

BASIC GENERAL INFORMATION NOTE TO WORK SAFELY

Compendium of good practices for a safe behaviour



Disclaimer: The present paper reflects the best knowledge of EFESME and ELA experts at the moment of its publication. It is for general information purposes only, is not legally binding and should not be construed as legal advice. It is also not intended as a substitute for each stakeholder's own assessment and decision making. EFESME and ELA decline any and all liability both for the content and for any measure taken or not taken on the basis of this paper.

This paper was considered useful and important to support the lift industry during the current coronavirus crisis, and to provide workers with practical information on how to behave.

This paper has no legal ambition, nor does it aim to replace European, national, regional, or local laws that are more precise and detailed, and involve legal obligations.

The aim of the paper is to provide a valuable compendium of good practices that could be used as a starting point for correct and safe behaviour in the workplace, subject to the existence of more precise and stringent national regulations to be applied nationally.



1. THE CORONAVIRUS AND THE ENVIRONMENTS IN WHICH LIFTS ARE INSTALLED

Coronaviruses are a large family of viruses known to cause diseases ranging from the common cold to more serious diseases, such as Middle Eastern Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS).

The new Coronavirus (nCoV), first identified in Wuhan, China in December 2019, is a new strain of coronavirus that has never previously been found in humans.

The disease caused by the new Coronavirus is "COVID-19" where "CO" stands for *corona*, "VI" for *virus*, "D" for *disease*, and "19" indicates the *year* in which it occurred.

The main pandemic risks are concentrated in places of stay or transit for large masses of the population: public areas, open to the public or intended for events with wide participation, means of transport and, of course, workplaces.

Some coronaviruses can be transmitted from person to person, usually after close contact with an infected patient (e.g. between family members or in a healthcare setting). The primary way is by droplets of infected people's breath ("droplet" way), e.g. by saliva, coughing and/or sneezing, by direct personal contact, and by hands (e.g. by touching with contaminated, unwashed hands one's mouth, nose, or eyes). In rare cases, contagion can occur through faecal contamination.

Normally, respiratory diseases are not transmitted through food, which anyway must be handled in accordance with good hygiene practices, and avoiding contact between raw and cooked food.

It is therefore important that all people apply hygiene measures such as sneezing or coughing in a handkerchief or in the flexed elbow, throwing the used handkerchiefs in a closed basket immediately after use, and washing their hands frequently with soap and water or using alcoholic solutions. Please note that the use of a handkerchief, even if it is disposable and it is immediately thrown in the rubbish, poses a higher possibility of infection. It is therefore advisable to sneeze inside the bent elbow and wash your hands for good measure.

Similarly, and to avoid any risk of contagion, it is highly advisable to avoid handshakes, even between workers in the same company, especially if one of them has frequented another working environment.



2. AIMS

The main objective of the document is to identify good practices for the adoption of the correct behaviour and attitude mainly by lift technical personnel during the emergency period due to the COVID-19 virus.



3. FIELD OF APPLICATION

These good practices apply to the activities carried out during the COVID-19 emergency period, and more specifically to any work activity carried out on-site by lift technical personnel.

4. AFFECTED PERSONNEL

These good practices are addressed to lift technical personnel who perform the following activities:

- 4.1. Ordinary maintenance;
- 4.2. Extraordinary maintenance;
- 4.3. Reactivation of lift systems, staircases, escalators, following a failure;
- 4.4. Emergency release of people trapped in the lift car;
- 4.5. Verification of the safety equipment of lift and escalator systems;
- 4.6. Assistance to engineers of notified bodies;
- 4.7. Installation of new plants.

5. GENERAL INDICATIONS

To best protect one's health, in general it is always crucial to remember the following:

- **Wash hands frequently and thoroughly with detergent or hydroalcoholic solutions for at least 40 seconds; Wash your hands before drinking, eating and smoking;**
- **Care for the hygiene of surfaces with which one might come into contact** (handles, push-button panels, cabin walls, etc.) **with disinfectants based on alcohol** (70% denatured alcohol hydroalcoholic solution) or chlorine (e.g. sodium hypochlorite "**bleach**");
- Always use gloves before touching surfaces that may be infected;
- **NEVER touch the eyes, nose and mouth with your UNWASHED hands;**
- **Always respect and maintain a safe distance with other people (the minimum distance to be observed at all times is at least 2 metres)** (see *Information Annexes*);
- The use of toilets, and therefore of common rooms, is to be carried out in turn: only one person can enter at a time;
- Cover your nose and mouth if you sneeze or cough with a disposable paper towel to be thrown away immediately after use; wash your hands thoroughly afterwards;
- It is recommended to use the protective masks; only in case when you are alone and do not meet any person you may not wear the mask;
- If one also has a cold and/or fever, one should stay home, call the family doctor and do not come to work: contact instead the relevant authorities;

- It is advisable to measure one's body temperature at least twice a day (morning and afternoon): if the temperature exceeds 37.5°, the person concerned should contact the company management immediately, and stay away from other people;
- When applicable, to check the body temperature of employees in the workplace, the following methods could be used:
 - Traditional thermometer
 - Digital thermometer
 - Infrared thermometer (earphone or front)

At the end of the measurement, the thermometer should be disinfected using 70% isopropyl alcohol solutions.

- It is compulsory to strictly comply with all applicable mandatory provisions issued by the Government authorities even if one is not in the workplace: please note that the virus is particularly contagious.





6. FOR THE TECHNICAL STAFF REFERRED TO IN POINT 4, SOME GOOD PRACTICES ARE DESCRIBED BELOW

6.1. USE OF COMPANY VEHICLE TO TRAVEL TO THE WORKPLACE

Before the start of each work shift, clean and sanitize the interior of the company vehicle (steering wheel, gearbox, mats, seats, and dashboard), using specific sanitizing products or hydroalcoholic solutions.

If possible, and if the work organisation allows it, it is advisable to:

- Always have the same vehicle used by the same technician every day;
- Have only one person use the vehicle;
- In the event that it is inevitable to have several people in the same vehicle, they should wear gloves and masks at all times.

***NOTE:** in case two workers have to travel in the same vehicle together, they should wear gloves and type FFP2 respirator mask, or in their absence, FFP1 type only without valve, because in the car it is impossible to comply with the criteria of safety distance, and it is necessary to protect the travel companion.*

After parking the vehicle, wear the PPE required by the type of activity:

- Disposable protective gloves;
- Protective mask (*only in case when one is absolutely alone and one does not meet anyone, one can avoid wearing it*);
- Protective goggles (*only in case when one is absolutely alone and one does not meet anyone, one can avoid wearing it*);
- Over-socks and disposable Tyvek category 3 protective suit (*in case of intervention in health facilities or where required*).

Please note that it is essential to keep contacts between workers in a company to a minimum, especially if some of them have frequented other environments outside the company to carry out their tasks. Basic social distancing measures, hygiene practices, and instructions for the use of PPE should be followed scrupulously, especially in the case of contact with colleagues who have frequented other working environments whose sanitising practices are unknown.



6.2. INTERVENTIONS ON THE PLANTS

It is crucial to remember that the elevator is one of the dirtiest environments in a building: the cleaning frequency is too low, the buttons are used by many users, and the cabin itself is generally small enough to create a close proximity to the doors and the walls of the car with the users.

For these reasons:

- Always wear the PPE required by the type of activity:
 - Disposable protective gloves;
 - Protective mask (*only in case when one is absolutely alone and one does not meet anyone, one can avoid wearing it*);
 - Protective goggles (*only in case when one is absolutely alone and one does not meet anyone, one can avoid wearing it*).
- **If the environment in which one has to operate requires it (hospitals, nursing homes, environments with the presence of infected people) one must wear:**
 - Disposable protective gloves;
 - Protective mask type FFP2/FFP3;
 - Protective goggles;
 - Over-socks and disposable Tyvek category 3 protective suit.

In any case, always follow the procedures required or imposed by this type of client structures, and which also may require the use of their own special PPE in addition to or instead of the supplied ones.

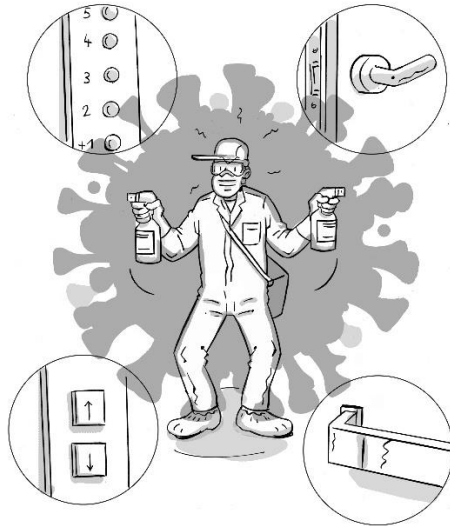
- Go to the area of the plant on which the intervention is to be carried out, always remaining **at least 2 metres** (see *Information Annexes*) away from any person: if someone tends to get nearer, one must urge him/her to respect this distance, which one must remember is fundamental to avoid the spread of the COVID 19 virus. In this regard, it should be noted that the protection measure consisting of respiratory tract protection masks may be insufficient and therefore NOT suitable to prevent the transmission of the virus, favouring contagion. In fact, the protective masks should meet the following requirements: they should be filterless because this should prevent any pathogens present between the mouth, nose and the mask itself to pass "out";
- Even if people nearby or in front are wearing a filter mask, please remember to keep a safe distance of **at 2 meters** (see *Information Annexes*);
- Before operating door handles, push-button panels and the like, always sanitize these objects with the sanitizer spray;
- At the end of the planned activities, store the equipment used: in case the intervention has been carried out in a hospital (or equivalent) where the presence, even if not direct for the technical staff,

of positive subjects has been notified, sanitize the equipment with the disinfectant nebulizer. Remember that the telephone, if used, must also be sanitized;

- When one reaches the vehicle, remove the overalls and shoes (if worn), gloves, mask and goggles. Throw the disposable PPE in the disposal bags, and the multi-purpose PPE in the plastic containers recognisable by the following pictogram:



- With regard to the disposal of PPE used in the workplace:
 - Where there is no possibility of encountering infected persons, PPE (masks and gloves that may have been used) could be disposed of in undifferentiated waste, taking care to carefully close the lid of the bin. To throw the garbage away, use at least two garbage bags and close them tightly.
 - If you are in a situation where there may be a suspicion that an infected person has frequented the same environment, disposable PPE should be disposed of as potentially infected material.
- Wash your hands very carefully with the sanitizer;
- Nebulize thoroughly with hydroalcoholic solution or sanitizer:
 - The soles of the shoes;
 - The glasses inside the plastic container, taking care not to touch them;
 - Nebulize the sanitizer at a distance of at least 40-50 cm between the nebulizer and the shoes or containers.
- Once back in the workplace, unload the plastic containers containing the PPE used and the glasses in the appropriate area;
- Wash your hands carefully again with the sanitizer.



6.3 RELEASE OF PEOPLE TRAPPED IN THE CABIN

Since it is not possible to know whether the person(s) inside the cabin is (are) wearing masks to prevent the spread of possible contagion through droplet, one must always use:

- Disposable protective gloves;
- Protective mask type FFP2/FFP3;
- Protective goggles.

It is essential to recommend calm to all people inside the cabin, especially when the doors are opening to let people out.

6.4 CONSTRUCTION SITE ACTIVITY

If the activities to be carried out take place inside an existing and inhabited building, it is necessary to ensure that the work of the technician is organised in such a way that the technicians themselves and the inhabitants of the building have no way of coming into contact.

GENERAL INFORMATION ANNEXES

ANNEX 1 – GENERAL INFORMATION ABOUT PPE AND ITS USE

DROPLET

DROPLET (drop): is the **safety distance** to keep to avoid being infected when the viral propagation takes place via aeriform secreted by the nose and mouth: it is **1.82m**, from which, **for reasons of practicality, the distance of 2m is considered necessary.**

SINGLE USE GLOVES

If persons arriving are wearing gloves, please note that a dangerous viral load may be deposited on the surface of these gloves. Therefore, the wearing of re-usable gloves is not a suitable measure to prevent the transmission of viral pathogens.

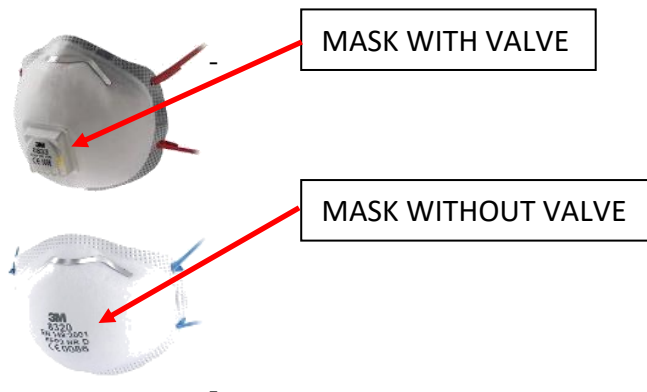
PROTECTIVE MASKS

Below are some notes illustrating the best possibilities of use of what is available on the market. They deliberately contain extensive indications in order to provide useful information not only for work, but also for everyday life.

The diction **FF** indicates **Facial Filtering**, while the letter **P** indicates the **degree of protection**. Facial filtering masks are manufactured in accordance with EN149, they belong to the category of "Personal protective equipment" (PPE), and they are almost entirely made of a filter material and may or may not have an exhalation valve.

Their function is to protect the carrier's respiratory tract from external agents (solid or liquid aerosols), and they are divided into three classes, in order of increasing protection: FFP1, FFP2 and FFP3. They do not protect against gases and vapours and, for the protection against micro-organisms, only half-masks FFP2 and FFP3 (or filters P2 and P3) can be considered suitable.

FFP3 mask (with exhalation valve): HOSPITALS and ICU departments, because they are in contact with patients who are certainly infected. These masks greatly reduce the chance of infection, but the chance of infecting others remains high.



FFP2 masks (with exhalation valve): FIRST RESPONDERS TO EMERGENCY NUMBERS, because they are in contact with potentially infected people and/or patients. These masks greatly reduce the chance of infection, but the chance of infecting others remains high.

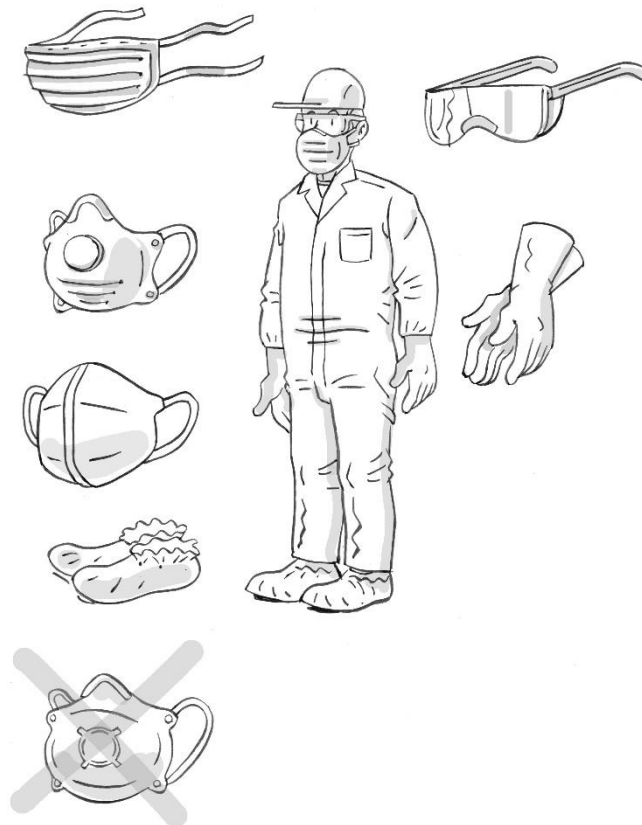
FFP2 (WITHOUT exhalation valve) LAW ENFORCEMENTS PERSONNEL, only in case of emergency and rescue aid, because they must be protected but not risk to infect each other.

FFP2 (WITHOUT exhalation valve) FAMILY DOCTORS and MEDICAL GUARDS/FIRST AID STATIONS. The chance of getting infected with the FFP2 mask is low, as is the chance of infecting another person. A lower chance is even provided by the FFP3 mask WITHOUT exhalation valve.

Alternatively, with valve (the valve helps those who are forced to use it for a LONG TIME in the presence of POTENTIALLY SICK PATIENT): physicians can match the surgical mask on top of the FFP2 mask with valve to limit the spread of their exhalation from the valve.

SURGICAL MASKS for use by: all the CIRCULATING POPULATION, all the PEOPLE WHO WORK or ARE FORCED TO WORK, the same LAW ENFORCEMENTS PERSONNEL, the **offices open to the public and their personnel, the food salesmen**, and in any case, all the people or workers in circulation (please remind that **IT IS BETTER FOR THE POPULATION TO STAY AT HOME**).

Surgical masks are used by hospital staff, nurses and/or doctors themselves, when not on the ward (or if FFP2 or FFP3 are available, but without valve, or with the addition of the surgical mask in front of the VALVE itself) to minimize the DIFFUSION of the infection.



IMPORTANT

WHO SHOULD NOT use FFP2 and FFP3 masks with valve

It is important to know that **from the VALVE of the mask the exhalations come out (which is equivalent to DIFFUSING the possible contagion)**, so:

- **Are absolutely not recommended for the population**, it would mean risking cross-contamination;
- **They are also not recommended for law enforcement personnel** that are forced to work in close contact between colleagues, as they would contaminate each other.
- They are also **not recommended for all grocery departments or fresh food counters**.
- They are also **not recommended for offices open to the public**, workers would contaminate each other.

WHO MUST have FFP2 and FFP3 WITH valve:

- **Hospitals' INTENSIVE THERAPY and INFECTOLOGY WARDS;**
- **FIRST RESPONDERS TO EMERGENCY NUMBERS (112, 118, ...), GREEN CROSS and Red Cross OPERATORS, or similar: these categories are presumed to have been in contact with people or patients CERTAINLY INFECTED, and must wear such masks for a long time.**

WHO SHOULD have FFP masks WITHOUT valve:

- **LAW ENFORCEMENTS PERSONNEL, to be used only and exclusively for emergency interventions or rescue workers' assistance, in combination with PROTECTIVE GOGGLES AND SINGLE GLOVES;**
- **ALL OPERATORS WORKING IN COUPLE:** the absence of a valve avoids exhalations, and therefore contagions.

IN BRIEF

Technical personnel should NOT use MASKS WITH VALVE because they can spread the contagion in normal conditions and in NO-COVID environments/workplaces.

THESE PEOPLE should use WITHOUT VALVE masks or SURGICAL masks with heavy tissues, which absorb exhalation and moisture by retaining it and not releasing it.

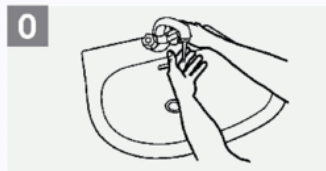


ANNEX 2 – WHO RECOMMENDATIONS

How to Handwash?

WASH HANDS WHEN VISIBLY SOILED! OTHERWISE, USE HANDRUB

🕒 Duration of the entire procedure: 40-60 seconds



Wet hands with water;



Apply enough soap to cover all hand surfaces;



Rub hands palm to palm;



Right palm over left dorsum with interlaced fingers and vice versa;



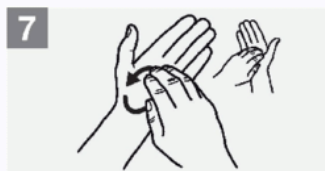
Palm to palm with fingers interlaced;



Backs of fingers to opposing palms with fingers interlocked;



Rotational rubbing of left thumb clasped in right palm and vice versa;



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



Rinse hands with water;



Dry hands thoroughly with a single use towel;



Use towel to turn off faucet;



Your hands are now safe.



World Health Organization

Patient Safety
A World Alliance for Safer Health Care

SAVE LIVES
Clean Your Hands

All reasonable precautions have been taken by the World Health Organization to verify the information contained in this document. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall the World Health Organization be liable for damages arising from its use. WHO acknowledges the H pitaux Universitaires de Genève (HUG), in particular the members of the Infection Control Programme, for their active participation in developing this material.



European Federation for Elevators Small and Medium-sized Enterprises
6 Rond-Point Schuman, 7th floor, B-1040 Brussels
Tel.: +32 (0)2 230 74 14 – Email: secretariat@efesme.org

European Lift Association
44/1 Avenue Herrmann-Debroux, B-1160 Brussels
Tel.: +32 (0)2 779 50 82 – Email: info@ela-aisbl.org

This document was created by the EFESME experts with the support of the EFESME members, and with the collaboration of the European Lift Association (ELA).

The guidelines are illustrated by drawings by Zack,
zackvdh@gmail.com

The guidelines are also available on the EFESME website
www.efesme.org

© 2020 European Federation for Elevators Small and Medium-sized Enterprises (EFESME) aisbl – All rights reserved.
© 2020 European Lift Association (ELA) aisbl – All rights reserved.

Initiative supported by **Small Business Standards** and **SMEunited**:

