



COVID-19 Contingency Plan

Proposed Dominica Geothermal Development
Project

September 2021

18. COVID-19 CONTINGENCY PLAN

18.1 Introduction

The Dominica Geothermal Development Company (DGDC) is committed to ensuring compliance with the implementation of the Environmental and Social Management Plans (ESMP) policies and procedures.

This plan aims to establish good practices to be adopted by the Project with regards to the current new coronavirus (COVID-19) pandemic, including minimum procedures and strategies that must be observed by DGDC, its subsidiaries and its employees. DGDC aims to develop its activities in safe conditions, especially concerning health and safety conditions, as well as preserving its jobs and activities.

This document will be shared with DGDC's contractors and subcontractors to incorporate the presented best practices throughout all their activities.

18.1.1 Objective

The overall objectives of the COVID-19 Contingency Plan are to:

- Define guidelines and practices regarding COVID-19;
- Establish procedures and strategies to contain and protect workers, contractors and subsidiaries from COVID-19;
- Develop activities in healthy and safe conditions;
- Promote fair treatment, non-discrimination and equal opportunity of workers, and compliance with healthy and safe (H&S) working conditions; and
- Protect workers', contractors' and local community members' wellbeing, health and safety.

18.1.2 Scope of Application

This plan will apply for the duration of the pandemic while the development of DGDC's activities take place. It is DGDC's responsibility to ensure that Employees, Contractors and Subcontractors are evaluated according to DGDC's Environmental and Social Management Plan (ESMP) policies and procedures, which are aligned to international best practices.

Contractors will use this plan and develop it further to provide specifics on how the various requirements from the project-specific ESMP and COVID-19 measures will be applied on the ground. DGDC will review and approve this document before any implementation.

18.2 Roles and Responsibilities

In order to properly implement the COVID-19 Contingency Plan, DGDC requires the involvement of the people listed below.

Table 18-1: Roles and Responsibilities

Role	Responsibilities
Board of Directors	■ Be familiarized, review and approve the COVID-19 Contingency Plan.
Finance Manager	■ Ensure the availability of resources necessary for the implementation of the COVID-19 Contingency Plan.

Role	Responsibilities
Managing Director	<ul style="list-style-type: none"> ■ Be familiarized with, review and update as necessary the COVID-19 Contingency Plan.
ESG Manager and HR Manager	<ul style="list-style-type: none"> ■ Be familiarized and implement the COVID-19 Contingency Plan. ■ Review, evaluate and verify the COVID-19 Contingency Plan. ■ Review and approve the contractor project-specific COVID-19 Contingency Plan. ■ Update the COVID-19 Contingency Plan.
H&S Manager	<ul style="list-style-type: none"> ■ Review, evaluate and verify the COVID-19 Contingency Plan. ■ Assure the development of an Emergency Preparedness and Response Plan for each Project ■ Present, alongside the Community Liaison Officer, a monitoring report to the Managing Director
Community Liaison Officer	<ul style="list-style-type: none"> ■ Coordinate and supervise the communication of information activities regarding this plan to the affected communities. ■ Present, alongside the H&S Manager, a monitoring report to the Project Manager.
Contractor Company	<ul style="list-style-type: none"> ■ Develop a project-specific COVID-19 Contingency Plan.
DGDC Employees, Contractors and Subcontractors	<ul style="list-style-type: none"> ■ Read and be familiarized with the COVID-19 Contingency Plan. ■ Develop a project-specific COVID-19 Contingency Plan.

18.3 Activities

In the light of the declaration of Public Health Emergency of International Importance (ESPII) by the World Health Organization (WHO) in January 2020, international, national and local health authorities have issued a series of recommendations. DGDC will adopt and recommend preventive and mitigating measures as well as best practices as described below throughout the Project's development and implementation and its corporate activities.

The best practices and recommendations are directed to prevent the spread and contagion of COVID-19 in the work environment and work activities. DGDC is committed to maintain safe working conditions for the people involved in the development and implementation of the Project, especially for those people whose activities and functions require face-to-face action.

18.3.1 DGDC COVID-19 Committee

DGDC will designate an internal COVID-19 Committee to:

- Provide support and information to assist the DGDC Directors' decision-making process regarding crisis management related to COVID-19.
- Define and monitor the guidelines for this Contingency Plan and its updates.
- Call meetings and disseminate the results to all participants.
- Archive the documents generated in the execution of the contingency plan and other actions related to COVID-19.
- Ensure the active participation of all DGDC areas involved in the Committee.

The COVID-19 Committee may suggest the creation of specific Working Groups, including groups between DGDC and its contractors in order to monitor compliance with actions to control the spread of the virus among workers and the community; or other actions such as enabling communication between the Project and contractors and subcontractors, among others.

18.3.2 Monitoring of Normative Acts and COVID-19 Cases

Daily, through the COVID-19 committee and their regulatory and legal areas, DGDC will monitor the measures adopted by the National and Public Administration entities to contain the spread of COVID-19, strengthen the health system and safeguard the economy. All information will be shared on internal communication channels and serve as a reference for adapting measures to prevent and respond to the pandemic internally.

DGDC's COVID-19 committee will monitor the number and location of COVID-19 cases in the world, especially in the Caribbean region, in Dominica, and locally on a daily basis. When necessary, and taking into the account the evolution of the statistics, this Contingency Plan will be further adjusted to prevent and respond to the pandemic in the Project's areas of influence.

18.3.3 Disclosure of Information

DGDC will reinforce the importance of communication and information disclosure and trainings to reduce the risks of COVID-19 both internally (workers and contractors) and for the nearby communities in the Project's areas of influence. DGDC will adopt the following main initiatives:

- Reinforcement of communications and information disclosure on best practices for preventing COVID-19 transmission, especially regarding specific recommendations on social distancing and hygiene measures;
- Training of teams to be able to recognize the COVID-19 symptoms;
- Identification of the Project's focal points and communication channels (WhatsApp, e-mail, internal social network, internal grievance mechanism) to address workers' concerns about COVID-19 on a regular basis;
- Creation of a specific working group in charge of the institutional communication actions between DGDC and its contractors; and
- Adaptation of DGDC's internal communication materials and those of the contractors to distribute them to external stakeholders, as a way of reinforcing social responsibility and the joint work between DGDC and its contractors.

As long as there are preventive measures and recommended guidelines from the health authorities in favor of social distance, DGDC will adhere at all times to those guidelines, including observing social distancing in its interaction with the local community and where practical, replacing in person activities with virtual tools. In addition, DGDC will enable internal communication channels for its workers and its contractors (toll-free phone, email, website and direct communication with DGDC teams) to ensure access and interaction between employees, the local community and the Project when needed.

In addition, while the pandemic continues, DGDC's Stakeholder Engagement activities will also be adjusted to avoid in-person events. DGDC will put a special emphasis to distribute information regarding the external grievance mechanism and other tools to disclose information, such as participating in local radio programs or distributing a newsletter, for more details see the section below.

18.3.4 Social Actions and Community Engagement

As mentioned in Section 18.3.3, as a preventive measure and in order to respect the health authorities' guidelines that recommend social distancing, all activities that require direct contact with the local community will be either postponed or replaced with virtual tools. The External Grievance Mechanism and other available communication channels (toll-free phone, e-mail, website and direct communication with

DGDC teams) will continue to function normally. When possible, DGDC will collaborate with the local authorities to contribute to the fight against the spread of COVID- 19.

In order to have a positive impact in reducing the pandemic cycle, from prevention to response, DGDC plans to implement the following lines of action:

- **Disclosure of Information:** In order to prevent the spread of COVID-19, DGDC will disseminate clear and accurate information and guidance documents, using simple and accessible language to reach the largest number of people;
- **Support health professionals:** Should PPE for health professionals be needed, DGDC will consider contributing on this line of action as a response to the epidemic;
- **Support the most vulnerable population in the AOI:** One of the side effects of the pandemic is the economic crisis, mainly affecting the population in a situation of socioeconomic vulnerability. DGDC aims to contribute with actions specifically aimed at the vulnerable groups located in the Project's AOI.

18.3.5 Identification of Essential Activities to Begin and Continue the Project

DGDC aims to identify and define the services and activities essential to begin and continue the Project, considering activities of design, pre-construction and construction, and if applicable later on for the operations phase by monitoring the evolution of the pandemic, the competent authorities' guidelines, regulatory aspects, recommendations from shareholders and financiers, among others. Furthermore, attention will be given to technical criteria regarding the number of workers needed without compromising the practice of social distancing and the preservation of everybody's health and safety throughout the different activities.

18.3.6 Social Distancing Measures

Scientific studies have demonstrated there is a spread of expelled micro droplets, not only during sneezing or coughing, but also during human speech, capable of carrying the virus over long distances, especially in closed and poorly ventilated environments. Consequently, DGDC will implement strict social distancing measures, preferably 2 meters (6 feet apart), in all activities and environments, including transportation, accommodation, cafeterias, bathrooms, meeting rooms, and workstations, in order to minimize the potential COVID-19 contagion.

Social distancing measure will also be implemented for the field and construction activities. Thus, as a good practice for the continuity of the activities considered essential during the emergency period, it is advisable that the contractors (especially EPC directly involved in the implementation of the Project) act in order to respect the 2 meters-social distancing in all their activities. Social distancing in the field and construction areas is considered critical and necessary to maintain optimal health and safety conditions at the Project during the emergency period and avoid exposure and contagion of workers. All activities in closed environments with little ventilation will be forbidden. The following specific measures will be adopted in order to implement health and safety guidelines at work:

- Maintain a safe distance (2 meters between people) in places where people work or meet regularly.
- Identify all places where people normally work within 2 meters of each other and adjust those areas to meet the safe distancing requirements, as well as establishing a regular inspection routine in offices, control rooms, meeting rooms, construction sites, work fronts. A checklist and photographic records will be completed in order to confirm adherence. In places where 2 meters of spacing cannot be reached, the possibility of expanding the workplace in previously vacant areas or placing acrylic dividers between workplaces will be evaluated.
- Increase the frequency of cleaning and spacing of sanitary appliances and offices.

- Install marks or signs on the floor, indicating safe distances, where people normally wait in lines (access to buses, time clock, cafeteria, among others).
- Expand the use of videoconferencing to replace face-to-face meetings, safety dialogues and trainings, as well as the possibility of distributing videos of HSE campaigns to workers and contractors through WhatsApp and DGDC social networks.
- Establish alternate working days or extra shifts to reduce the total number of workers at any given time, allowing workers to maintain the recommended distance between them and, at the same time, ensuring the completion of work activities and comply with the construction schedule.

18.3.7 Activity Security Analysis and Work Permit

Based on the field activities' assessment, those considered critical and necessary to start during this emergency period will need to reinforce in the routine of such activities the need to avoid exposure of workers to social proximity less than 2 meters (whenever possible) and precautionary measures for carrying out activities in closed environments, such as places with poor ventilation. Each activity will be described in the Activity Safety Analysis and, eventually, in the Work Permit. These documents will be completed as evidence of the application of COVID-19 preventive measures at work.

18.3.8 Control Measures and Working Conditions

DGDC will distribute surveys to identify the workers' physical and health conditions to prevent potentially ill workers from feeling under pressure to show up for work, risking the transmission of the virus to the rest of the workforce. The surveys will contain a simple checklist with information on the workers' conditions, which can be confirmed by establishing a routine inspection.

In addition, DGDC and its subcontractors will ensure that their employees have access to in-person or remote medical consultation services (by phone or video call) if they encounter COVID-19 symptoms. DGDC will closely collaborate with local authorities to benefit its workers and the local community.

DGDC and its contractors will provide and enforce face protection masks for all people in the working areas. DGDC will specify the type of mask required, the replacement frequency and will provide appropriate training. DGDC and its contractors will make 70% alcohol gel available in all working areas.

18.3.9 Food Supply and Preparation Measures

DGDC will evaluate the possibility of hiring meal delivery services from local restaurants that have already been mapped and previously contacted. DGDC will also let employees bring their own meals from home if preferred.

18.3.10 Control Measures for Mobilizing Workers

If mobilization of workers from other communities or regions is required for the Project, both DGDC and its contractors will take the following measures:

- Lists of workers and their arrivals will be reviewed at least 7 days in advance, to analyze the workers that might come from high-risk areas (areas with higher community transmission rates). These cases must be subjected to prior isolation for 15 days before starting work and access the Project area or nearby community.
- Monitor the list of workers, indicating the city of origin, estimated start of work and address at which the worker(s) will be kept in isolation.

- Ensure that when accessing to the Project area, all workers are wearing identification badges and essential service documentation.

DGDC will observe the travel restrictions imposed by the local, national and international authorities, as well as the recommendations of the health authorities. DGDC will implement the following protocols about mobilization and travel for its employees:

- International Corporate travel: suspension of international corporate travel. Any exceptions to the recommendations described here will be dealt on a case-by-case basis and aligned with the authorities' guidelines, as well as approved directly by the DGDC Managing Director.
- Private trips: workers shall inform HR about their private trips by email and/ or phone.

18.3.11 Control Measures for potential Workers' Accommodations

DGDC does not expect to have a significant number of workers that will need accommodation, as the Project will focus on hiring locally. Nonetheless, workers who need accommodation, will be either placed in hotels or rented homes.

The following best practices will be applied in the workers' accommodations:

- Promoting, respecting and applying occupancy density limits in workers' accommodation;
- If new workers arrive from countries or areas with high COVID-19 risk, these people will have to complete a proper quarantine in accordance with local regulations and/ or recommendations of relevant international organizations;
- Whenever possible, the accommodation coordinator or the persons in charge of managing the accommodation will coordinate the daily health and safety measures of the residents, such as taking the persons' body temperature with thermometers to prevent contagion;
- Carry out the necessary measures and efforts in order to ensure that all workers have access to medical professionals, including adopting measures that remove possible language barriers, in the case of foreign workers.
- Provision of hand soap for workers in all bathrooms, as well as the adoption rigorous daily cleaning routine.
- Implement the necessary measures and efforts in order to ensure that door handles, taps, TV/ media devices, kitchen equipment, controls, buttons and any other common objects located in the areas that are touched regularly are cleaned several times a day. The cleaning frequency will be determined by each installation. Likewise, ensure that necessary measures are taken to ensure that common surfaces, including those on vehicles that transport workers from their accommodations to the workplace, counters, floors and walls, will be treated as potentially contaminated areas and therefore will be cleaned regularly.
- Keep a minimum distance of 2 meters between the beds, as well as reducing the number of people in a single room, when possible let only one person per bedroom.
- Carry out actions to maximize natural or forced ventilation within the limitations of comfort, safety and privacy, as well as considering any changes in the installation to allow ventilation during working hours.
- Mandatory use of a mask, also during off-hours. Additionally, exits that are not for the purpose of essential needs should be avoided, and it is important to have clear rules for the use of common areas in the accommodation.

- The Project will guarantee workers' access to medical services.

18.3.12 Preventive Measures for Drinking Water Supply, Sanitation and Solid Waste Management

This section presents the main guidelines to prevent the contagion of COVID-19 through the drinking water supply, sanitary sewage and solid waste management services in all DGDC activities and its contractors (offices, construction sites, work areas). The content was adapted from the Interim guide about Water, sanitation, hygiene, and waste management for COVID-19, published on March 19, 2020 by the World Health Organization, considering the DGDC context and characteristics.

18.3.12.1 Safe Water Supply

DGDC will take several measures to improve the water supply, by protecting the water source; treat water at the point of distribution, collection or consumption; and ensure that treated water is safely stored at the DGDC facilities in regularly cleaned and covered containers.

For effective centralized disinfection, there must be a residual concentration of free chlorine of ≥ 0.5 mg / L after at least 30 minutes of contact time at pH < 8.0 . A chlorine residual must be maintained throughout the distribution system.

18.3.12.2 Safe Management of Waste Water and Feces Waste

Best practices to protect the health of workers in sanitation treatment facilities must be followed. Workers must wear appropriate personal protective equipment (PPE), which includes protective clothing, gloves, boots, glasses or face shield and mask; they must wash their hands frequently; and avoid touching their eyes, nose and mouth with unwashed hands.

18.3.12.3 Hand Hygiene

Hand hygiene is extremely important. Hand cleaning with soap and water or an alcohol-based hand scrubber will be carried out according to the instructions as stated in "My 5 moments for hand hygiene" (WHO, Infection prevention and control) available at <https://www.who.int/infection-prevention/campaigns/clean-hands/5moments/en/>.

When the hands are not visibly dirty, the preferred method is to perform hand hygiene with alcohol (rub your hands for 20 to 30 seconds using the appropriate technique). When hands are visibly dirty, they will be washed with soap and water for 40 to 60 seconds using the appropriate technique. Hand hygiene must be carried out before putting on the PPE and after removing it, when changing gloves, after any contact with a patient with suspected or confirmed COVID-19 infection or its residues, after contact with some respiratory secretion, before eating and after using the bathroom.

Functional facilities to wash the hands must be present for all workers throughout the Project site and in areas where PPE is placed or removed. These facilities must be available within 5m of bathrooms, as well as in public areas.

18.3.12.4 Cleaning Practices

The recommended cleaning and disinfection procedures must be followed consistently and correctly. Clothes will be washed and surfaces in all environments will be cleaned at least once a day. Many disinfectants are made to kill viruses, such as COVID-19, including commonly used hospital disinfectants. WHO currently recommends the use of:

- 70% ethyl alcohol to disinfect small areas between uses, such as dedicated reusable equipment (for example, thermometers);
- 0.5% sodium hypochlorite (equivalent to 5000 ppm) for disinfecting surfaces.

18.3.12.5 *Disposal of Dirty Water from Washing PPE, Surfaces and Floors*

The WHO recommends to clean public utility gloves or heavy reusable plastic aprons with soap and water and decontaminate them with 0.5% sodium hypochlorite solution after each use. Disposable gloves (nitrile or latex) and aprons must be discarded after each use and not reused; hand hygiene will be performed after removing the PPE. If the gray water includes disinfectant used in the previous cleaning, it will not need to be chlorinated or treated again. However, it is important that this water be discharged into drains connected to a septic or sewer system or into a drainage well. If gray water is discharged into a submerged pit, the pit will be enclosed within the health facility to prevent tampering and to avoid possible exposure in the event of an overflow.

18.3.12.6 *Sanitation and Hygiene Practices at Homes, Accommodations and Communities*

Maintaining best practices for drinking water supply, sanitation, hygiene and solid waste management at home and in communities near the Project is also important to prevent the spread of COVID-19 and to care for patients at home. Regular and correct hand hygiene is of particular importance.

- Hand Hygiene:

Regular hand washing is one of the most important measures that can prevent COVID-19 infection. In homes, schools and crowded public spaces - such as markets, places of worship, train or bus stations, regular washing of hands will occur before preparing food, before and after eating, after using the bathroom or changing a child's diaper and after touching animals. Functional hand washing facilities with soap and water must be available within 5 meters of the bathroom.

- Other recommendations:

The safe management of human excreta will be considered, starting with ensuring access to regularly cleaned, accessible and functioning toilets or latrines, as well as containment, transportation, treatment and eventual disposal of sewage.

When there are suspected or confirmed cases of COVID-19 in the home environment, immediate measures will be taken to protect healthcare professionals and other family members from the risk of contact with respiratory secretions and excrement that may contain the COVID-19 virus.

Surfaces that are touched frequently throughout the patient care area will be cleaned regularly, such as next to tables, beds and other bedroom furniture. Bathrooms will be cleaned and disinfected at least once a day. Regular household soap or detergent will be used for cleaning first and then, after rinsing, a common household disinfectant containing 0.5% sodium hypochlorite (i.e. equivalent to 5000 ppm or household bleach with 1 part hydrochloride sodium to 5% water and 9 parts water) be applied. PPE will be used while cleaning, including wearing a mask, goggles, liquid-resistant apron and gloves, and hand hygiene with a hand rubbing alcohol or soap and water will be carried out after removing the PPE.

18.3.12.7 *Rapid Tests to Diagnose COVID-19*

Rapid antibody tests for the new coronavirus (Sars-CoV-2) can be used to support the assessment of the immune status of workers who have symptoms of COVID-19. This type of examination indicates whether or not the person had contact with the virus, through the detection of antibodies produced as a defense mechanism of the organism. According to ANVISA (<http://portal.anvisa.gov.br/coronavirus>), the

examination is done using blood, serum or plasma samples. The method used is called immunochromatography, which is the generation of color from a chemical reaction between antigen (substance foreign to the organism) and antibody (defense element of the organism). The results obtained are called IgM and IgG. IgM and IgG are the body's defenses against an external agent, such as the virus that causes Covid-19.

DGDC contractors will perform rapid tests for the diagnosis of COVID-19 following technical criteria that consider good industry practices, guidance to health agencies and specificities of each service provision contract (e.g. location, duration, occupational risks, number mobilized workers, and need for accommodation). The following testing strategy is suggested:

- Monitoring of workers who might need testing by applying a rapid test every 15 days;
- Application of a rapid test to all non-local workers after a quarantine period of 15 days of arrival on island;

All suspected cases will be referred to the local health authorities as per national guidelines.

18.3.12.8 *Internal Grievance Mechanism and Employment Protection*

Within the measures related to the pandemic period, it is important to note the need and concern of DGDC to protect its employees, their jobs and health and safety. DGDC will also emphasize this to its contractors, to take the necessary care so that the employment protection measures are also applied to their employees, reducing the workers' general insecurity and concerns in the pandemic scenario.

The internal grievance mechanism will be monitored regularly in order to identify claims and concerns regarding COVID-19 or any grievance related to the pandemic circumstances.

DGDC will avoid layoffs, and will only use layoffs as a last resort. DGDC will adopt government measures and policies issued in the context of this public crisis to reduce employer costs, while ensuring the maintenance of jobs. DGDC will maintain a constant communication with workers and their representatives to understand their demands and insecurities in order to periodically review internal contingency plans to guarantee the continuity of the Project's activities, as well as their job security.

18.3.13 *Measures for the Office Spaces*

DGDC will adopt specific corporate preventive and mitigating measures at the offices in the Project and for its subcontractors, if applicable.

18.3.13.1 *Preventive Measures at Work*

DGDC will reinforce all guidelines and recommendations for medical health and hygiene care in the work environment, especially in the corporate environment. DGDC will disclose information through its communication channels, as well as constantly refilling the alcohol gel containers placed in different locations of the DGDC offices and working areas for the hygiene of its employees and people who have access to DGDC facilities.

More frequent cleaning will take place in areas where exposure to possible contamination is higher, such as meeting rooms, pantry, bathrooms, material/ work equipment, etc. In cases when a suspected case of contamination is reported or confirmed, a thorough cleaning process will be carried out.

DGDC will take the individual body temperature using digital infrared thermometers, twice a day. If the temperature is 37.7°C or above, preventive social isolation measures, medical assistance and monitoring will be recommended.

DGDC will disclose information constantly, including Health and Safety guidelines for employees and contractors, on hygiene measures to prevent the spread and contagion of the virus, such as washing hands with soap and water or alcohol gel whenever possible, maintain preventive social isolation and avoid greeting with a hand or hug.

If a worker suffers any of the symptom associated with COVID-19 (fever, cough, difficulty breathing), the employee will be instructed to stay at home and contact the health teams available to assist employees and their families. Workers shall also inform the Human Resources team, by email and/ or telephone. The HR team shall provide the necessary support and immediate referral to medical care, whenever this is recommended by the medical evaluation. HR is responsible for gathering and controlling the employees' information related to symptoms and / or suspicious cases, as well as monitoring their situation during the duration of the contingency period.

18.3.14 *Management of Meetings or Events*

DGDC and its contractors' organizers of meetings and events will be required to evaluate the need and potential risk from a COVID-19 infection due to:

- The risk of people attending the meetings or event might be unwittingly bringing the COVID-19 virus to the meeting. Others might be unknowingly exposed to COVID-19.
- While COVID-19 is a mild disease for most people, it can make others very sick and even risk their lives. Around one of every five people who are infected with COVID-19 need hospital treatment.

Key considerations to prevent or reduce COVID-19 risks in meetings or events:

BEFORE the meeting or event DGDC and its contractors will:

- Double-check the authorities' advice where the meeting or event takes place. DGDC and its contractors will follow the official guidance and advice.
- Develop and agree a preparedness plan to prevent infection at the meetings or events.
- Consider whether a face-to-face meeting or event is needed. Should the face-to-face meeting or event be replaceable, DGDC and its contractors must choose a teleconference, videoconference or any other online mean for such meeting or event.
- Evaluate the number of people for the meeting or event is required. In case of the number of attendees could potentially be lower, the number of people will be reduced even further.
- Ensure and verify information and communication channels in advance with key partners such as public health and health care authorities.
- Pre-order sufficient supplies and materials, including tissues masks and hand sanitizer for all participants.
- Advise participants in advance that if they have any symptoms or feel unwell, they are not allowed to attend.
- Make sure all organizers, participants, caterers and visitors at the event provide contact details: mobile telephone number, email and address where they are staying. State clearly that their details will be shared with local public health authorities if any participant becomes ill with a suspected infectious disease. If they disagree with these measures, they will not be allowed at the event or meeting.
- Develop and agree a response plan before the meeting occurs, in case someone at the meeting becomes ill with symptoms of COVID-19 (dry cough, fever, malaise). This plan will include at least:

- Identification of a room or area where someone who is feeling unwell or has symptoms can wait alone (no contact with other coworkers or meeting participants) until he/she can be safely evacuated or transferred to receive proper medical attention.
- A plan for safely transfer meeting participants with symptoms, or meeting participants that have had contact with someone who is confirmed to have the disease, to a health facility.
- DGDC will make its best efforts to identify meeting participants who might have a higher risk factor or be more affected/sensitive to the disease, for instance people older than 60 years old, pregnant women, people with chronic diseases such as a cardiovascular illness, diabetes, or any other condition advised by the governmental authorities. This type of personal information will be kept as confidential and obtained based on medical records. People with this kind of conditions will not participate in meetings.
- Inform local authorities if a meeting participant, staff member or service provider appears to have COVID-19 symptoms during or just after the meeting.

DURING the meeting or event:

- The organizers will provide information or a briefing, preferably both orally and in writing, on COVID-19 and the measures that have been taken to make the event safe for participants, such as:
 - Avoid touching common surfaces.
 - Encourage regular hand washing or use of an alcohol rub by all participants at the meeting or event.
 - Encourage participants to cover their face with the bend of their elbow or a tissue if they cough or sneeze. Supply tissues and closed bins to dispose of them in.
 - Provide contact details or a health hotline number that participants can call for advice or to provide information.
 - Display dispensers of alcohol-based hand rub prominently around the venue.
- If there is space, arrange seats so that participants are at least two meters apart.
- Open windows and doors whenever possible to make sure the venue is well ventilated.

AFTER the meeting:

- Organizers will retain the names and contact details of all participants for at least one month. This will help public health authorities trace people who may have been exposed to COVID-19 if one or more participants become ill shortly after the event.
- If someone at the meeting or event was transferred to a room alone without any contact with other persons as a suspected COVID-19 case, the organizer will let all participants know this. They will be advised to monitor themselves for symptoms for 15 days and take their temperature twice a day.
- If someone develops even a mild cough or low-grade fever (i.e. a temperature of 37.3 C or more) will stay at home and self-isolate. This means avoiding close contact (2 meters or nearer) with other people, including family members. They will also call their healthcare provider to give them details of their recent travel and symptoms.
- The room where the meeting or event took place shall be cleaned and disinfected thoroughly.

18.3.15 Visitors

DGDC will not allow visitors at the Project sites or offices for an indefinite period until the COVID-19 pandemic is resolved. Any exceptions to the recommendations described here must be dealt with on a case-by-case basis and approved directly by the DGDC's Managing Director.

18.3.16 Remote Work (Home Office)

If possible, and to prevent the spread of the virus, DGDC will enable remote work (home office) for employees that solely carry out administrative activities at the Project, in order to maintain a minimum number of employees in the office, whose activity is related to functions that cannot be performed remotely.

DGDC will generally consider these three case scenarios:

1. Employees whose remote presence severely impacts the continuity of DGDC's activities, with the physical presence of the employee being indispensable, even in the contingency scenario.
2. Employees whose remote presence impacts the continuity of DGDC's activities, making it possible to work in the home office.
3. Employees whose remote presence has a slight impact on the continuity of DGDC's activities, making it possible to work in the home office.

The assessment of remote work (home office) requests will also take into account the higher-risk groups who could suffer from more severe consequences of a possible viral contamination, such as, older employees (over 60 years old), employees with pre-existing respiratory diseases or immunodepressants, employees who live with elderly people or with family members who suffer from respiratory diseases, or immunodepressants.

The remote work options will be evaluated and resized, with the possibility of implementing a rotation system among employees allocated within each level, depending on work demands, in order to guarantee the continuity of activities and workers' safety.

DGDC will provide the appropriate infrastructure for remote work, such as laptops and access to DGDC's virtual private network by employees, which shall include the company's internal systems, file sharing networks and platforms for electronic timekeeping. Employees will have support from the Project's IT services for remote access.

18.4 Documentation and Monitoring

The Human Resources Manager and Health and Safety Manager will be responsible for the implementation of what is stated in this plan and will keep evidence of it (e.g. checklists, COVID-19 cases at the Project, working conditions, internal grievance mechanism, workers who come from other communities, etc.).

18.5 Key Performance Indicators

The COVID-19 Contingency Plan is to be reviewed on a monthly basis until the pandemic is resolved in consultation with the Human Resources Manager and Health and Safety Manager. The Project will ensure that contractors update their procedures as needed.

The table below presents the key performance indicators that will evaluate the implementation of this plan:

Table 18-2: Key Performance Indicators

Impact	Indicator	Performance Goals/ KPIs	Project Phase	Method/Tool / Frequency
Health and Safety Conditions at Work	Availability of preventive COVID-19 material (cleaning products, disinfectant, masks, gloves, alcohol gel, etc.)	All Project areas shall have cleaning materials and available PPE at all times.	Until the pandemic is resolved.	Human Resources, Internal Grievance Mechanism and Health and Safety Manager / Daily
	Hand hygiene facilities	One sink available to wash the hands per 20 workers. Alcohol gel available in all Project areas at all times.	Until the pandemic is resolved.	
	Internal Grievance Mechanism	100% reported, evaluated and solved grievances regarding COVID-19 claims or concerns	Until the pandemic is resolved.	