National measures on OSH measures on return to the workplace and the right to withdraw labour

This briefing note was originally produced on date May 18th and has been updated on May 28th and June 11th. The latest update takes account of developments in Ireland.

COVID-19 is the biggest health, economic and social challenge in the history of the European Union. The dimension of Occupational Safety and Health (OSH) is a fundamental part of the European strategy for limiting the spread of the virus and for maintaining economic activities. Numerous national measures have been implemented to fight the spread of COVID-19, also including those appertaining to workplaces and commuting to work.

Since the COVID-19 outbreak, workers in many sectors (most of them female workers) have continued being physically present at the workplace, at the frontline, fighting the virus, such as in healthcare, cleaning industry and retail. Europe is now entering a new phase of the fight against the pandemic, in which Governments are establishing gradual retake of work and the return to the workplace. The success of the EU exit strategy will largely depend on OSH-appropriate policies if we want to avoid a "second wave" by sending millions of people back to work.

Occupational safety and health measures, through legislation or collective agreements, offers practical support for returning to the workplace. Trade union involvement in developing such measures is key. Appropriate preventive measures by employers will help to achieve a safe and healthy return to the workplace, following the moderation of the containment measures, and in particular of physical distancing measures and availability of personal protective equipment. They also contribute to eradicating the transmission of COVID-19.

The ETUC is calling on the European Commission to ensure that COVID-19 is recognised as an occupational disease by revising the Commission Recommendation (2003/670/EC) concerning the European schedule of occupational diseases. Also, the current text is wholly insufficient to protect all workers in the frontline of the pandemic, as it only refers to "infectious diseases caused by work in disease prevention, healthcare, domiciliary assistance and other comparable activities for which a risk of infection has been proven".

ETUC welcomes the Commission proposal to include SARS-CoV-2 (the virus that causes the coronavirus disease COVID-19) in the list of biological agents in annex III of Directive 2000/54/EC on the protection of workers from risks related to exposure to biological agents at work. In this Directive, different virus are listed and divided in four groups, from the lowest danger and risk (group 1) to the highest (group 4). The ETUC supports the option of group 4. This is based on clear legal binding criteria in Article 2 of the Directive: high risk of spreading the virus at the workplace and to the community, no available prophylaxis or treatments for the
time being. A weaker classification could result in a lower protection of the health of workers and therefore a higher risk and very likely an increase of the pandemic among the European workforce.

Regarding the return to the workplace, ETUC affiliated organisations have reported different agreements and measures undertaken at national or sectoral level. There are a range of measures, from provisions on hygiene, social distancing, maximum number of workers and/or customers per room, and personal protective equipment to work organisation, risk assessment, and role of trade unions and safety representatives. A detailed list of the national actions as reported by the ETUC affiliated organisations is included in this briefing.

One note of caution, this briefing note captures a dynamic situation which is subject to ongoing change. We therefore kindly ask affiliates to provide us with further information on COVID-19-related measures that have been introduced in your country so that we can update this briefing note.

At European level, social partners of the hospitality sectors are negotiating a joint statement on re-opening. Also, EFFAT addressed a letter to the President of the European Commission and several Commissioners and members of the European Parliament calling for different measures to be undertaken in the tourism sector ahead of the re-opening of businesses. On OSH issues, EFFAT demands that workers must be confident that they are returning to workplaces that are fully risk-assessed, safe and compliant with WHO guidelines on safe working practices, personal protective equipment, and social distancing. Clear health and safety protocols for workers, guests and suppliers have to be adopted, as well as contingency plans for suspected COVID-19 cases on the premises.

On April 24th, the European Agency for Safety and Health at Work (EU-OSHA) issued guidance on coming back to work, protecting the health and safety of workers. The guidance has been prepared by EU-OSHA in cooperation with the European Commission and with input from the tripartite Advisory Committee on Safety and Health at Work (ACSH). The guidance is available at the following link: https://osha.europa.eu/en/highlights/COVID-19-back-workplace-safe-and-healthy-conditions.

Some of the positive elements in the guidance worth mentioning are the following:

- The guidance places a strong focus on specific measures to be taken at the workplaces who haven't stopped their activity in the context of the virus spread, when teleworking, for ill workers and for workers returning to work. The guidance is aimed at all sectors and workers;
- There is a call to involve workers and workers' representatives in the design of specific measures at company level;
COVID-19 WATCH
ETUC BRIEFING NOTE
ON RETURN TO THE
WORKPLACE MEASURES
AND THE RIGHT TO
WITHDRAW LABOUR
11 JUNE 2020

- The guidance take a broad scope by tackling both the prevention of COVID-19 and of mental strain and illnesses, including the right to disconnect and the setting of healthy boundaries between work and private life;
- Specific attention is given to vulnerable workers and workers who have vulnerable persons in charge;
- The guidance is non-binding yet can be a relevant leverage for the trade union work in guaranteeing health and safety at work during the pandemic and in the upcoming exit stages.

On May 10th, the World Health Organisation (WHO) issued return-to-work guidance covering workplace risk assessment, preventive measures and rights, duties and responsibilities of workers and employers. The ITUC has however identified serious gaps and questionable recommendations which could undermine existing standards. Some of the element of concern are:

- It recommends ‘at least one metre’ physical distancing, which is not sufficient, and based on a questionable assessment of aerosol risks in many workplaces, and is less than recommended by many national authorities;
- It refers to the need for ‘medical masks’ for high risk work, when specified fluid repellent, high performance masks are required to minimise the risks in high risk work, and many medical/surgical masks do not meet this requirement;
- It says nothing on the right to refuse work that presents a serious and imminent risk to health (a right included in many national laws and in the relevant ILO Conventions);
- While acknowledging they may be at increased risk, it says little or nothing on protection for vulnerable workers (other than don’t assign them to high risk jobs) – and fails to assert the need for a right to remain off work if at risk, or when living with or caring for vulnerable individuals;
- It says nothing on testing to identify pre-symptomatic/ asymptomatic workers;
- It says nothing on the adequacy of risk assessments and little of substance on worker involvement in their preparation and approval, prior to return to work; and
- It says little or nothing on the employer’s role in reporting, recording, recognising and compensating work-related cases of coronavirus related infections, and related mental health and other problems.

Also at global level, UNI Global Union and the Spanish unions UGT and CCOO reached an agreement with the Spanish telecoms company Telefónica on May 12th securing the right to a safe return to work for the company’s more than 120,000 employees worldwide. The areas covered include: personal protective equipment (PPE); workers’ health will be protected through monitoring and testing where locally possible; cleaning of the facilities and enforcement of social distancing; the establishment of a three phase plan to ensure employee safety in the return to work; the establishment of a monitoring mechanisms using existing health and safety committees or creating emergency COVID-19 commissions to respond to workplace issues, among other topics.
The right to withdraw labour

The right to withdraw labour grants workers the possibility to refuse to work if they face serious and immediate danger. It places the primacy of the workers' right to her/his integrity over the legal subordination to the employer.

The International and European sources for this right are the Convention No. 155 on Occupational Health and Safety the right of withdrawal indicate that it was directly inspired by International Labour Organization (ILO) and the EU Framework Directive on the introduction of measures to encourage improvements in the safety and health of workers at work (89/391/EEC).

The right of withdrawal is granted by article 8(4) of the Framework Directive, which is directly inspired by Article 13 of Convention No 155, which provides that "a worker who has removed himself from a work situation which he has reasonable justification to believe presents an imminent and serious danger to his life or health shall be protected from undue consequences in accordance with national conditions and practice". It is supplemented by Article 19(f), which provides that the employer may not require workers to return to work until he has taken measures to remedy the danger.

The right of withdrawal is conditional on the worker's exposure to a serious and immediate danger. It is therefore a right applicable to all workers, even if they perform in an essential undertaking as far as they face a serious and immediate danger. The worker who exercises his right of withdrawal should not suffer any harm from the employer as a result of and must be protected against any unjustified consequences, which therefore includes the right to remuneration.

The right of withdrawal is an individual right linked to the perception of the worker of immediate and serious danger. In some countries, the individual right is linked with a collective right of safety reps to undertake an investigation and propose further measures (Sweden, France, Belgium).

The ETUC has collected a couple of national cases on the right to withdraw labour.

**France.** Public Service unions have issued a prior notice of strike to make sure they can cover workers that refuse to work in dangerous conditions in the frame of a broader request of providing occupational safety and health prevention in the context of Covid-19. The exercise of the right of withdrawal in France has led some companies to suspend their activities during the Covid-19 crisis (Amazon and La Redoute), or to limit their activities to those that are essential to the functioning of the country.
Sweden. According to the Swedish Work Environment Act, in the event of immediate and serious danger to the life or health of an employee, a safety representative can decide that work should be interrupted (“safety representative work suspension”), pending a decision by the Swedish Work Environment Authority. The safety representative is not liable for any loss resulting of such measure. Since the outbreak of Covid-19, safety representative work suspension has been used 75 times in Sweden (statistics until May 14), due to imminent danger to workers’ life, most of them in the health and care sectors.

National measures on return to work OSH measures on return to the workplace

Some of the occupational safety and health measures on return to work agreed at national level are the following:

Austria: A regulation was issued by the Federal Minister for Social Affairs, Health, Care and Consumer Protection which came into force on 1 May 2020 and will expire on 30 June 2020. It replaces the expiring regulations that have largely determined the shutdown since 16 March 2020. This regulation applies to all areas, also to employment, and include the following observations: social distancing, use of mask and other protective equipment, and regulation of commuting to work. In addition to that the Central Labour Inspectorate (Federal Ministry of Labour, Family and Youth) issued a " COVID-19-Manual: Working safe and healthy - Recommendations for a safe and healthy cooperation on the job". Furthermore, there are guidelines for certain sectors (construction sites, retail business, gastronomy, office operations, schools, kindergartens, universities). Also, as already reported in the ETUC COVID-19 briefing on OSH measures issued on April, sectoral social partners of the building and retail industries have signed agreements on OSH provisions to be observed at the activity during the pandemic, these cover elements such as protective equipment, social distancing, sanitizing and cleaning and – for the case of the retail sector - maximum number of people per shop, cashless payment and opening hours among other issues.

Belgium. In order to assist companies in the gradual resumption of economic activities, the social partners of the High Council for Prevention and Protection at Work, in consultation with the Strategic Cell of the Minister of Employment and experts from the FPS Employment, have drawn up a generic guide which provides a framework with measures that can be adapted by the different sectors and by each employer to their specificities in order to ensure that the activities can be resumed under the safest and healthiest possible conditions. Pending possible sectoral guides or protocols drawn up by the joint committees, companies can already rely on the general principles as set out in the generic guide. The guide tackles several OSH related measures, these being: hygiene, commuting to work, arrival at work, use of changing rooms, teleworking, and social distancing, among other elements.

Finland. Since many workplaces did not close during the COVID-19 crisis, the return to work has not been too problematic for the country. Shops and factories, for example, remained open. The only sector where return to normal has posed some challenges is in education, where
many teachers did not agree with the government decision to reopen schools again from May 15th on grounds related to the safety and health of the workers. The Finnish Institute of Occupational Health issued guidelines for safe work, including a specific section on returning to work after the lockdown. The unions are providing regular information on the impact of COVID-19 in the world of work. One of their priorities is risk assessment of the workplace, an obligation which has being observed with varying diligence by the employers.

**France.** On April 22, a committee was established for monitoring the implementation and evaluation of support measures for businesses facing the COVID-19. The French unions denounced that they are not members of such Committee. Their OSH demands towards the exit strategy relate to the recognition of COVID-19 as an occupational disease for all workers and not just for health and care workers. Unions demand to prepare for the end of lockdown through social dialogue (at branch level and/or company level) to organize work and manage all measures to protect the health and safety of workers: Distribution of all individual protective equipment, compliance with social distancing measures / safety distances, disinfection of workplaces and materials, organization of public transport, etc.

**Germany:** The Ministry of Labour and Social Affairs, the social partners, the federal states and the social accident insurance have developed the German SARS-CoV-2-OSH-Standard. It was published in the Joint Ministerial Gazette and has therefore a binding character. Furthermore, the Ministry established an OSH Board that monitors the developments of COVID-19 in terms of OSH. It is governed by representatives from the Ministry, the social partners, the federal states, the social accident insurance and science experts. They also discuss the sector-specific guidelines that are developed by the social accident insurance institutions. This OSH Board meets via teleconference on weekly basis and it is chaired by the state secretary of the Ministry. In addition, the social accident insurance institutions, that are structured by sectors, develop sector-specific guidelines that substantiates the SARS-CoV-2-OSH-Standard on the needs of the sector. An overview is available at: [www.dguv.de/corona](http://www.dguv.de/corona) The statutory OSH Committees also deal with SARS-CoV-2, especially the Statutory Committee on Biological Agents. There, SARS-CoV-2 was classified in risk group 3. There are disagreements between trade unions and the employers’ organisations. Main points where we had problems with the employers on regulation and measures about teleworking and working time (the government allows until autumn longer working hours per day and reduced daily rest period for specific sectors).

**Greece:** The GSEE trade union confederation has settled a one-stop shop on COVID-19 to provide support to workers affected by the health and economic crisis. The union denounces the vulnerable situation of those workers placed at higher risk of exposure to the virus, as health care workers, transport workers and workers in distribution services. The different levels and branches of the union remain vigilant on abuses from employers who don’t observe OSH indications by forcing workers to work in unsafe working conditions where the risk of infection is higher (e.g. call center staff in cramped workspaces).
Hungary. The OSH department of the Innovation and Technological Ministry which is responsible of the portfolio of OSH since January 2020 has published the EU guidance COVID-19: Back to the workplace - Adapting workplaces and protecting workers. No social partners consultation has taken place, neither has the national tripartite OSH Committee met, or been involved in any action related to COVID-19.

The OSH department has published the 177/2020 Government Decree on the testing and use of individual respiratory protective devices, and personal respiratory protective devices disinfected after use which are not EU type-test certified. The Decree also includes a measure on the postponement of periodic inspections for OSH purposes, the extension of the medical validity of the operating licences required for work and the postponement of individual periodic reviews.

It is worth mentioning, that the 104/2020 (10.04) Government Decree give all power to the employer to unilaterally order a 24 month long working time frame, while prohibiting any derogations by collective agreements. This measure complements the previous Government Decree on the measures “to mitigate the COVID-19 impacts on national economy” (18. 03), which suspended the provisions of the Labour Code “for the period of state of emergency” – making employees vulnerable and repealing collective agreements. The change of the Labour Code was made with the argument “to make employment regulations more flexible, in order to facilitate future agreements between employers and employees.” This decree entered into force on 11 April and it had serious impact on OSH related issues too.

Despite the above-mentioned lack of collaboration between the Government and the social partners, MASZSZ acknowledges a good cooperation between managements and workers safety reps/ committees in elaborating and applying COVID-19 related OSH measures in big companies.

Ireland. The Health and Safety Authority (HSA), the Health Services Executive (HSE) and the social partners developed the "Return to work safely Protocol - COVID-19 Specific National Protocol for Employers and Workers". This extensive document describes the steps that employers and workers shall take in order to reduce the risk of the spread of COVID-19 in the workplace. Some of the elements tackled are: development and/or update the COVID-19 Response Plan; development or amendment of policies and procedures for prompt identification and isolation of workers who may have symptoms of COVID-19; development, consultation, communication and implementation of workplace changes or policies; implementing the COVID-19 prevention and control Measures to minimise risk to workers; hygienic measures, physical distancing; worker role; customer facing roles; reporting requirements under OSH legislation if a worker contracts COVID-19; first aid; mental health and wellbeing; heating, ventilation and air conditioning (HVAC); advice for employers and workers; information on public health and Occupational Health and Safety; among information on business continuity and supports, among many other topics.
The parties agreed that every workplace across the economy will have at least one worker representative appointed, who together with the Management COVID-19 response team, will support and oversee the implementation in the workplace of the measures contained in the protocol. The number of worker representatives will be proportionate to the number of workers in the workplace. These representatives will receive relevant training, be clearly identifiable in the workplace and receive full support in carrying out these functions.

On the matter of enforcement/compliance, the HSA has the power under OSH legislation to advise, offer guidance, monitor, inspect and enforce adherence to COVID-19 measures within a place of work. As part of its inspection programme HSA inspectors will provide advice and support to employers and workers in the implementation of the COVID-19 measures as a set out in the protocol. Following a workplace inspection, the inspector will provide the employer with their report. The inspector will take appropriate enforcement actions which can include an improvement notice and a prohibition notice. Inspectors also have powers under current OSH legislation to close workplaces that are non-compliant.

ICTU produced a short information video about the return to work arrangements in order to distribute it among members (available at: https://www.ictu.ie/press/2020/05/18/covid19-return-to-work-safety-protocol/).

HSA issued a series of templates and checklists to “help employers, business owners and managers to get their business up and running again and to inform workers about what they need to do to help prevent the spread of Covid-19 in the workplace” (available at: https://www.hsa.ie/eng/topics/covid-19/return_to_work_safely_templates_and_checklists/return_to_work_safely_templates_and_checklists.html). The Agency also published updated guidance on the use of face coverings. These documents were drafted based on the Government’s Return to Work Safely Protocol and it meant at complementing the Return to Work Safety Protocol. Employers and workers were requested to work together to keep workplaces safe.

Also, the National Standards Authority of Ireland issued a consolidate practical guidance covering identification and defence against COVID-19. The document tackles the following three dimensions: How to defend against the spread of COVID-19; measures to manage detected on-site cases and recovery of processes and business functions after detection.

**Italy.** On April 26th Italian PM Conte outlined plans to ease the restrictions imposed seven weeks ago to curb the spread of the coronavirus in the country. The lockdown easing measures are included in a decree published on April 27. Measures will be relaxed from 4 May, with people being allowed to visit their relatives in small numbers and adopting physical distancing. Parks, factories and building sites will reopen, but schools will not restart classes until September. As of April 27th, public construction activities will re-open; private construction will be able to operate as of May 4th. Lockdown easing measures include: Bars and restaurants will reopen for takeaway service from 4 May -not just delivery as
now - but food must be consumed at home or in an office; Hairdressers, beauty salons, bars and restaurants are expected to reopen for dine-in service from 1 June; More retail shops not already opened under the earliest easing measures will reopen on 18 May along with museums and libraries. Together with these measures the government negotiated a protocol agreement with trade unions and employers' organisations on health and safety at work. This protocol is an annex to the Decree published by the government on April 26th and is an updated version of the first one negotiated in March. These measures are now enforced by law and concern in particular all those workplaces which are in operation. The measures included are: Right to information; access to workplaces; access of external suppliers; cleaning and sanitisation; personal hygiene; personal protective equipment; use of shared spaces; work organisation (shifts and telework); all trainings and meeting are suspended; and health surveillance/ Plant physician / H&S reps and monitoring committees for the implementation of the protocol. Also, two specific protocol agreements on COVID-19 containment measures have been negotiated by the social partners in the building sector for construction sites and in the transport sector and logistics.

The Tripartite Protocol signed in March was updated on April 26 and was included in Prime Minister's Decree “on the recovery phase” and voted in favour by the Parliament. The Protocol was signed by the three Italian Trade Union Confederations, Employers’ associations and by the Govern.

Companies not observing the provisions enshrined by the protocol shall be forced to suspend their activities until the safety conditions are restored. The inspectors who detect companies’ failure to implement the protocol shall report the cases directly to the prefecture. Workers who were to detect problems and failures to implement the protocol shall report these dangerous situations to their workers' safety representatives, who shall urge the companies to fully implement the protocol. In the event of the employers’ failure to do so, they shall report the case to the competent local bodies (local health units and labour inspectorate).

The protocol also includes the situations in which workers arrives or are already present at work with fever or symptoms of respiratory failure: in these cases a protocol, to be agreed at company level, shall be adopted (isolation, mask, no company infirmary, no first aid unit, contact of the general practitioner and of the competent local health unit, that shall take care of these workers and treat them).

The workers who believe they had contacts with infected or presumably infected people (serological tests alone are not enough and our procedure envisages that a positive serological test must necessarily be followed by the double swab) shall inform the employer (who is obliged to guarantee confidentiality) and the general practitioner who shall start the procedure for the swab. Meanwhile the workers shall take sick leave and, if tested positive, they shall be granted accident leave for Covid-19 by INAIL (Italian Institute for Occupational Safety and Health).
Latvia. The government together with social partners agreed at a meeting on May 7 to modify the strict measures in place to counter the spread of the COVID-19 virus. The current state of emergency will be extended until June 9, but certain restrictions will be eased. In most cases these represent a slight easing of restrictions, though there are also some new measures, such as the requirement to wear nose and mouth covering on public transport. The measures adopted go beyond the workplace level and concern education and sports, big events and gatherings, reopening of shopping centers, transportation and tourism.

Luxembourg. The Luxembourgish government did not sufficiently consult the Luxembourgish trade unions OGBL and LCGB regarding the country’s exit strategy. This lack of social dialogue has been criticized by the trade unions who were in favour of the traditional Luxembourgish tripartite cooperation model between trade unions, government and employers in order to address the resulting social and economic consequences of the COVID-19 crisis.

The Government has established four stages of the deconfinement. The first phase of deconfinement was launched on April 20th and it established the mandatory use of facial protection in public spaces if the two metres’ safety distance cannot be kept. Each resident was provided with five face masks. Certain sectors (notably the construction and gardening sector) could resume work under very strict health and safety provisions. The trade unions provided relevant information to workers in these sectors. Some infractions and violations of the health and safety provisions were found.

The second phase of deconfinement officially started on May 4th, allowing medical activities in and outside the hospital sector to resume, and the reinforcement of public transport.

On May 11th third phase of deconfinement started, and certain businesses are now allowed to resume their work under strict safety and health provisions. The following businesses will remain closed: cinemas (except for open-air cinemas), gyms, amusement parks, indoor games and entertainment activities, casinos, fairs and exhibitions. Regarding the restaurant sector, the government has indicated the first of June as a possible reopen date if strict health and safety provisions are kept. The ban does not apply to take-away, drive-in and home delivery services. With regards to hotels, the ban will no longer apply to accommodation facilities. However, restaurants and hotel bars, except for room service and take-away services, will remain closed. There is no date yet for the opening of pubs and clubs. The government has announced in a press conference that they are planning on publishing a comprehensive list of businesses which are not allowed to reopen soon. Secondary school classes, vocational training as well as individual music lessons are also set to resume on May 11th. Attendance is class remains voluntary at this point.

The fourth phase of deconfinement will probably start on May 25th. This has been announced via press conference and the regulation has not been officially adopted yet. Also, provisions for exceptional family leave for workers with children of up to 13 years of age should remain in place, however, the legal provision still needs to be officially adopted by the government. The
Luxembourgish government has also announced their plan to provide free tests for the whole population as well as cross-border workers. The testing is done on a voluntary basis. In theory, the containment is set to finish on July 31st, 2020.

At this moment, borders to the neighbouring countries France, Belgium and Germany remain closed. Cross-border workers with forms signed by their employer are allowed to cross. The three neighbouring countries perform regular border checks. Some border crossing which were completely closed-off have re-opened, most notably on the Luxembourgish-German border. The closure of borders has been criticized by the Luxembourgish and well as interregional trade unions as well as many Luxembourgish municipalities and politicians.

Slovenia. The epidemiological situation of COVID-19 in Slovenia is easing and many workers will be allowed to return to work in upcoming two weeks. The National Institute of Public Health prepared various instructions and recommendation to support a responsible dealing with the contagion in for different sectors and new guidelines are issued frequently. The activities addressed by the Institute so far are the following: restaurants; food sector; technical shops and services; hairdressing services; cosmetic services; real estate transactions; performance of craft and service works and chimney sweeping services at home; bookstores and stationery; massage services; activities of museums and galleries; garment stores; libraries; catering on terraces and summer gardens; printing services; watchmaking; goldsmithing and key making; footwear shops; manufacture and repair of textile; footwear and leather activities; transport and commuting to work; and public administration.

The recommendations cover the following measures: hygiene and sanitizing, maximum number of workers per room, maximum number of customers per room, social distance, use and removal of personal protective equipment, cashless payment, special provisions for high-risk populations, and supervision of preventive measures, among others.

Also, the Slovenian Ministry of Health prepared non-binding guidelines for the exclusion of vulnerable groups of workers from the work environment if the specific OSH preventive measures in the light of the epidemic are not provided. These workers are: pregnant women, workers on biological and immunosuppressive drugs, workers with malignant disease on systemic cancer therapy (chemo-, immuno-, target therapy), workers after organ / tissue transplantation receiving immunosuppressive therapy, workers with uncontrolled diabetes, workers with chronic lung disease who have been or are on any type of systemic antidote or immunosuppressive (including biologic therapy) therapy, workers with high and uncontrolled blood pressure, workers with severe mental and behavioural disorders, workers with other serious chronic diseases at the discretion of occupational medicine practitioner and according to the risk assessment, and workers over the age of 65 (if possible, workers over the age of 60).

Spain. Several sector agreements have been reached between employers' organisations and trade unions referring to organisational and occupational safety and health measures in view
of the return to work in the de-escalation phase against the COVID-19. Trade union organisations expect compliance of the agreements, yet the unions are monitoring its implementation. In some sectors, the unions are visiting the work centres to disseminate the agreement and verify its compliance.

Some of the agreements reached are the following: COVID-19 prevention measures in the perfume and cosmetics industry; COVID-19 prevention action guide for construction sites; COVID-19 prevention action guide for the paper industry; COVID-19 prevention action guide for activities in the metal sector; Protocol for the protection and prevention of workers in order to recover industrial and distribution activity in the automotive sector; Protocol and guide for good practices for the protection and prevention of workers in the food and beverage sector during the health crisis caused by COVID-19; Companies in the personal image sector [Guide for the Evaluation of the specific risk due to exposure to the new coronavirus (SARS-COV-2) and planning of preventive activity]. Finally, an agreement has been reached between with the most representative unions in the public sector and the General State Administration for the return of public employees. Negotiations in other sectors are ongoing.

**Sweden:** National measures on the return to work after the pandemic (work organisation and OSH measures) hasn't been in focus until now, as Sweden has undertaken a different manner to combat the COVID-19 spread compared to other countries in Europe (no lock down has been established so far). Therefore, measures have been focused on how to protect and prevent the spread among workers who still are working and on organizing the work as safe as possible. All employers are obliged to carry out a risk assessment in accordance with the rules of the Work Environment Act. The risk assessment must include a plan on the management of any infection or suspected infection from COVID-19. The Public Health Agency of Sweden has changed the guidelines to strengthen the protective equipment of health care professionals and other workers in the forefront of the crisis. An increased attention has been given to the application of the national regulation which deals with basic hygiene (SOSFS 2015:10). The government in their spring budget for 2020 has included five additional amending budgets with proposals for active measures to limit the spread and mitigate the economic effects on society.

LO demands a focus on whether there is risk assessment in place, the provision of PPE for workers protection, balance between demands and resources, support for the severe mental stress suffered by workers on the frontline of the coronavirus. Other Swedish confederations back these demands. LO calls for undertaking a gender approach on OSH prevention, as women represent over 50 % of workers in highly exposed categories of work (personal care, cleaning, health care, teaching and personal service). They have also highlighted the divide between those professionals who can perform their work from home and those who have to go to the workplaces.

**Turkey.** The Ministry of Family, Labour and Social Services published guidelines on measures to be taken at the construction sites as part of combating COVID-19. The guide was
brought to the attention of workers and OSH professionals. The Turkish Health Ministry, in cooperation with local cell service providers, has launched an application to track the movement of patients diagnosed with the novel coronavirus through their smartphones to prevent further infections. Downloading the app is mandatory for all confirmed coronavirus patients, and those found to be leaving their homes by GPS tracking, will receive automated text messages and calls asking them to return to certain quarantine areas. This app now can be downloaded by everyone and they will receive the alerts regarding risky locations and whether they contact with a COVID-19 positive person.

This briefing note was originally produced on date May 18th and has been updated on May 28th and June 11th. The latest update takes account of developments in Ireland.

* * * *