Guidelines for Voluntary Organisations re-COVID 19
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New regulations are listed in semi-bold and over a red tint.
The guidelines are intended for the Voluntary Sector in Malta and Gozo in the gradual opening of activity on the return of their operation in the community as part of the COVID-19 Pandemic transition. They are based on guidelines and scientific literature, and are in accordance with the guidance issued by the Public Health Authorities. They are intended to make voluntary work as safe as possible while allowing a number of Voluntary Organisations (VOs) to return gradually to their operation.

As COVID-19 restrictions are gradually relaxed by the Public Health Authorities (PHA), administrators of Voluntary Organisations must work together to adapt and promote safe environments consistent with advice from PHA and to ensure that venues are ready for the social distancing and correct hygiene measures that are critical to the success of the transition. The health and safety of volunteers, members and clients is paramount, and the main objectives of these guidelines are focused on ensuring that this is not compromised in any way by securing the prevention of transmission of COVID-19.

These guidelines are not finite and are subject to change depending on the local pandemic situation and as directed by PHA. Any guidelines and/or legal notices issued by the Public Health Authorities shall take priority and supersede these guidelines in case of conflict.

Voluntary Organisations must be prepared in the eventuality that there is a positive case of COVID-19 in the VO premises/meeting and be prepared to respond immediately, appropriately, effectively and efficiently, and consistent with specific recommendations from PHA.

1 www.covid19health.gov.mt
Guidelines for Voluntary Organisations re-COVID-19

Understanding how COVID-19 spreads

Current research suggests that the SARS-CoV-2 virus (the virus that causes COVID-19) is transmitted from person to person:

- Through small respiratory droplets through sneezing, coughing, or when people interact with each other for some time in close proximity (usually less than one metre) which droplets can then be inhaled,
- Or when the droplets land on surfaces that others may come into contact with, who can then get infected when they touch their nose, mouth or eyes.

The virus can survive on different surfaces from several hours (copper, cardboard) up to a few days (plastic and stainless steel). However, the amount of viable virus declines over time and may not always be present in sufficient numbers to cause infection.

The incubation period for COVID-19 (i.e. the time between exposure to the virus and onset of symptoms) is currently estimated to be between one and 14 days.2

We know that the virus can be transmitted when people who are infected show symptoms such as coughing. There is also some evidence suggesting that transmission can occur from a person that is infected even two days before showing symptoms; however, uncertainties remain about the effect of transmission by asymptomatic persons.3

Most persons infected with COVID-19 experience mild symptoms and recover. However, some people develop more serious complications and may require hospital care. Risk of serious illness increases with age, for people with weakened immune systems and people with conditions such as diabetes, heart and lung disease.

Preparing Your Organisation and Volunteer Program

Local Voluntary Organisations are community-based organisations and have been for the past weeks responding to COVID-19 and following directions by the Public Health Authorities. During this transition period, and in view of a second wave, organisations are evaluating on the effects of the pandemic on their operation and the virus’ impact on the community, and preparing to return to “normality”. At this stage Volunteer Administrators and Managers of Voluntary Organisations need to start planning ahead for recovery. By planning for recovery, one can help one’s organisation build resilience and empower stakeholders and community members to take actions that improve long-term sustainability.

Managing the Situation

COVID-19 is a situation that no one anticipated and thus no organisation was prepared of the resulting situation. But like any other calamity of such proportion there are four basic steps any organisation should take in case of a natural disaster. In fact in natural disasters one typically plans for the Disaster Management Cycle which consists of four phases of disaster management: Mitigation, Preparedness, Response and Recovery. While the first two could not have been addressed by Voluntary Organisations, together we addressed the response phase. Now comes the crucial phase of them all, Recovery.

The goal of recovery is to return to pre-pandemic operations. Much of recovery planning involves planning for the future. Whether your VO is currently operating at full capacity or only with critical assets, or not at all, your volunteer program can benefit by planning for the transition from response to recovery. Here are five (5) steps Volunteer Administrators and Managers can take to plan for recovery and help mitigate the future impacts of disaster:

4 www.galaxydigital.com/blog/volunteer-management-response-covid19/
1. Anticipate Change

It’s often assumed that “recovery” means returning to a pre-crisis “normal.” However, for many community-based organisations, post-disaster recovery may not be as simple as returning to business as usual. And that’s not necessarily a bad thing. Your adaptations to unprecedented circumstances, no matter how temporary, can define a “new normal.” So, to better plan for recovery, you’ll need to imagine what a sustainable future (post-disaster) looks like for your volunteer program, and your organisation as a whole. Here are some questions to help you anticipate changes to your community’s needs and the way you can adapt your program to these changes:

- What were our program’s core essential services before disaster response?
- Will our community’s needs change following the disaster? How will we reassess these needs?
- Which programs will we deactivate?
- Will our organisation continue pre-disaster programming, or do we anticipate that the community’s long-term needs will evolve?
- Do we have the tools and resources available to meet these long-term community needs?
- What changes to our programming will we need to institute to meet long-term community needs?

Your response to the COVID-19 crisis likely involved short-term adaptations to programming. On the other hand, your recovery should deal in the long-term sustainability of your community programming.

2. Plan for Financial Recovery

COVID-19 has caused major concerns about the economic impact of COVID-19 on voluntary and non-profit organisations across the country. While responding to the crisis in real time is necessary, the core mission and services are still as critical as ever. So what steps can you take today to help recover financially?

a. Gather Materials

Consider the financial resources specific to your program that you will need for recovery. Will you apply for local emergency funding? Will you file an insurance claim? One of the most important ways to plan for recovery is to gather financial materials now.

- Gather program expense reports;
- Track volunteer hours and impact;
- If you plan to rehire furloughed staff, gather salary and benefits information;
- Continue to log all incoming funds and expenses.

b. Calculate Cash Flow

Especially in times of crisis, it is important to understand how much cash your organisation has on hand, and how much you will likely have in the future. Your organisation should have an accurate cash flow projection to predict when cash flow shortages may occur, and to make important decisions about expenses and financing options. The cash flow projection considers cash on hand, expected revenue, and projected expenses.

c. Research Funding Options

You may have to work with other organisation members to put together funding for your volunteer organisation. Remember, one does not have to go it alone. Local and EU funds are available for non-profit organisations and small businesses. For more information visit the MCVS website [www.maltacvs.org](http://www.maltacvs.org) and the Malta Enterprise website [https://covid19.maltaenterprise.com](https://covid19.maltaenterprise.com).

3. Re-engage Partners and Volunteers

Once COVID-19 safety measures are lifted, your volunteers will look for guidance in regards to how to get involved again. Many VOs have adapted new engagement strategies to adhere to social distancing regulations, like expanding phone lines, instituting a newsletter, or posting virtual volunteer opportunities. Consider which volunteer engagement strategies were successful; will you continue to apply these engagement methods throughout recovery? Even now, consider revisiting your engagement strategy. Develop post-crisis messaging to your supporters and make a plan for how you will communicate with...
them effectively. What will future communication with your volunteers look like as COVID-19 becomes a disaster of the past?

Furthermore, you may have developed new partnerships with other community organisations and businesses to aid community response. Consider how you will maintain communications and engage newly established partners. Keep in mind that you may not have the bandwidth to maintain all partnerships. Now is the time to consider your new partnerships and decide which you will maintain. What tools will you use to engage these partners? How do these partners fit into your post-crisis programming?

4. Iron Out Logistics

You may have instituted new infrastructure in an effort to keep your community safe. From enhanced sanitation practices to reduced hours, you will need to think about how these temporary solutions will fit into your usual program infrastructure. You may choose to return to usual operations or you may decide to implement new procedures. Regardless, your volunteer program will benefit by creating a plan for this transition. Here are some logistical considerations:

- How will we demobilize (or “check-out”) response resources for your program?
- What rented/borrowed/purchased equipment will we still need?
- What experts (i.e. accountants, mental health professionals, case managers) should we contact to aid recovery?
- When can volunteers return? How will we update volunteers on new procedures and logistics?
- How will you transition volunteers from their temporary crisis-response roles to their usual roles?
- How will we inform staff, volunteers, and beneficiaries about operational changes?
- Do we foresee any infrastructure redevelopment that will need to occur?

Following a disaster, service-based organisations can encounter a lot of logistical changes. But you don’t need to recover overnight. The more you can plan now, the more you, your staff, volunteers, and beneficiaries will be prepared for recovery. If you are feeling overwhelmed, start by creating a list of all logistics you will need to address as a Volunteer Administrator/Manager. Work with team members, volunteers, and community partners for a brainstorming session. Then, from this list, prioritize the most important or most pressing matters you will need to address first. This will also help you to prioritize your recovery resources, like funds and staff/volunteer time.

5. Evaluate and Mitigate

Following a disaster, you’ll want to evaluate your response and recovery procedures to better mitigate and prepare for future events. This will help to reduce your program’s vulnerability in the event of another disaster or emergency. We have compiled some questions below to help program’s evaluate your response and recovery, to better plan for the future.

Evaluation Considerations for Response and Recovery:

- Which communication procedures worked during our program’s COVID-19 response?
- Which volunteer engagement strategies were most effective? Which volunteer engagement strategies were ineffective?
- Were you able to leverage technology, like volunteer management software, to efficiently manage your volunteer program?
- What partnerships did we successfully leverage during response? Which partnerships will we continue to support?
- Did staff and volunteers feel safe during response? Did staff and volunteers feel supported?
- Did staff and volunteers feel prepared to respond?
- How quickly were we able to respond to our community’s needs?
- Was our program able to avoid mission creep?
General Principles – The Way Forward

Now that VOs are looking towards the way forward, a gradual, steady but most importantly safe recovery, we must coordinate the re-opening of our operation. Mandatory Conditions are issued under the Public Health Act Chapter 465 of the Laws of Malta and related Legal Notices and require strict adherence by all. While failure to adhere to these conditions will result in enforcement procedures as provided by these Act, it may cause the return to closure of the VO operation.

Social (physical) Distancing and Hygiene

Social (physical) distancing aims to reduce physical contact between potentially infected people and healthy people, or between population groups with high rates of transmission and others with low or no level of transmission. The objective of this is to decrease or interrupt the spread of COVID-19.

It is possible that social (physical) distancing measures will have to be implemented over an extended period, and their success depends partially on ensuring that people maintain social contact – from a distance – with friends, family and colleagues. Internet-based communications and the phone are therefore key tools for ensuring a successful physical distancing strategy.

Limiting face-to-face contact with others is the best way to reduce the spread of COVID-19. Social distancing is one of the best tools to avoid exposure. This means keeping space between oneself and other people outside of the home. This document outlines general hygiene principles which VOs should adhere to, as well as the proper use of a facemask. It also summarises what to do in the case of symptoms or suspected cases of COVID-19.

Entry to VO Premises

Voluntary Organisations premises should only permit entry to authorised persons. It is recommended that members and volunteers should ideally pre-book/inform of their attendance to the VO premises either via telephone or online.
1. All individuals present at the premises shall wear facemasks at all times in all parts of the building. Face shields are not acceptable.

2. A log of attendance to the VO premises indicating name, telephone number and time of arrival and departure, which records should be kept for a minimum of four (4) weeks.

3. People cannot meet in groups larger than 10 persons in any part of the premises.

4. It is recommended that temperature checks on all persons is carried out at the entry to venues, and entry will be refused to any individual either displaying or complaining of symptoms, not wearing a facemask, or having a temperature of over 37.2°C.

VO Premises Management

Voluntary Organisations should ensure adherence to Public Health Authorities directives at all times. VOs shall appoint a person responsible for ensuring public health measures in the premises. The measures to be implemented in VO premises are:

1. Appropriate hand sanitizers (minimum 70% alcohol) need to be provided at entry and exit points of the premises;

2. Social distancing should be adhered to. This includes any direction given by PHA in relation to gatherings;

3. Frequent disinfection of surfaces and commonly frequented areas. Disinfecting kills germs on surfaces and by killing germs on a surface after cleaning, it can further lower the risk of spreading infection. Surfaces frequently touched by multiple people, such as door handles, bathroom surfaces, and handrails, should be cleaned with soap and water or another detergent at least daily when facilities are in use. More frequent cleaning and disinfection may be required based on level of use;

4. Masks should not be touched or moved with the hand from outside. Disposable masks should be changed immediately after use and must be disposed of appropriately and hand disinfection must always be performed;

5. Washing of hands is to be encouraged thus facilities for hand washing shall be readily accessible and provided with liquid soap dispensers and paper towel dispensers to guarantee the best level of hygiene.


Social Distancing at the VO Premises

As advised by the Public Health Authorities it is essential that social distancing is practiced in a consistent and effective way in order limit possible spread of COVID-19. For this reason, steps for social distancing in the VO premises include:

- stop shaking hands to greet others;
- do not hold/cancel non-essential meetings;
- hold meetings via video conferencing or phone call;
- do not organise large meetings (more than six persons) and reschedule to a later date;
- hold essential meetings outside in the open air if possible;
- promote good hand, sneeze and cough hygiene;
- provide alcohol-based hand rub for all staff;
- close down the volunteer canteen and locations where large numbers of persons may meet and congregate;
- regularly clean and disinfect surfaces that many people touch;
- open windows or adjust air conditioning for more ventilation;
- avoid food handling and sharing of food.

One must insist that if you can, work from home. If you cannot work from home and you are sick, you must not attend the volunteer premises and must stay at home and away from others.

Make sure your premises are clean and hygienic

To limit and stop the spread of COVID-19 one must give high priority to cleanliness and hygiene, not only of persons but also of objects and furniture in the premises. It is therefore very important that:

- Surfaces (e.g. desks and tables) and objects (e.g. equipment, telephones, keyboards) need to be wiped with disinfectant regularly;
- Promote regular and thorough handwashing by administrators, volunteers, members, contractors, suppliers and visitors. Make sure they have access to places where they can wash their hands with soap and water;
- Place dispensers of sanitizing hand rub (70% alcohol) in prominent places around the workplace, accessible to all workers and customers. Make sure these dispensers are regularly refilled;
- Download and display posters on Covid19 promoting handwashing from www.covid19health.gov.mt;
- Combine this with other communication measures including guidance from occupational health and safety officers;
- Request assistance from Public Health authorities if necessary.

Why? Because hand washing and alcohol sanitization kill the virus on your hands and prevent the spread of COVID-19.

Getting your organisation and premises ready to operate with community spread of COVID-19

When the Public Health Authorities advise Voluntary Organisations will start gradual opening of their premises and their operation. When this opening commences VOs should be vigilant of potential community spread of the COVID-19 within their organisation/premises. For this reason every VO needs to be aware and prepared to act accordingly should a situation of possible persons falling ill.

For this purpose, the VO must:

- Develop a plan of what to do if someone becomes ill with COVID-19 at your premises;
- Identify persons who may be at risk, and support them, without inviting stigma and discrimination into your organisation. This could include pregnant women and persons who have conditions that put them at higher risk of serious illness (e.g. diabetes, heart and lung disease, older age);
- Review your operational procedures and continue to promote regular remote working across your organisation. Remote working will help your organisation continue to operating while your volunteers and clients stay safe. This measure allows you to continue to utilise the skills and competences of vulnerable volunteers/members;
- Treat personal information about individuals’ health carefully, in line with Data Protection legislation (GDPR).

If there is an outbreak of COVID-19 in the VO Premises

Every VO which operates its own premises must develop a contingency plan in case of an outbreak on site. The plan will help prepare your organisation for the possibility of an outbreak of COVID-19.

The plan should:

- Address how to keep any essential work running if a significant number of administrators/volunteers/members cannot come to the place of operation, either because they are on obligatory quarantine or because they are ill;
- Communicate with your volunteers/members about the continuity plan. Make sure they are aware of what they need to do, or not to do, under the plan. Emphasize key points such as the importance of staying away from the premises even if they have only mild symptoms or have had to take simple medications (e.g. paracetamol, ibuprofen) which may mask the symptoms;
- Be sure your plan addresses the mental health and social consequences of a case of COVID-19 in the organisation and offer information and support.

Duties of VO as Employer, Staff and Volunteers

VOs are in some cases also employers and as employers, they are expected to take care of the health, safety and welfare of employees, including themselves, and all other staff, contractors and delivery persons, as well as volunteers. This includes providing and maintaining a work and operational environment that is without risk to health and safety, providing adequate and accessible facilities for the welfare of employees to carry out their work and monitoring the health of workers and the conditions of the workplace for the purpose of preventing illness or injury. Employers must minimise the risk of exposure to COVID-19 of employees and volunteers by taking reasonable and practical measures to mitigate risk.

Protection of employees from the risk of exposure to COVID-19 may include:
• Employees shall wear facemasks at all times in all parts of the building. Facemasks can be removed only if employee is working alone in one's office. Face shields are not acceptable;

• Employees to practice social distancing;
• Employees to practice good hygiene (e.g., through workplace policies and ensuring access to adequate and well stocked hygiene facilities);
• Requiring employees to stay home when sick;
• Cleaning the workplace regularly and thoroughly;
• Implementing working from home arrangements for those aspects of the operation where such arrangements can be applied;
• Training on how to fit and use any necessary personal protective equipment (PPE);
• Training on adequate cleaning practices throughout the day;
• Giving instructions on how to set up a safe home workplace for those working from home, and
• Providing workers with instructions on staying home from work if sick.

Employers have the duty to consult with employees on health and safety matters relating to COVID-19. Employers must give employees the opportunity to express their views and raise their concerns. Employees are most likely to know about the risks of their work thus involving them will help build commitment to any changes that employers need to implement.

Employers must advise workers of the outcome of consultation. Adapting collective accommodation establishments to manage and mitigate the risk of exposure to COVID-19 requires a thorough risk assessment. These guidelines provide considerations that employers must make when deciding on control measures such as restrictions within collective accommodation establishments to allow for social distancing, the adequacy of facilities for proper personal hygiene, cleaning arrangements, working from home arrangements, and other changes that may affect the health and safety of employees. Employers are strongly advised to allow employees to be part of the decision-making process for COVID-19 related matters.
COVID-19 Transitioning – Specific Areas

In this section one may find specific guidelines given by the Public Health Authority which apply in part or in full to Voluntary Organisations, depending on their operations and premises. These guidelines are updated as of 15th June 2020 and shall be regularly reviewed. Any updates issued by the Public Health Authority shall be communicated to the Voluntary Organisations accordingly.

The following obligatory conditions are issued under the Public Health Act Chapter 465 of the Laws of Malta and require strict adherence. Failure to adhere to these conditions will result in enforcement procedures as provided by the Act. As COVID-19 restrictions are gradually relaxed, VO Administrators-Managers and staff/volunteers must work together to adapt and promote safe work practices consistent with advice from public health authorities and to ensure that premises are ready for the social distancing and correct hygiene measures that are critical to the success of the transition. VO Administrators-Managers and staff/volunteers must prevent the transmission of COVID-19 while at work, consistent with updated advice from the public health authorities. VO Administrators-Managers and staff/volunteers must prepare for the possibility that there will be cases of COVID-19 in the workplace and be ready to respond immediately, appropriately, effectively and efficiently, and consistent with specific recommendations from public health authorities.
1. Mandatory conditions to be observed by Museums

The museums and cultural sites shall implement the following measures:

1. Visitors and Employees shall wear facemasks at all times in all parts of the building. Facemasks can be removed only if employee is working alone in one's office. Face shields are not acceptable;
2. Exercise the right of refusal of entry into the museum of visitors if they are visibly unwell or have respiratory symptoms;
3. Ensure that inside the museum every person keeps a minimum distance of 2 metres from others;
4. Ensure that maximum capacity of visitors that the museum can hold at any one time inside the building and in particular exhibitions is one person per 4 square metres, including staff and not more than 10 in a group;
5. Acrylic or tempered glass barriers must be fitted in reception areas (2 metres from the floor). If this is not manned, then this is not required; and;
6. Affix visible signage at the entrance of the museum indicating the maximum capacity that the premises can hold at any one time;
7. Indicate with visible markings outside and inside the museum two (2) metre distances that visitors shall respect whilst queuing;
8. Hand sanitizers must be made available at the entrance of the museum and ensure that all persons sanitise their hands prior to entrance. Sanitizers should also be available in other strategic places (sanitizers with sensors are recommended);
9. Keep all installations (eg. contemporary art) that involve visitor interaction;
10. Ensure that visitors and staff always wear a face mask (covering mouth, nose and chin) or face visor whilst inside the museum;
11. Close the cloakrooms requiring the presence of staff (lockers can remain available if they are disinfected regularly between uses) to avoid unnecessary handling and contact;
12. Ensure that devices such as audio guides that require handling are systematically disinfected;
13. Before and after each use, Disposable headphones are recommended;
14. The distribution of 3-D glasses that are reused by multiple visitors is not allowed; before and after each use;
15. Disposable headphones are recommended;
16. Ensure that all installations (eg. contemporary art) that involve visitor interaction;
17. Disinfected regularly between uses to avoid unnecessary handling and contact;
18. Acrylic or tempered glass barriers must be fitted in reception areas (2 metres from the floor); (If this not manned then this is not required);
19. Indicate with visible markings outside and inside the museum two (2) metre distances that visitors shall respect whilst queuing;
20. Hand sanitizers must be made available at the entrance of the museum and ensure that all persons sanitise their hands prior to entrance. Sanitizers should also be available in other strategic places (sanitizers with sensors are recommended);
21. Keep all installations (eg. contemporary art) that involve visitor interaction;
22. Ensure that visitors and staff always wear a face mask (covering mouth, nose and chin) or face visor whilst inside the museum;
23. Close the cloakrooms requiring the presence of staff (lockers can remain available if they are disinfected regularly between uses) to avoid unnecessary handling and contact;
24. Ensure that devices such as audio guides that require handling are systematically disinfected;
25. Before and after each use.Disposable headphones are recommended;
26. The distribution of 3-D glasses that are reused by multiple visitors is not allowed; before and after each use;
27. Exercise the right of refusal of entry into the museum of visitors if they are visibly unwell or have respiratory symptoms;
28. Ensure that maximum capacity of clients and staff that the gym/fitness centre can hold at any one time is 1 person per 6 square metres, and must not exceed a total of 75 persons. Allow only (1) client and one (1) member of staff in a gym/fitness centre with at total area less than 6 square metres;
29. Ensure that inside the gym/fitness centre every person keeps a minimum of 3 metres from others. Where the machines cannot be separated by 3 metres, alternate machines need to be cordoned off to ensure a minimum 3 metre separation between clients. Alternatively, acrylic screens or tempered glass barriers of at least 2 metre height may be erected between the machines to separate the clients;
30. Affix visible signage at the entrance of the gym/fitness centre indicating the maximum capacity that the facility can hold at any one time;
31. Indicate with visible markings outside and inside the gym two (2) metre distances that clients shall respect whilst queuing or waiting to enter;
32. Provide an appropriate 70% alcohol hand-rub at the entrance of the facility and ensure that all persons sanitise their hands prior to entrance;
33. Acrylic screens or tempered glass barriers must be fitted in reception areas (2 metres high from the floor); (If this not manned then this is not required);
34. Ensure that all gym equipment, changing rooms, toilets and showers are cleaned and disinfected by staff every hour;
35. Ensure that clients and staff always wear a face mask or face visor whilst inside gym/fitness centre when not exercising;
36. Personal trainers doing one-on-one training must have no direct contact with their clients and practice social distancing of 3m must still be maintained;
37. Group sessions must not exceed 8 persons + fitness instructor, and physical distancing of 3m must still be maintained;
38. Personal trainers doing one-on-one training must have no direct contact with their clients and practice social distancing of 3m must still be maintained;
39. Water dispensers are prohibited. All staff and clients should be encouraged to bring their own water;
40. Indicate with visible markings outside and inside the gym two (2) metre distances that clients shall respect whilst queuing or waiting to enter;
41. Provide an appropriate 70% alcohol hand-rub at the entrance of the facility and ensure that all persons sanitise their hands prior to entrance;
42. Acrylic screens or tempered glass barriers must be fitted in reception areas (2 metres high from the floor); (If this not manned then this is not required);
43. Provide an appropriate 70% alcohol cleaning wipes, or 70% alcohol spray and disposable paper towels for use by clients for the cleaning of equipment and mats;
44. Group sessions must not exceed 8 persons + fitness instructor, and physical distancing of 3m must still be maintained;
45. Personal trainers doing one-on-one training must have no direct contact with their clients and practice social distancing of 3m at all times;
46. Water dispensers are prohibited. All staff and clients should be encouraged to bring their own water;
47. Indicate with visible markings outside and inside the gym two (2) metre distances that clients shall respect whilst queuing or waiting to enter;
48. Provide an appropriate 70% alcohol hand-rub at the entrance of the facility and ensure that all persons sanitise their hands prior to entrance;
49. Acrylic screens or tempered glass barriers must be fitted in reception areas (2 metres high from the floor); (If this not manned then this is not required);
50. Provide an appropriate 70% alcohol cleaning wipes, or 70% alcohol spray and disposable paper towels for use by clients for the cleaning of equipment and mats;
51. Group sessions must not exceed 8 persons + fitness instructor, and physical distancing of 3m must still be maintained;
52. Personal trainers doing one-on-one training must have no direct contact with their clients and practice social distancing of 3m must still be maintained;
53. Water dispensers are prohibited. All staff and clients should be encouraged to bring their own water;
14. All clients must bring their own personal towel(s);
15. Keep a list and contact details (name and contact number) of all people accessing the gym premises for 28 days (including trainers, clients, suppliers, maintenance, cleaners).

For detailed information in relation to this area go to:

3. Mandatory conditions to be observed by Bars, Clubs and Similar Establishments

The following standards are issued under the Public Health Act Chapter 465 of the Laws of Malta and require strict adherence.

In COVID-19 transitioning, employers and workers must work together to adapt and promote safe work practices consistent with advice from public health authorities and to ensure that premises are ready for the social distancing and correct hygiene measures that are critical to the success of the transition.

Employers and workers must prevent the transmission of COVID-19 while at work, consistent with updated advice from the public health authorities.

Employers and workers must prepare for the possibility that there will be cases of COVID-19 in the workplace and be ready to respond immediately, appropriately, effectively and efficiently, and consistent with specific recommendations from public health authorities.

Standards to be observed by Bars, Clubs and Similar Establishments including places of entertainment with pre-existing Restaurant Licence.

- In accordance with Legal Notice 337 of 2020, all discotheques and nightclubs shall be closed.
- In accordance with Legal Notice 334 of 2020, bars and clubs (każini) shall only serve food, and drinks with food, and only to customers sitting at tables.

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Bars, Clubs (Kazini) and Similar Establishments are to observe the following obligatory conditions:

1. Exercise the right of refusal of entry into the establishment of customers if they are visibly unwell or have respiratory symptoms including coughing, fever, shortness of breath, runny nose or sore throat.
2. Ensure that maximum capacity of persons, including staff, at indoor establishments at any one time is one person per 6 square metres of accessible floor space in the area used by patrons and one person per 4 square metres of accessible floor space in the area used by patrons in outdoor establishments.
3. Ensure that any gatherings and events held in the establishment follow also the legal provisions, standards and guidance applicable to gatherings and events. In accordance with Legal Notice 338 of 2020 all stand up organised events shall be prohibited.
4. Masks to be worn by patrons when entering establishment and when moving around in common areas to and from seated tables.
5. Establishments may operate on a sit-down at table basis only, with orders taken at table.
6. Customer orders of food and drinks at the bar are not allowed.
7. Sit down tables of up to 10 persons per table when seated.
8. Distance between tables must be kept at a minimum of 2 metres in all directions outdoors and 3 metres in all directions indoors.
9. Areas where patrons tend to congregate (e.g., dance floor, pool tables, karaoke, shisha, etc.) and self-service beverage stations must be closed off.
10. All staff serving the public are to wear mask or visor at all times.
11. Place floor stickers and signage that provide guidance for social distancing.
12. Hand sanitizers must be made available at the entrance.
13. Acrylic or tempered glass barriers must be fitted around the reception area, bar counter and DJ or the singers/band stand (2 metres from the floor).
14. Only low volume music is allowed, such that it does not cause customers to talk loudly or lean towards each other.
15. Shared finger nibbles are prohibited unless each customer can be provided with their own separate portion.
16. Pitchers with multiple straws are not allowed.
17. Patrons are to exercise social distancing when smoking which is only allowed outside.
18. Contact details of 1 person per table should be kept for all groups by date and time of arrival, going back 4 weeks.
19. Management should provide ongoing cleaning and disinfection operations of the establishment, including cleaning of used tables/chairs after each customer.
4. Mandatory Transitioning – Standards for Musicians and Orchestras

The following standards are issued under the Public Health Act Chapter 465 of the Laws of Malta.

Standards to be observed by musicians and orchestras.

All orchestras, bands, musical ensembles and groups of musicians and shall:

1. Advise musicians not to attend for rehearsals or performances if they are experiencing any potential COVID-19 symptoms or have been in close contact with any known cases of COVID-19.
2. Keep records of the contact information (name and a phone number) of individuals attending rehearsals/performances for 28 days after the rehearsal/performance.
3. Provide adequate and easily accessible hand sanitisers with an appropriate 70% alcohol handrub on entry into the area where the rehearsal/performance is being held and ensure that all persons sanitise their hands on entering.
4. Ensure that musicians maintain social distancing throughout rehearsals and performances, whenever possible not playing face-to-face with not more than one (1) musician per four (4) square metres floor area, a distance of at least two (2) metres from each other (two and a half (2.5) metres in case of woodwind instruments), and a distance of at least four (4) metres from the audience.
5. Ensure that musicians avoid physical contact with each other, frequently sanitise their hands and musical instruments, practice respiratory etiquette and avoid touching eyes, nose and mouth with unwashed hands.
6. Where possible, practise and perform outdoors.
7. When practising or performing indoors, spaces utilised must be well-ventilated with fresh air.
8. Ensure that musicians do not share musical equipment, microphones, scores or other documents.
9. Ensure that premises used for rehearsals and performances are regularly and thoroughly cleaned.
10. Ensure that masks/visors are worn by musicians, audience and any other persons in the premises, with the understanding that musicians playing instruments that cannot be played while wearing a mask/visor are exempt from this requirement while playing their instrument (they should still abide by the mask/visor requirement the rest of the time).
11. Ensure the hygiene of their instruments.

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Guidance for the protection of persons who are at a higher risk of developing complications if infected with the COVID19 virus.

Scientific evidence shows that persons within the following groups are at a higher risk of developing complications if infected with the COVID19 virus:

a) persons of sixty-five (65) years of age or over;

b) all pregnant women, especially beyond twenty-eight (28) weeks of pregnancy;

c) persons suffering from chronic illnesses and, or severe medical conditions including:
   a. insulin dependent diabetics;
   b. persons who are immunosuppressed;
   c. persons undergoing any immunosuppressive treatment including but not limited to the use of biological agents and immunomodulators;
   d. persons suffering from cancer who are undergoing chemotherapy;
   e. persons suffering, or who have suffered, from cancer having undergone chemotherapy at any time within the last six (6) months;
   f. persons suffering from haematological cancers;
   g. persons with severe chronic liver disease;
   h. persons with severe chronic renal failure or who are on dialysis;
   i. persons with chronic neurological conditions, such as Parkinson's disease, motor neurone disease, multiple sclerosis (MS) or cerebral palsy;
   d) persons who are admitted to hospital with recurrent episodes (exacerbations) of respiratory problems;
   e) persons who, at any time within the last year, have been admitted to hospital with respiratory problem exacerbations;
   f) persons suffering from cardiac disease who are required to undergo a cardiac intervention or a cardiac surgical procedure;
   g) persons suffering, or who have suffered, from cardiac
disease having undergone a cardiac intervention or a cardiac surgical procedure at any time during the last six (6) months;
h) persons attending a heart failure clinic;
i) persons on regular oral steroids i.e. steroid tablets.

Other medical conditions can put a person at higher risk of complications so if in doubt, discuss your condition with your doctor.

It is strongly recommended that persons at risk of complications from COVID-19 infection get vaccinated against seasonal influenza since they are at higher risk of complications from influenza too.

How is Coronavirus spread?

Coronavirus is spread through droplet infection by means of close contact with an infected person or by touching contaminated surfaces and then touching your nose, eyes or mouth without washing or sanitizing your hands.

The potential for becoming infected is a factor of the viral load, which is the number of viral particles that one may have become exposed and the time of exposure i.e. how long one was exposed to the infective particles.

What is the best way to reduce risk of an essential activity?

Each person at risk of complications from COVID-19 infection needs to make his/her own assessment of what constitutes an essential activity and the risk this entails, by being aware of the ways in which coronavirus can be acquired and by taking all necessary precautions so as to minimize risks. Risk is cumulative, so every additional activity, the number of other persons that you come into contact with and the duration of the contact, increase the total risk.

This guide aims to characterize the risk of several daily activities and provide an estimate of risk for each activity. Guidance on how to make these activities as safe as possible is also provided and based on the following principles:

- Always keep a safe physical distance of 2 metres from others;
- Avoid crowds;
- Always wear a mask when with persons from other households;
- Avoid physical greetings such as handshaking, hugs and kisses;
- Wash your hands regularly with soap and water or a hand sanitizer containing at least 70% alcohol;
- Avoid touching your eyes, nose and mouth.

A. Attending Medical Appointments

You should attend for all medical appointments as scheduled. Some medical appointments can take place by virtual means (over the internet) or over the telephone. If you are required to attend for your appointment in person, make sure that you arrive on time to avoid unnecessary waiting and crowding. Make sure that you keep the appropriate physical distance at all times, carry hand sanitizer with you and use it as frequently as necessary, avoid touching your face and wear a mask covering your nose, mouth and chin.

B. Attending Work

Workplaces and offices should be made safe for persons at risk of complications from COVID19 infection. At all times, staff should practice social distancing from each other, observe and practice hygiene measures and wear masks. For more details, refer to the Guidance for Offices and Workspaces issued by the health authorities. Where the nature of the work is amenable, telework should be encouraged to minimise the number of staff that are physically present at the workplace at any one time. Remote working on a regular basis based on a case-by-case assessment should be considered as an option by the employer where a safe working environment cannot be secured for persons at risk of complications. Caution should be exercised during breaktimes when masks are removed to eat.

C. Visiting retail outlets and making use of personal services

- Good practices such as groceries delivered by the supermarket, local store or a relative or friend / neighbour are to be kept and promoted. Refer to the guidance for Grocery Shopping which can be found on www.covid19health.gov.mt If you go to the shop /supermarket yourself, try to go at a time when it is less busy, and you are likely to encounter less people;
- Take precautions when using public transport or car sharing options using mask, observing hand hygiene and practicing social distancing;
- Always wear a face mask when in contact with groups of people such as during shopping;
- Keep an adequate physical distance from others;
- Do not touch your face or the front, or inside of your mask;
- Keep your hands clean;
- Attend at a time which is likely to be less crowded, stores and services would have had less customers and would likely just have been cleaned;
- Go to shops where the establishment adopts good COVID-19 mitigation measures.

D. Recreational Activity and Sport

Taking part in a recreational activity and doing physical exercise is beneficial for all, particularly for those...
who suffer from chronic illnesses and who are at risk of complications from COVID-19 infection. Going for a brisk walk or a jog depending on your general fitness level, is beneficial. It is important to select a place and a time which is not busy with other persons and you can adequately maintain a safe distance from others.

If you still drive, going for a drive with members of your household is one of the activities which is safe to do. Avoid using the recirculated air option for the vehicle’s ventilation. Operate the AC with ventilation selector on outside air. Typically, this is presented with the following icon.

On long trips either keep windows slightly open or open windows frequently to ventilate with fresh air. There would be a risk, however, if someone else is driving you. You can decrease this risk if you both wear a mask, stay in the backseat and allow for the vehicle to be well ventilated.

E. Social and Family Visits

The safest way to visit relatives is:

- Organising the meeting to take place at the home of the person at risk of complications, preferably in an outdoor area of the house e.g. yard, roof, terrace;
- Limiting the duration of contact;
- Wearing a facemask by everyone, at all times;
- Maintaining an adequate physical distance from your relatives/visitors;
- Limiting the number of visits and number of persons from different households who visit you in a week.

For example, if you have two children do not organise one big family visit, instead meet one family at a time which is different from the visit by the other family.

The larger the number of persons and the more persons from different households you meet, the larger your risk that one of these could be a person who is COVID positive without symptoms.

F. Taking care of young children

It should be the persons at risk of complications from COVID-19 infection who should freely decide to take care of young children if this constitutes essential support to their family. They should not be obliged or feel obliged if they are not comfortable with taking care of young children. Families should understand that taking care of children who come into regular contact with other children does carry an increased risk since children have multiple social contacts in different bubbles at schools, at childcare centres, on school transport, and at extracurricular activities (e.g. sport, ballet, MUSEUM etc).

Taking care regularly of young children can be done safer if persons at risk of complications:

- form a support bubble with ONLY ONE other household. All those in a support bubble can spend time together inside each other’s homes. You should only form a support bubble with one other household. Once formed, you should not change the members of the support bubble;
- limit the risk from exposure to young children by reducing contact time as much as possible, by following strict general, respiratory and hand hygiene principles, by wearing a mask or a mask and visor at all times, by respecting social distancing whenever possible and by avoiding all contact if there are symptoms of possible infection.

Evaluation of various other activities

A number of criteria need to be considered when carrying an evaluation of each activity. These include the following:

- Typical distance between persons during this activity;
- Whether the activity takes place indoors or outdoors;
- Length of exposure for this activity;
- The degree of physical contact;
- Typical social contact time - the typical contact one has with other persons per hour of activity;
- Potential for creation of droplets or sprays;
- Contact with persons who have travelled from countries with high rates of transmission;
- The mitigation measures which could be implemented to minimize possibility of transmission of coronavirus.

As shown in Annex 1, several activities were ranked according to level of risk to the individual and presume that recommended mitigating measures are implemented to reduce the risk for each activity. Mitigating measures are the measures which decrease transmission such as the adoption of specific minimum distances between restaurant tables, enhanced cleaning of frequently touched areas, strict appointment system (e.g. at hairdressers and beauticians) and the appropriate wearing of face masks amongst others.

Mitigation factors for each activity have been included in the guidance for several activities which can be found on www.covid19health.gov.mt

It must be pointed out that the activities in Annex 1 are ranked with respect to the persons who are at risk of complications from COVID-19 infection, and not from a general population perspective. This illustration provides a quick guidance for persons at risk from COVID-19 infections when evaluating different options for activities that they wish to perform or join.
IMPORTANT POINTS

- Get vaccinated against seasonal influenza;
- Have your groceries/goods delivered ideally;
- Discuss with your employer whether all or part of your duties can be carried out from home;
- When at the workplace you are to adhere to physical distancing measures, adequate hand hygiene, and use of mask when not with persons from the same household;
- Attend for your medical appointments with a face mask and carry and use hand sanitizer;
- Maintaining good general, respiratory and hand hygiene and an adequate physical distance from others are the most important factors to protect yourself from infection;
- There is a cumulative risk of exposure;
- If you develop any symptoms of COVID call 111 for further guidance;
- For further information regarding mitigation measures of a variety of activities please go to www.covid19health.gov.mt

ANNEX 1

Your risk of infection increases with the number of times and duration you carry out the activities below. Assess your needs and keep non-essential activities to a minimum.

Use face masks at all times when not with persons from the same household.

Lowest Risk
- Staying at home
- Travelling on the Gozo ferry
- Outdoor walks in open country sides/areas
- Visiting shops/retail outlets/lotto booths
- Going to shopping malls
- Visiting museums and exhibitions
- Going to an outdoor cinema
- Going to an open-air theatre
- Attending outdoor mass
- Outdoor public/hotel pools
- Visiting open-air markets
- Hotels/B&Bs/Self-catering facilities
- Using personal services e.g. nail technicians, beauticians, hairdressers
- Outdoor restaurants and cafeterias
- Individual outdoors exercise in a sports venue
- Social/Family visits
- Going to beaches
- Using indoor public or hotel pools
- Going to indoor restaurants and cafeterias
- Contact with people attending childcare centres and kindergarten
- Contact with people attending schools and educational institutions
- Attending indoor mass
- Using facilities in gaming and betting shops
- Gymnasiums
- Using facilities in bingo halls (Tombola)
- Casinos
- Going to a bar
- Going to snack bars and clubs (Kazin/I)
- Travelling abroad
- Night clubs/Discotheques
- Attending organised public events (e.g. festa or other mass events)

Highest Risk
Guidelines for Voluntary Organisations re-COVID-19

References

   Available from http://health.gov.mt


The below list of Measures and Guidelines can be found in the following link:

List of Measures and Guidelines

Mandatory Measures:
- Standards for Musicians and Orchestras (October 2020)
- Standards on Use of Face Masks and Visors (October 2020)
- Obligatory Conditions and Guidelines for Bars, Clubs and similar establishments (05th June 2020)
- Obligatory Conditions and Guidelines for Gymnasiums and Fitness Centres (04th June 2020)
- Obligatory Conditions and Guidelines for Museums and other Cultural Places (02nd June 2020)
- Obligatory Conditions and Guidelines for Hairdressers and Barbers (04th June 2020)
- Obligatory Conditions and Guidelines for Nail Technicians and Nail Artists (04th June 2020)
- Obligatory Conditions and Guidelines for Massage Services (04th June 2020)
- Obligatory Conditions and Guidelines for Chinese Medicine and Acupuncture (02nd June 2020)
- Obligatory Conditions and Guidelines for Indoor Cinemas and Theatres (02nd June 2020)
- Obligatory Conditions and Guidelines for Tattoo Artists Studios (02nd June 2020)
- Registered Indoor Swimming Pools and Indoor Entertainment Areas Checklist (02nd June 2020)

Guidelines for Return to Sport (21st May 2020)

Updated Measures:
- Mitigation Measures Retail Outlets and Lotto Booths (02nd June 2020)
- Mitigation Measures Passenger or Service Provider Conditions When Using Public Transport Services

Guidance Documents:
- Guidance on Workplaces
- Guidelines for Childcare Centres (June 2020)

Guidance for Offices and Workspaces (June 2020)
Guidance on How to Protect Yourself and Others
Ten Tips to Protect You and Your Family from Contracting COVID-19 (April 2020)
Guidance on the Use of Face Masks for Decreasing COVID-19 Virus Transmission (May 2020)
Guidance on Hand Washing and Use of Gloves (April 2020)
Guidance on Hand Sanitisers (from MCCAA) (March 2020)

   Available from https://www.who.int/emergencies/diseases/novelcoronavirus-2019


Disclaimer
These guidelines are updated as on 29th October 2020 and shall be regularly reviewed.
Any updated issue by the Public Health Authority (PHA) shall be communicated to the Voluntary Organisations accordingly.