculating physical distance of 2m. The capacity calculation of an event space must be based on accurate and scalable drawings of the event space at the time of the proposed events. Several factors must be considered in calculating the seating capacity of an area, these include:

- Seat Width
- Aisle Width
- Leading edges
- Management of entry and exit
- Allocation of seating in groups or singly
- Using Alternating or Successive Rows.

Seat Width

Below is a diagram showing the relevant dimensions allowed per person, where seat width has a significant impact on seating capacity:

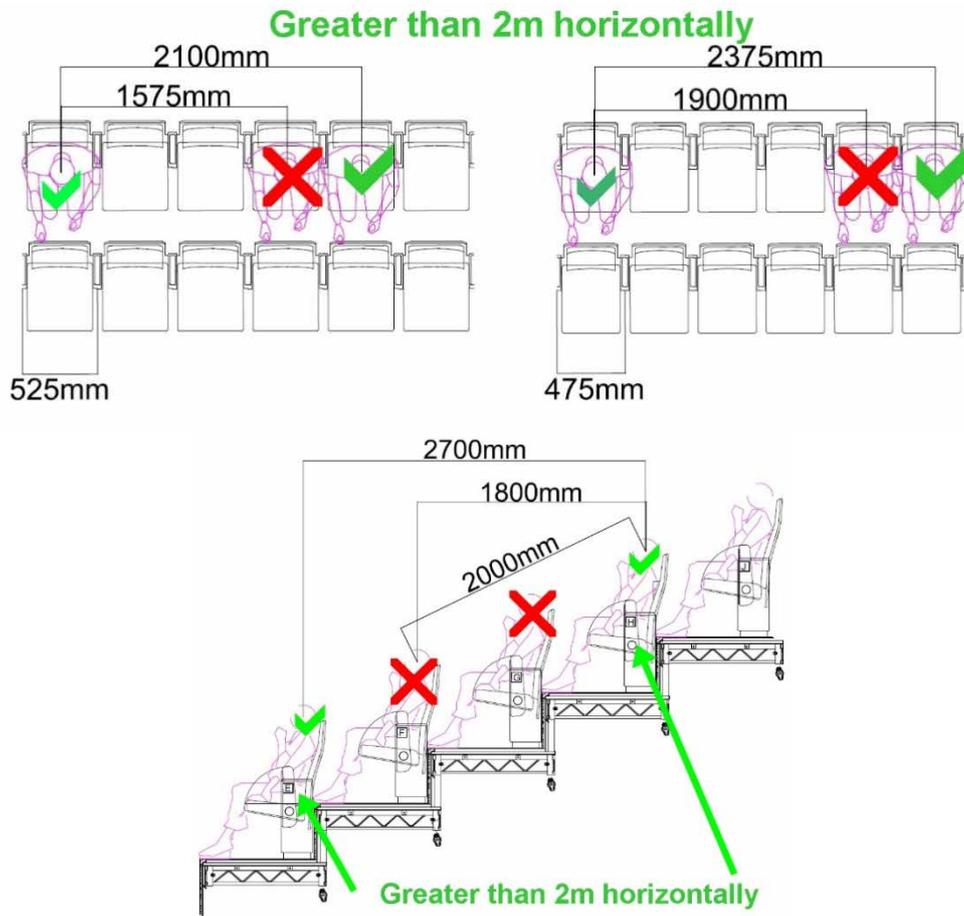


Figure 1 Indicative Raked seating distancing

Grouping

- The allocation of seats, whether they are occupied singly, in pairs or upwards, can optimise the capacity of a seating block. Group booking is determined by the Government *COVID-19 Resilience & Recovery 2021 The Path Ahead* as regards numbers of households and total group size allowable.

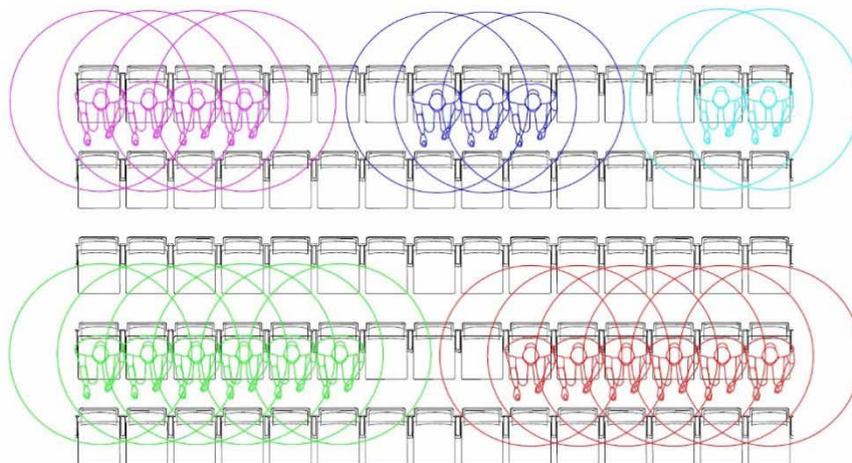


Figure 2 Household seating with successive rows

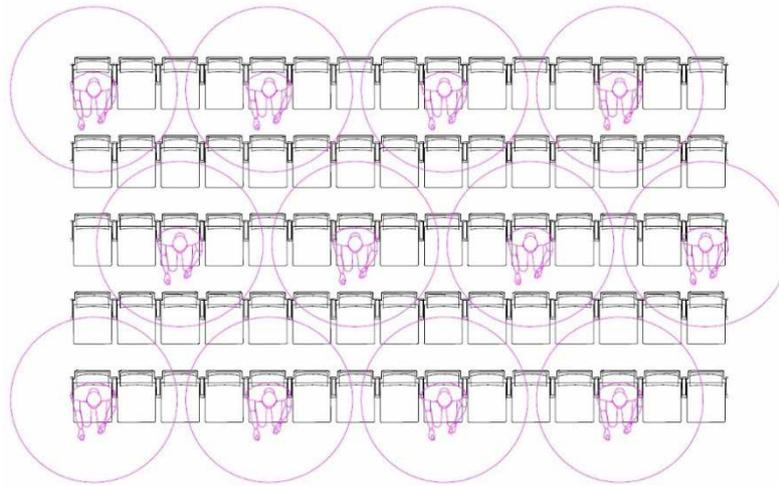


Figure 3 Single checker seating

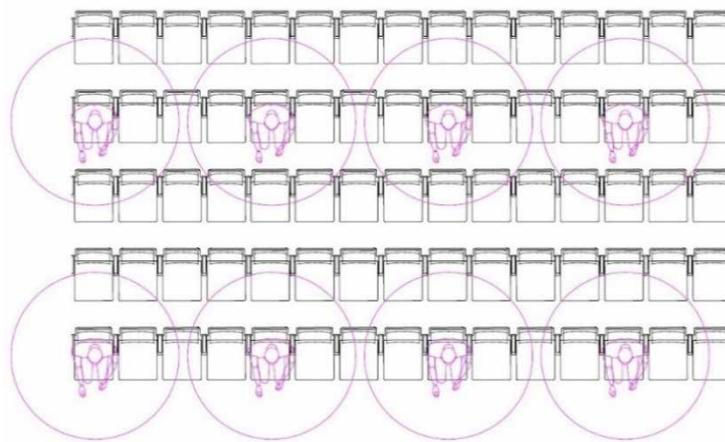


Figure 4 Single grid seating

- Staff in position to support the audience in adhering to physical distanced seating, swapping seats or sitting in wrong place.
- The seating capacity may be optimised by allocating seats in either alternating or successive rows depending on the particulars of the Auditorium. Arts Centre Management must assess each seating area to decide how best to optimise capacity while mitigating risks (e.g. minimising brush past).
- The process of allocating the buffer (empty) seats around a booking to ensure correct distancing, can be done manually or using some of the developing automated systems. The process can be complicated by layouts such as curved rows, tapering rows and other factors. Single patron layouts, and fixed maps can mitigate the workload, but both have drawbacks for optimising capacity, along with patron and artist experience. Careful consideration should be given to the process, in each venue, customising a solution to the unique circumstances for each venue and Arts Centre.

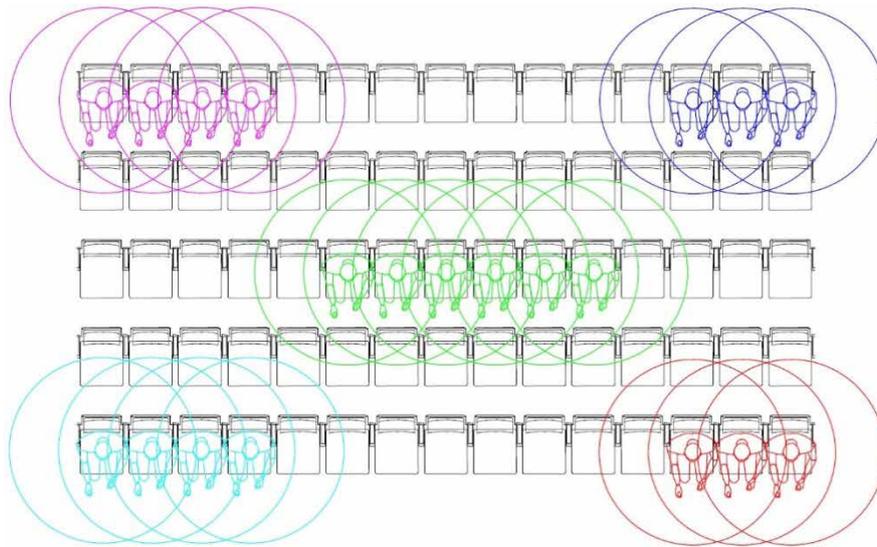


Figure 5 Household groupings within alternative rows

Foyer management and internal queuing

- Stagger arrival times to reduce congestion, open auditorium doors at the same time as the main doors open so that public can go to their seats directly and avoid congregating within the foyer.
- Adopt one-way circulation systems for entering/exiting and to/from toilets and foyer. The pre-show house announcement, along with signage and usher instruction can be used to reinforce the message.
- Avoiding bottleneck at main doors, are there alternative doors that could be staffed and used for entry and exit.
- Use a clear communication system between staff managing the areas, from the entry to auditorium.
- Remind guests who are accompanied by children that they are responsible for supervising children to follow physical distancing guidelines.
- Retail kiosks within the auditorium may cause queueing issues. Hawkers should not be stationary, they should move to patrons, but must be adequately protected in doing so, with necessary PPE and distancing measures.
- Use of additional doors also increases staffing requirements and security considerations.
- It may be necessary to eliminate the seats next to narrower gangways and aisles. Persons queuing on the aisle to exit or toilets may be within physical distancing limits of people sitting for an amount of time. This should be considered within a seating plan where solutions may include exiting from the closest to the exits first, or use alternative exits for the balcony, stalls.



Figure 6 Aisle seating

- Hawker and tray service (VAT allowing) in the auditorium, making use of empty rows, may mitigate against audience movement during an interval or pause. Consideration may also be given to advance pre-ordering to seats and where table service is replaced with ordering via an app.

Leading edge

The first row of the audience should be 2m away (horizontal measurement) from the stage and potentially more if a performance activity is positioned close to the stage (downstage) edge, possible requiring an exclusion radius of 3-5m depending on performance type (e.g. singing, wind instrument, intense spoken word). The following should also be considered as leading edges with person seated 2m from:

- Stage edge to audience
- Distance from orchestra to audience
- Balcony edge to audiences (as below)
- Boxes – travel distance to stalls and aisles that may be used for queueing.

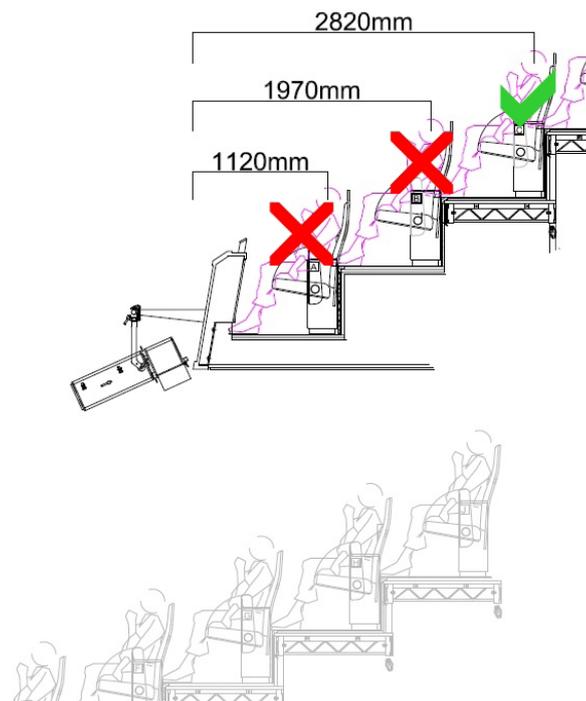


Figure 7 Balcony or indicative area over other seating

Cabaret style seating arrangement

- Cabaret seating may ease pressure on lobby by introducing table service and by having toilet access throughout shows rather than for the interval only.
- If food and beverage are being served, the [Failte Ireland Guidelines for restaurants and cafés](#) must be adhered to.
- Ensure compliance with the Arts Centre fire certificate and public licensing.
- Mitigate risk of furniture movement during entry, performance, exit and fire evacuation. Consider fixing furniture in position, marking positions ensuring compliance in line with fire legislation.
- Final layout should consider corridors or proximity to toilets to ensure 2m PD entrance and exit arrangements.
- Sightline implications – especially with regard to children. Needs to be considered in staging of the show and in layout of auditorium.
- Traditional cabaret arrangements are associated with interactive audience events which would require a more robust risk assessment as regards [room ventilation](#) and levels of audience activity.

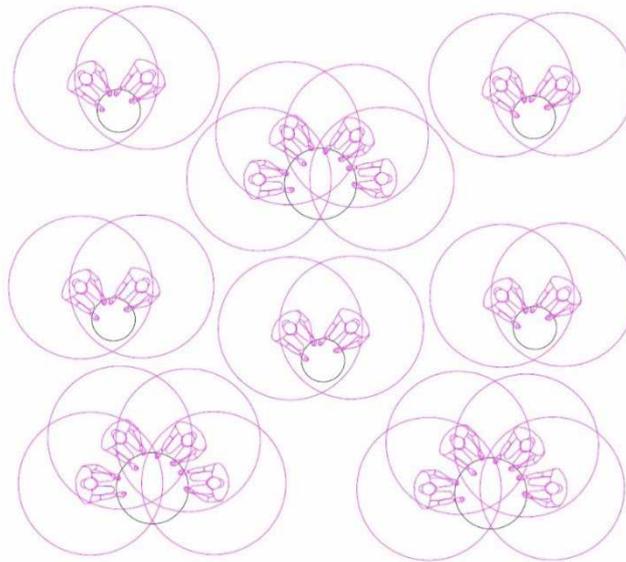


Figure 8 Indicative cabaret table and seating arrangement with 2m PD



Figure 9 Indicative for four people at 1m and 2 people at 600mm diameter tables

Brush Past

Where people are sitting in rows, it will be necessary for them to pass each other to leave the area to access the facilities. To do this they would breach physical distancing guidelines. While the HSE states that there is little risk if you are passing quickly, one should keep their distance as much as possible. To help manage this risk, the following measures might be considered:

- Requesting audience members to turn their backs as they pass others, avoiding face-to-face contact
- Requiring audience members to wear face coverings
- Requesting audience members to remain in their seats throughout the event, if able
- Develop a policy for latecomers and ensure this has been communicated in advance.

Food & Beverage Areas

To date, no reported cases of COVID-19 have been linked to the contamination of food or beverages (F&B). The main risk of transmission is from close contact with infected people. It is therefore essential in that cafés and bars maintain good hygiene practices and physical distancing measures.

Analyse the processes for provision of F&B to your customers to identify any hazards, potential areas of exposure and the risks that may occur. Look at any mitigating measures that can be implemented to reduce or eliminate these risks.

[The Food Safety Authority of Ireland \(FSAI\) COVID-19 Advice](#)
 Fáilte Ireland's [Guidance For Reopening Restaurants and Cafés](#)

Communication Strategy

Clear communication to the visiting public will be key to the successful operation of your Arts Centre. Providing information on operating procedures will inform and reassure the public that they will be entering a safe environment.

The public's experience of visiting the centre should match the communication they have received prior to their visit. This information can be shared through your website, social media, advertising, ticketing platforms, information printed on the tickets, on the ticket confirmation email or additional emails. All conditions for entry should be clearly explained. Existing ticketing terms and conditions should be reviewed and adapted to bring them in line with the new guidelines.

Advance Communication to the public visiting the Arts Centre

Information should be provided to the public in advance of their visit to the Arts Centre including:

- Notice that visitors should not attend if they:
 - » are experiencing any symptoms of COVID-19 or are feeling unwell
 - » been diagnosed with confirmed or suspected COVID-19 infection in the last 10 days
 - » are a close contact of a person who is a confirmed or suspected case of COVID-19 in the past 14 days (i.e. less than 2m for more than 15 minutes cumulative in 1 day)
 - » have been advised by a doctor to isolate or cocoon.
- Visitors are required to wear a face mask.
- Information to encourage good hygiene including hand washing and good respiratory etiquette. Hand sanitisers, provided at the entrance to the Arts Centre, must be used on entry to the premises. Hand sanitiser stations are located frequently throughout the building.
- Any special consideration to be given to visiting school and organised children groups considerations may include entrancing, use of toilets etc.
- Queuing and entry procedures.
- Ticket scanning procedures.
- Information regarding disabled access/special needs facilities.
- Information on cloakroom facilities, which may not be available due to the challenges in operating them safely.
- Arrangements for bag checks (if applicable), and whether there are any additional restrictions on what can be brought into the venue e.g. limit on size of bag.
- Provision of contact details for all those attending (this may already have been completed electronically prior to the visit.) to assist with HSE contact tracing if needed.
- Notice to follow the guidance and instructions from your staff and to adhere to physical distancing from others.

- Discourage activities which can create aerosol (such as shouting, chanting and singing along).
- Advice to encourage use contactless payment at the Arts Centre.
- Seating arrangements as regards physical distancing implications.
- Arrangements for purchasing food, beverages and merchandise. Policy of bringing food into the venue.
- What to do if they feel unwell whilst visiting the Arts Centre.
- Avoid any congregation pre- and post-event.
- Consideration should be given to specific centre users, for example, those with intellectual difficulties or with Autism, this may include providing easy to read guides of social stories.

Ticketing Communication

Ticketing platforms will play a key role in the communication process between the Arts Centre and its audiences. Information identified in the Communication Strategy in the section above can be shared through the different stages of the ticketing process to reinforce new operating procedures for the centre.

- Website/landing site – This should contain all the information regarding how the Arts Centre has adapted its working practices in line with COVID-19 guidelines. Ticketing Terms and Conditions should be updated to reflect the changes.
- Booking system – This will need to be adapted to take into account changes such as new capacities and seating arrangements. In the quest to move to contactless transactions, it may also be possible to pre-purchase merchandise, food and beverages through your ticketing system.
- Confirmation email – The confirmation email should provide all the necessary information needed for the ticket purchaser to be able to attend the event including conditions of entry, the entry process and the procedures in place once in the venue.
- Pre-event alert – To include reminders on the information that was sent in the confirmation email, plus any additional updates.
- Post-event questionnaire – A post-event questionnaire could be used to gain customer feedback in order to improve and streamline the new processes.

General Ticketing Procedures

- Encouraging purchasing tickets online or by phone. (You may want to limit or restrict the purchasing of tickets at the premises.)
- Update terms and conditions
- Provision of contact details for HSE contact tracing
- Refund policy
- Cancellation/postponement policy.

Appendices

Appendix 1	42
Outdoor Performance.....	42
Appendix 2	46
Considerations for Audience or Staff.....	46
Cleaning Checklist.....	50
Opening/Closing Doors Checklist	51
Arts Centre Contact Tracing Log for Suspect Case (Sample)	53
References	54

Appendix 1

Outdoor Performance

Learning to operate under COVID-19 restrictions requires rethinking and remodelling on how the planning and staging of performances is approached. Given the higher attendance capacity allowed in an outdoor setting under the Government's *COVID-19 Resilience & Recovery 2021 The Path Ahead* the use of outdoor performance spaces should be considered. Utilising outdoor spaces, would both enable work traditionally performed indoors to stretch strategically (both in skills and adaptability) into the outdoors and provide significant benefits for audiences and communities.

An outdoor area is defined within the [Public Health \(Tobacco\) \(Amendment\) Act 2004](#) as:

- a place or premises, or a part of a place or premises, that is wholly uncovered by any roof, whether fixed or movable
- an outdoor part of a place or premises covered by a fixed or movable roof, provided that not more than 50 per cent of the perimeter of that part is surrounded by one or more walls or similar structures (inclusive of windows, doors, gates or other means of access to or egress from that part)

	Level 1	Level 2	Level 3	Level 4	Level 5
Organised Events (Controlled Environments with a named event organiser owner or manager). e.g. business, training events, conferences, events in theatres and cinemas or other arts events (excluding sport).					
Organised Outdoor Events	200 permitted in most outdoor venues. 500 permitted in outdoor stadia/venues with minimum accredited capacity of 5,000.	100 permitted in most outdoor venues. 200 permitted in outdoor stadia/venues with minimum accredited capacity of 5,000.	Organised outdoor gatherings or events of up to 15 people can take place in controlled environments with a named event organiser, owner or manager.	Organised outdoor gatherings or events of up to 15 people can take place in controlled environments with a named event organiser, owner or manager.	Organised outdoor gatherings or events are not permitted.

Planning for an outdoor event will require the same IPC control measures as with indoor activities as outline in this document.

Pre-planning and engaging with all relevant authorities/stakeholders early to communicate about your event is essential. Engage with local authorities (Gardai, fire service, local council) neighbouring businesses, residents and communities to assess the risk and the potential impact, which may increase the risk of spreading COVID-19 in the local area and take reasonable steps to mitigate the risk of transmission.

The event organiser should draft an Event Management Plan (EMP) to include:

- Details of the event, timings, build and load out. Organiser details, insurance, venue details. The size, type, duration and complexity of the event will determine the level of detail required in the EMP. (Dublin City Council have produced a useful tool [Guidelines For Event Organisers](#))
- The Government's current guidance on public health and physical distancing measures in place to stop the spread of COVID-19.
- COVID-19 Response Plan and Risk assessment.
- Organisers capacity to apply prevention and control measures at the event Planning and having the ability to implement actions that can reduce the risk associated with the event.
- Organisers should consider the cumulative COVID-19 risk impact of multiples venues operating within a certain geographical area and associated congregation off site.

The guidance on COVID-19 is constantly changing, and you should factor into your planning the impact of having to delay, postpone or cancel your event.

Advance planning for an outdoor event in a public space.

In planning your event, consider the three phases of the event:

- Pre-Event Planning (based on event type)
- Event (on-site)
- The Event and include a Post Event Review.

Each phase will require additional measures, taking into consideration specific COVID-19 guidance relating to physical distancing, hygiene and respiratory practices, communication and medical provision.

This guidance does not supersede any legal obligations related to health and safety, employment or duties under equalities legislation.

Consider the impact of COVID-19 on your event, employees, contractors, members of the public and the community. You have a duty of care to make your event space safe for all your employees, contractors and member of the public.

The guidance below is not an exhaustive list and is intended to assist you in planning your outdoor event and depending on your specific event, some detail may or may not apply.

Phase	Considerations
Pre-Event Planning Outdoor	<ul style="list-style-type: none"> • Consult with the relevant authorities and engage with coordinating external agencies as required. • Ensure your event venue or location meets the requirements to become a Controlled Environment with a nominated event organiser. • Draft a scalable site plan to include, entry and exit points, queuing, hygiene stations, toilets, catering, first aid, performance area and/or stage, to facilitate physical distancing. • Operations for concessions and toilets • Complete a detailed risk assessment including COVID-19 risks for the planned event. This should include all relevant current COVID-19 control measures. • Factor in additional cost implications • Ensure COVID-19 Occupational Health and Safety compliance for the protection of staff, contractors and visitors. • Consider the disability and vulnerable groups attending. • Have a PR and emergency communication plan. • Develop a detailed and realistic time schedule. • Factor in additional time for: <ul style="list-style-type: none"> » Performance rehearsal » The build and break of the infrastructure » Entry and exit of the visitors. • What is your advance COVID-19 information to the public? • If a “free but ticketed” use a ticketing/booking system to control capacity numbers. • Establish ticket sales platform for group bookings, and contact tracing policy (taking into consideration GDPR). • Consider an allocated seated event, or ground markings to allow for physical distancing and crowd management. • Draw up security measures. • Establish staff, contractor induction, training and communication systems. • Establish and communicate roles and responsibilities of all staff and contractors. • Factor in your plan what to do if a member of the event team(s) contracts COVID-19 or has to self-isolate. • Have a robust cleaning policy. • Implement hand/respiratory hygiene, physical distancing and directional signage. • Decide on entry policy (use of hand sanitiser upon entry, wearing of masks). • Establish and communicate event duration (including doors open, show and exit duration). <ul style="list-style-type: none"> » Is there a planned intermission? How do you manage this? Avoid points of congestion-queueing/end of show. • Have first aid procedures in place to deal with all medical issues including suspect COVID-19 case. (isolation room/area) • Ensure appropriate PPE based on risk assessment available for staff. • Establish and communicate the artist/performers’ COVID-19 protocol. • Assess the performance and artist workspace; the back of house area, dressing rooms, warm up area, wardrobe, makeup, catering for COVID-19 compliance. • The capacity or use of public transport may be reduced which may significantly increase car/bike/walking. What are the car/bicycle arrangements? Work with your Local Authority on the impact of queueing and car/bicycle parking on the local area.

Advance of the event:	Ensure the event space can be controlled – set boundary to control access and numbers attending. e.g. does the space require infrastructure barriers?
Venue	<p>Consider the physical distancing implications and space required for dressing rooms/ medical/command positions.</p> <p>Assess and plan for the following:</p> <ul style="list-style-type: none"> • Entrancing and exiting management – controlled access for the build, load out and the event. • Consider separate access for staff/visitors/contractors. • Car parking, transport arrangements for attending public if required. • Expect interactions amongst participants to occur at the event and implement sufficient controls to ensure physical distancing is maintained. • Agree capacities based on physical distancing, consider event site migration/density, points of interest/attractions. • Cleaning protocol. • Cleaning contractor/staff. • Agreed number of staff to run the event. • Security measures and access control, wrist-banding for checked staff. • First aid provision and facilities (including isolation room). • Any catering/hospitality? • Allow adequate time for the build. • Role and responsibilities to be clear and understood by all. • The emergency evacuation procedure. • Fire risk assessment. • Health and Safety documentation and insurance details from all contractor. • If someone (worker or member of the public) is showing symptoms of COVID-19 they should not attend the event/work.
Circulation – Managing Physical Distance at the event	<ul style="list-style-type: none"> • What is the size of the available usable space throughout the various stages of the event entry, circulation, show space and exit? • Calculate the physical distancing capacity of the space and communicate to all staff to monitor crowd flows. • Are there provisions for food & beverages available? What physical distancing impact will this have on crowd movement? • Is there enough space for your attendees to circulate in line with physical distancing? • Do you have sufficient toilet numbers and queue management? • Bottle neck or narrow entry/exit ways may require dedicated one-way systems.
Exiting	<ul style="list-style-type: none"> • Controlled exit in stages (advance communication to visitors via pre-show announcement, signage). • Duration of entry – Ticket check. • Adequate staff numbers to control exit flow. • Is the exterior lighting sufficient? • Traffic (include car, bike, pedestrian) management if required.
Design How is the venue laid out?	<p>Checklists detailed below are generic and should be adapted to your Arts Centre or event.</p> <ul style="list-style-type: none"> • Adequate circulation taking into consideration capacity and physical distancing. • Seating to be arranged in accordance to the current physical distancing guidelines. • Emergency Exit/evacuation plans for the event. • Identify the potential congestion areas and have procedures in place to manage physical distancing. • Location of toilets, ratio male/female units to attendance. • Consider if you need fire certification (soft furnishings, carpet). • Is it an option to section off the event space with dedicated services and facilities for each area?

Information	<ul style="list-style-type: none"> • Is there sufficient COVID-19 signage and signage for exits, toilets, information and first aid? • Do you have Contact tracing procedures in compliance with GDPR? • Lost and Found procedure. • Welfare.
Management	<ul style="list-style-type: none"> • Are there sufficient staff and security on the event (based on your risk assessment)? • Staff/Vendor check in procedure consider wrist banding for checked staff and work area control. • Have security and event staff been properly briefed on the event, COVID-19 procedures and the emergency procedures? • First aid provision to include COVID-19 measures, and these must extend to consider production load in and derig, alongside the event. • Event COVID-19 response plan – procedure, Isolation room/area. • Are there children at the event? If so, have you fulfilled your vetting requirements and lost children protocol? • Consider higher risk groups and people with disabilities.
Post Event review	Plan a proper debrief with all relevant stakeholders and review all aspects of the event.

Appendix 2

Considerations for Audience or Staff

Below is a generic check list and not all may be applicable to your specific venue. It is not an exhaustive list.

Stage	Areas of consideration
Booking Performance: Can your venue cater for the tour?	<ul style="list-style-type: none"> • Specifics of the event/performance/exhibition/workshop. • Static/movie/exhibition/workshop. • Number of cast and crew. • Available space on stage & BOH. • Show/exhibition Run (number of show days). • Insurance. • Cancellation Policy. • Intermission/Hospitality. • Show stop procedures (pre-event & during event). • Is there contingency built in for actors/musician's no-show through illness of self-isolating? • Number of permitted ticket sales. • Catering for vulnerable groups (COVID-19 higher risk categories) • Risk assess the audience profile. • Toilet capacity (FOH & BOH). • Identify Isolation room(s) FOH & BOH. • Room capacity – considering ventilation, physical distancing space layout, activity type, duration of attendance.
Staff Training	<p>Front of house staff consultation and re-training:</p> <ul style="list-style-type: none"> • Entering and exiting procedure • First Aid /Isolation area procedures. <p>Vulnerable staff. Staffing rotas. Multi-skilled working (staff can work multiple roles and interchange). Volunteer staffing and training. Cleaning protocols and retraining. Leader Worker Representative nominated and trained</p>
Pre-Arrival	<p>Pre-booking:</p> <ul style="list-style-type: none"> • Areas of higher risk management (group bookings, shops food or bar areas) • Test and embed procedures in advance (controlled group) • Venue terms and conditions of entry e.g. wearing face masks are a condition of entry? <p>Determine capacity:</p> <ul style="list-style-type: none"> • Area capacities including galleries, front of house, toilets, workshop spaces. • Identify and stock isolation room. • Dwell time. • Audience demographic – how would the experience change for them? • Foyer capacity – can you cater for intermission? <p>Pre-Visit experience and audience profile:</p> <ul style="list-style-type: none"> • What to expect that may be different, ensure confidence. • Reassurance <ul style="list-style-type: none"> » Reduced capacity » Staff levels » Face coverings (compulsory) » Sanitising » Information – adapting practices in everyday life, and reassurance by finding same in the venue » Layout » Dedicated visiting times for vulnerable groups » Communication the new experience to users e.g. frequently asked questions (FAQs). • Plan to do a soft opening • Agreed policy and procedures if a person arrives with symptoms.

Arrival	<p>Manage external queuing to process quickly – take into consideration:</p> <ul style="list-style-type: none"> • Weather implications • Neighbouring facilities • Staggered arrivals • Queueing systems. <p>Close cloakrooms to reduce staff contact – consider lockers with regular cleaning. Hand sanitiser locations. Consider how online tickets may be self-scanned by visitors.</p>
Welcome and orientation	<p>Signage:</p> <ul style="list-style-type: none"> • Clear information about the access routes, hygiene, distancing • Policy on audio guides, headphones • Disability assisted facilities • Rewording pre-show announcements. <p>Visitor Experience:</p> <ul style="list-style-type: none"> • Narrative and free flow • Audience welfare (consider their experience and expectation) • One-way systems, exits/entrance, informing the audience • Increased management around touch tours • Toilet management • Close off/restrict access to rooms or facilities that are not required • Avoid interval congregation – consider service within the auditorium.
Leaving	<ul style="list-style-type: none"> • Use of dedicated exit door to avoid entrancing counterflow. • Use of ushers to manage exit from the auditorium to stagger exiting. • Evaluation of visitor experience in real time, for immediate evaluation, will allow for quicker changes to procedures.
Emergency procedures	<ul style="list-style-type: none"> • Sustainable adaption to emergency plans. • Show cancellation procedures. • Show stop procedures.
Promotion of Event	<ul style="list-style-type: none"> • Online details – provide information on safety measures at the venue. • Frequently Asked Questions – deal with as much as possible online. • Promote online what to expect at the venue – images of queuing, use of face mask. • Promote what you are doing to create a safe venue.
Ticket Sales	<ul style="list-style-type: none"> • How do you plan to sell the event on-line/ box office? • Update T&C's. • Receive booking information and key Terms and Conditions to include COVID-19 messaging. • Venue's conditions of entry (i.e. face masks, application of hand sanitiser). • Catering for vulnerable groups. • Access requests. • Disabled access. • Contact tracing. • Refusal of entry – list reasons. If they have signs or symptoms, are they eligible for refund?
Communications	<ul style="list-style-type: none"> • Week/days before the event, communicate the safety measures and conditions for entry, COVID-19 key messages (visitor audience declaration form) – via smart phone/print at home. • Travel to the venue, pre-event details re parking, timings, arrive early, expect physical distancing queuing. • Set up venue – FAQs online
Pre- Show clean	<ul style="list-style-type: none"> • Check levels of hand sanitiser. • Check levels of hand soap and paper towels. • Check levels of staff PPE. • Check waste bins are all empty and contain waste bags. • Treatment of contact surfaces where required.

<p>Pre-Door Event checklist</p>	<ul style="list-style-type: none"> • Manager to ensure all pre door checks. • Ensure all staff briefed on COVID-19 procedures. • Ensure cleaning and regular cleaning protocol is being followed. • Hospitality arrangements – Bar/food/café. Detailed operating process clearly understood by all staff and communicated to the public in advance communication. (pre order table service). • Intermission arrangements (e.g. Hawker sales to those seated in auditorium). • Merchandise – programmes. • Late arrivals for performance /show policy. • Staff briefed on procedure for what to do if someone presents with symptoms. • First Aid cover. • Event space/auditorium & stall loading.
<p>Arrival at the Venue</p>	<p>Have you considered / implemented the following:</p> <ul style="list-style-type: none"> • Additional parking and bike parking. • Available outside venue space for PD and queuing. • Signage and information. • Staff to set up exterior queuing. • Contact tracing (if not done at time of purchasing tickets or email in advance). • Ticket collection process. • Weather conditions (rain/sun cover). • Opening early to allow for safe entry of public. • Staggered arrival of public (given time slots). • Awareness of the venues entry policy (face masks, thermal checks). • Hand sanitiser stations exterior. • Minimal contact points. • Ground markings (PD). • Display information (symptoms good hand/respiratory hygiene)?
<p>Entering Performance Venue</p>	<ul style="list-style-type: none"> • How many doors are available to public access? 1 door in and 1 door out? • Is there enough scanning staff available and have you risk assessed how to scan, including queue control measures/ PPE/barriers? • Scanning of tickets (contactless). • Bag search (if applicable). • House rules – i.e. must wash/sanitise hand on entry. • Enough space to accommodate entering public into foyer/reception and maintain PD. • Enough PD circulation space for the public numbers and staff. • Access to gallery /event space/auditorium procedure / how many access doors – corridors ability for PD. • House rule – may direct public straight into auditorium seats (reduce gatherings at foyer/ bars/hospitality, toilets). • Food/Drinks policy in gallery/event space/auditorium.
<p>Opening of event space. Loading of Auditorium</p>	<ul style="list-style-type: none"> • Number of ushers required. • Clear directional signage. • Process for public if they have an issue or question. • Timing – preshow announcements 15 mins.
<p>Performance/ Show Time</p>	<ul style="list-style-type: none"> • Communication process if someone has a problem/issue. • Pre-show safety message. Turn off phone. Consider a short video of venue layout? • Toilet locations and signage to indicate the nearest facility – can toilets be used during performance?
<p>Cleaning during Show</p>	<ul style="list-style-type: none"> • Refilling of hand sanitiser. • Refilling of hand soap and paper towels. • Regular checks of toilet facilities. • Emptying of waste bins. • Disinfecting of frequently touched areas.

<p>Intermission</p>	<ul style="list-style-type: none"> • Intervals may increase the difficulties of complying with public health advice. • Is there capacity within the foyer and FOH to accommodate PD requirements? • Staff in place. • Pre-order drinks collection. • PD maintained. • Queue management system in place for toilets. • Strategies with regard to keeping people in the auditorium – e.g. short films.
<p>End of show departure/exiting</p>	<ul style="list-style-type: none"> • Enough staff positioned to ensure no congregating within the venue. • No loitering after show – signage. • Expect queues for toilets. • Post show queries/comments etc – refer to on-line frequently asked questions, and for visitor feedback. • Access routes straight to exterior of building. • System check to ensure all public and staff clear of building.
<p>Post Show Clean</p>	<ul style="list-style-type: none"> • Comprehensive clean and disinfection of the venue, considering the movement of the visiting public and the areas they will have accessed. Treatment of all contact surfaces. • Refilling of hand sanitisers. • Refilling of hand soap and paper towels. • Emptying of waste bins. • Refill supplies of staff PPE. • Check stock levels of cleaning products, hand hygiene products and PPE, and order as necessary. • Clean and disinfect shared cleaning equipment.

Cleaning Checklist

The HSA also provides a [Cleaning Checklist](#).

Checklist	Yes	No	Further Action
Pre-Show Cleaning Checklist			
General			
Have you reviewed your cleaning policy to include the COVID-19 requirements?			
Are there adequate supplies of disposable cleaning equipment available?			
Is there adequate supply of cleaning detergents and disinfectants?			
Are there adequate supplies of PPE for cleaning staff?			
Provision of hand sanitiser stations at key points. Are they touchless?			
Is there adequate supervision of cleaning arrangements?			
Have all cleaning staff been inducted and received that appropriate training?			
Do you have an adequate numbers of cleaning staff?			
Pre-Show Clean			
Gallery/Event Space – Seating – Aisles – floors cleaned.			
All toilets, door handles, sinks floors cleaned, as per agreed schedule (min. twice daily).			
Corridors access routes – touch points cleaned.			
Foyer/reception cleaned.			
Entrance doors cleaned.			
Food and Beverage areas cleaned.			
Stairs/lift access/handrails cleaned.			
Check levels of hand sanitiser			
Check levels of hand soap and paper.			
Check levels of staff PPE.			
Check waste bins are all empty and contain waste bags.			
Treatment of contact surfaces where required.			
Show Clean			
Refilling of hand sanitiser.			
Refilling of hand soap and paper towels.			
Regular checks of toilet facilities.			
Emptying of waste bins.			
Disinfecting of frequently touched areas.			
Post-Show Clean			
Comprehensive clean and disinfection of the venue, considering the movement of the visiting public and the areas they will have accessed.			
Treatment of all contact surfaces.			
Refilling of hand sanitisers.			
Refilling of hand soap and paper towels.			
Emptying of waste bins.			
Refill supplies of staff PPE.			
Check stock levels of cleaning products, hand hygiene products and PPE, and order as necessary.			
Clean and disinfect shared cleaning equipment.			

Opening/Closing Doors Checklist

To be completed by the Arts Centre/Venue manager

Area	Name / Detail
Exhibition /Show/Performance	
Date	
Capacity (visiting public) Ticket Sales	
Staff Numbers	
Event Duration	
Intermission	Yes/No (duration)
Duty Venue Manager	
Front House Manager	
Lead Worker Representative	
First Aid Responder	

Sample

No.	Opening/closing door Checklist	Yes	No	Further Action
1	All Staff are in position and briefings completed including specific COVID-19 safety measures?			
2	All health and safety checks carried out and reported back? Including known room capacities considering ventilation/ activity / PD spacing			
3	Emergency procedures communicated to all staff?			
4	All COVID-19 management and protocols in place?			
5	Agreed queuing systems set up and signed off (interior and exterior)?			
6	All signage erected (directional and information). Ground markings.			
7	Pre-show clean and ongoing cleaning procedure?			
8	Signage regarding admission policy displayed (face masks, sanitise hands before entry)?			
9	Ticket query procedure available – Box office?			
10	“Meeting up point” available with signage to cater for physical distancing?			
11	Hand sanitiser stations interior and exterior available and stocked. Staff PPE stocked and available?			
12	Internal signage and information in position?			
13	Security measures bag search if required?			
14	Agreed number of staff in place front of house: <ul style="list-style-type: none"> • volunteers • scanners • security • cleaners • catering • box office 			
15	Agreed number of entry point doors?			
16	Agreed number of scanners in place, with adequate backup?			

17	Communications are radios available and working?			
18	Room managers- volunteers/ushers?			
19	Will Food & Beverage be available to pre-order?			
20	Agreed procedure on entry – direct to seats no gathering in foyer?			
21	Pre-show safety announcement available?			
22	Procedure for crowd circulation in line with physical distancing?			
23	Toilet queue management systems in place?			
24	Ushers in place to re-seat public?			
25	End of show procedure in place and communicated to the public?			
26	Procedure for ensuring venue is clear of public?			
27	Post show standing down staff complete?			

Arts Centre Contact Tracing Log for Suspect Case (Sample)

Location:

Date:

Patient's Name:

Employee/Contractor: Y/N Member of Public: Y/N

Lead work representative or assigned case manager:

Try to obtain as much detail as possible (in line with GDPR) factoring in that the patient may not be feeling very well.

Sample questions	Answers
How long has the person been in/at the venue?	
Identify / list the areas the person was in at the venue.	
Identify possible contact/touch points the person touched?	
Identify close contacts.	
Is the person alone or with a group?	
What follow up is required?	
Do you need to re-issue or refund tickets?	
Have you undertaken the decontamination clean of the isolation room and venue if required?	

Signed:

Date:

References

Government of Ireland

[COVID-19 Resilience & Recovery 2021 The Path Ahead](#)

[Work Safely Protocol](#)

[Covid-19: Stay Safe Guidelines](#)

Health Service Executive

[Coronavirus \(COVID-19\) Resources](#)

Health and Safety Authority

• <https://www.hsa.ie/eng/topics/COVID-19/>

• https://www.hsa.ie/eng/topics/COVID-19/return_to_work_safely_templates_checklists_and_posters

Health Protection Surveillance Centre

[COVID-19 Resources](#)

National Standards Authority of Ireland (NSAI) – COVID-19 Resources

• <https://www.nsai.ie/COVID-19/>

• <https://www.nsai.ie/COVID-19workplaceprotection/>

[Fáilte Ireland – Business Supports Hub](#)

[European Centre for Disease Prevention and Control \(ECDC\) – Disinfection of environments in healthcare and non-healthcare settings potentially contaminated with SARS-CoV-2](#)

Pre-Hospital Emergency Care Council (PHECC) – COVID-19 Update

• https://www.phecc.ie/PHECC/Publications_and_Resources/Newsletters/Newsletter_Items/2020/PHECC_COVID_19_Advisory_v1.aspx

• https://www.phecc.ie/PHECC/Publications_and_Resources/Newsletters/Newsletter_Items/2020/PHECC_COVID_19_Advisory_v1.aspx

[World Health Organisation](#)

https://www.ictu.ie/download/pdf/ictu_national_return_to_work_safely_protocol_may_2020.pdf

https://www.citizensinformation.ie/en/employment/employment_rights_during_Covid19_restrictions.html

<https://www.gov.ie/en/organisation/department-of-tourism-culture-arts-gaeltacht-sport-and-media/>

[Department of Children, Equality, Disability, Integration and Youth](#)

[IOSH COVID-19 risk assessment guidance](#)

[Event Safety Alliance](#)

[UK Department for Digital, Culture, Media & Sport \(DCMS\)](#)