Frequently Asked Questions for WBG/IMF Contractors in HQ

This document has been produced to provide guidance to contracting staff working within Washington, DC, Headquarters (HQ), in relation to the current COVID-19 situation.

Vaccinations

Where will I be able to get an approved COVID-19 vaccine?

In the U.S., all adults and children 12 and older are currently eligible to receive COVID-19 vaccines. To find a vaccine location, visit Vaccines.gov or visit the local health departments of DC, Maryland, and Virginia for the latest information.

- District of Columbia Department of Health
- Maryland Department of Health
- Virginia Department of Health

Should I get vaccinated against the flu this year?

Yes. Flu vaccination is recommended each year during flu season for everyone 6 months and older, with some rare exceptions. This year in particular, as COVID-19 causes symptoms that may be similar to the flu, it is especially important to follow these recommendations. This will help protect you against the flu and prevent potential avoidable visits to medical providers where you may be presumed to have COVID-19. Getting the flu vaccine will also help limit the impact on potentially scarce health care resources.

In the northern hemisphere, the flu season runs from October through March, and in the southern hemisphere it runs from April through September. In tropical and sub-tropical regions, flu may spread year-round. You should check with your doctor about getting the flu vaccine during flu season where you are living. In the U.S. and other northern hemisphere countries, the flu vaccine is usually available in October, but may be received in September if available. In southern hemisphere countries the flu vaccine is available in April.

At HQ: To receive the flu vaccine, visit your closest pharmacy that offers vaccination. Many locations offer the vaccine on a walk-in or appointment basis, such as CVS pharmacies or Minute Clinics, as well as others. You may also visit your primary care provider.

Should I get a pneumococcal vaccine or vaccines against any other diseases?

While COVID-19 is known to cause atypical pneumonia in some patients with moderate to severe illness, existing pneumococcal vaccines do not prevent this type of pneumonia. Pneumococcal vaccines protect against pneumonia caused by Streptococcus pneumoniae bacteria, which is only one of several causes of pneumonia. Typically, children younger than 2 years old and adults age 65 and older get vaccinated against pneumonia. Some adults with underlying chronic health problems or who are smokers may also receive the pneumococcal vaccine, if recommended by their doctor. You should check with your doctor if you fall into one of these categories.
It is always important to receive standard recommended vaccinations according to your country’s vaccination schedule. If you think you have missed vaccines for diseases such as measles, polio, tetanus, meningitis, or hepatitis A or B, or others, talk to your doctor about getting vaccinated. These are important tools in preventing illness.

Masks & Cloth Face Coverings

**When should I use a facemask and which type?**

The WHO, U.S. CDC, and other national health authorities recommend wearing masks to prevent transmission of the SARS-CoV-2 virus that causes COVID-19. This applies to both unvaccinated AND vaccinated individuals in areas with substantial or high transmission. Proper use of facemasks can help prevent the spread of COVID-19. A significant amount of COVID-19 transmission occurs when people have no symptoms. Facemasks limit the droplets and aerosol particles being exhaled into the environment from someone potentially infected. When properly worn, a mask also protects the person wearing it from others’ respiratory droplets and aerosols.

**NOTE:** Health authorities in some countries have either required or recommended medical grade masks for better filtration. Where recommended or required by local authorities, staff should follow those guidelines.

**HSD reminds staff that protection provided by a mask depends on both filtration and fit.** While medical grade N95 masks may provide a higher filtration, they will not provide improved protection if they do not fit well.

**Tips on Fit:**

To be effective, a mask must be worn over the mouth and nose.

If you have a mask with a nose wire, mold the wire to your nose bridge to close gaps.

Improve the fit of a disposable mask and eliminate the side gap by knotting the ear loops near the mask and tucking in the side of the mask for a close fit.

Two ways to check for fit:

- Exhale while feeling for airflow out the sides, top, & bottom of the mask with your hands.
- When you inhale, the mask should collapse toward your face, indicating no air being pulled in through the edges of the mask.

**Tips on Filtration:**

A mask should be at least 2 layers thick

- Disposable masks are often made with 3-5 layers of fused material
• Cloth masks should be made with at least 2 layers of tightly woven breathable material. Check this by seeing if the fabric blocks light when held up to a bright light.

When using a face covering or mask of any kind, it is essential to also use other measures to prevent spread of disease, avoiding the "3 Cs":

• **Close contact** with others (stay at least 2 meters/6 feet away from others who are not in your household),

• **Crowded places**, and

• **Closed spaces** with poor ventilation.

Also remember to avoid touching your face and wash your hands frequently with soap and water.

**Cloth and disposable masks**

**Use:** For the general public when outside the home, especially when undertaking activities where a distance of 2 meters/6 feet or more from others cannot always be maintained, such as when using public transport, in shops, or in other confined or crowded environments. They should also be used when caring for someone sick with COVID-19 in your home, or by someone who is sick with COVID-19 and is being cared for by family or household members.

**Purpose:** To help prevent spread of infection from you to others, and from others to you. Because a significant amount of transmission occurs when people do not (yet) have symptoms, it is important to wear a mask anytime outside your household.


**Specifications:** There are many different varieties of cloth and disposable masks. They should cover the nose and mouth and fit well without gaps. You should feel no air flow through or out the sides, top, or bottom of the mask. Cloth masks should be at least 2 layers to be effective, should not be "see through", and should have ear straps or head straps / ties in order to ensure a good fit.

**Medical masks / N95 respirators**

**Use:** For healthcare workers caring for patients ill with COVID-19.

**Purpose:** To protect themselves from illness transmitted by sick patient. N95 masks require specific training and fit testing to be used effectively and should be reserved for healthcare workers.

Some national and local health authorities require people to wear face coverings or masks in public places and may enforce this. You should follow local requirements in such locations.
Will mask wearing be required while in WBG buildings/offices?

Yes, for all entrants to WBG HQ buildings during Tiers 2 and 1 face masks are required except when working in an individual office alone with the door closed. This is following HSD’s review of updated guidance (CDC and DC Public Health) that all individuals, including those who are vaccinated, should wear masks in indoor settings.

Finding a Healthcare Provider/COVID-19 Testing

**Washington, DC, Area**

**Finding a Healthcare Provider**

You can consider alternative healthcare providers in the Washington, DC, Virginia, or Maryland areas. Please call before arrival:

- MedStar urgent care/prompt care (DC and Maryland) – see [MedStar locations](https://medstar.net) (select specifically for MedStar prompt care/urgent care)
- GW Medical Faculty Associates (DC) – [Immediate and Primary Care](https://www.gwmed.org/)
- [Virginia Hospital Center in Arlington](https://www.vhca.org)
- INOVA Hospitals located throughout Fairfax County: [Fairfax](https://www.inova.org/fairfax), [Alexandria](https://www.inova.org/alexandria), and [Fair Oaks](https://www.inova.org/fair-oaks) as well as [INOVA urgent care centers](https://www.inova.org/urgent-care)

**COVID-19 Testing**

- For information on testing in DC, visit: [https://coronavirus.dc.gov/testing](https://coronavirus.dc.gov/testing).
- For testing information in Maryland, visit: [https://coronavirus.maryland.gov/pages/symptoms-testing](https://coronavirus.maryland.gov/pages/symptoms-testing).

**Note:** Testing for COVID-19 is based on the doctor's clinical assessment and may not be done if you do not have symptoms, depending on your locality.

The CDC has also created a [coronavirus self-checker tool](https://www.cdc.gov/coronavirus/self-checker) which can help you make decisions. This tool is only intended for use by people currently in the United States.

Remember, in an emergency, first dial 911.

**Can I be tested to see if I am immune to COVID-19?**

Tests for COVID-19 antibodies (which may be an indicator of past infection) are available on the market, however they have varying accuracy and reliability. Even those tests which are validated may have a high rate of false positive or false negative results, meaning they cannot
accurately tell you if you were infected with COVID-19 in the past or are immune to COVID-19. Antibody testing is also not currently recommended to assess for immunity to COVID-19 following COVID-19 vaccination or to assess the need for vaccination in an unvaccinated person.

A positive result from an antibody test does not mean you have a specific amount of immunity to COVID-19, and a negative test (showing no antibodies) after vaccination does not mean you do not have immunity. Since vaccines induce antibodies to specific viral protein targets, post-vaccination antibody test results will be negative in those who have not been infected with COVID-19 if the test used does not detect the specific antibodies induced by the vaccine. See the U.S. CDC guidelines for antibody testing for more information.

I am Sick

What should I do if I have COVID-19?

Stay home and away from others. Your actions make a difference in limiting the spread of illness. Get rest and stay hydrated. Talk to your doctor to discuss your symptoms and to see whether you should be tested or need specific treatment.

Use good hygiene to prevent spreading your illness to others. Isolate yourself from other members of your household to the degree possible, sleeping in a separate bedroom and using a separate bathroom if available. Wear a mask around other household members and maintain at least a 2 meter/6 foot distance. Have your household members wear a mask any time they may need to be around you as well. Limit the time you spend in any common areas or around others in your home, even when maintaining physical distance and masking. Clean any high touch surfaces frequently.

If you or any household member that is ill has severe symptoms of illness, including emergency warning signs for COVID-19 such as trouble breathing, persistent pain or pressure in your chest, bluish lips or face, or new confusion or difficulty being woken, seek emergency medical care right away.

If symptoms of illness are not severe, but you need to seek medical care:

- Contact your healthcare provider by phone.
- If you need a healthcare provider, see "Finding a Healthcare Provider / COVID-19 Testing."
- If you must go out to receive medical care, wear a mask.
- In addition, please see the CDC's guidance here.

When can I be around others or return to the office after being diagnosed or ill with COVID-19?

People (who are not immunocompromised*) who have been diagnosed with COVID-19 can be around others / return to the office when:
• **If they were ill with symptoms:** A minimum of 10 days has passed since the first symptoms of illness, plus another 3 days after the end of respiratory symptoms and fever (other symptoms such as fatigue or lack of ability to smell may last longer and do not indicate infectiousness to others).

• **If they were asymptomatic:** A minimum of 10 days after testing positive.

*If you are immunocompromised, confirm with your doctor when it is safe to be around others.

It is not necessary to be retested for COVID-19 if meeting the above criteria.

**Reminder:** Anyone who has been in contact with someone diagnosed with COVID-19 should quarantine for 14 days after the last contact with the individual. In the case of family/household contacts of ill individuals, those non-ill individuals should quarantine for 14 days after their household contact is no longer infectious per the above parameters.

**I am not Sick**

**What should I do if I have had close contact with a confirmed or probable COVID-19 case?**

If you know that have you been in close contact* with someone confirmed to have COVID-19, or who was declared a probable case, you should self-quarantine (stay at home) and avoid contact with others for a period of 14 days from the last known contact with the ill person. If you develop symptoms or are tested for COVID-19, contact HSD. Your confidentiality will be respected.

If living with someone who is sick with COVID-19, do not go to work and avoid contact with others. **Follow instructions for minimizing your exposure outlined by the U.S. CDC.** Local public health authorities should give you guidance on when you will be able to end your self-isolation.

*While data to precisely define "close contact" is limited, the U.S. CDC has updated its definition to mean being within 2 meters/6 feet of an infected individual for 15 cumulative minutes over a 24 hour period (this may include multiple short contacts that add up to 15 minutes). This expansion of the definition (from 15 consecutive minutes of contact) is based on new data, meaning that multiple short contacts that add up to 15 minutes or more may pose a risk for transmission.

**About COVID-19**

**How does COVID-19 spread?**

COVID-19 spreads from person-to-person through respiratory particles that are exhaled when an infected person coughs, sneezes, talks, sings, or breathes. This happens most directly when someone is in close contact with an infected person (within 2 meters/6 feet). But in some cases, it may happen at further distances with particles that are airborne. This airborne or aerosol transmission may mean that you can get COVID-19 even when not in close contact
with someone, particularly if you are in a poorly ventilated space, among crowds, and if not wearing a face mask. Please see WHO and CDC information on how COVID-19 spreads.

It is important to be aware that the virus can be spread by people that have NO symptoms. In a study published by JAMA (The Journal of the American Medical Association), over 50% of transmission of COVID-19 may be from individuals who are asymptomatic (either pre-symptomatic or who never develop symptoms).

The virus may spread by touching surfaces where respiratory droplets from infected people have landed, but this is more likely to happen in locations such as medical facilities or when taking care of a COVID-19 patient at home. If you touch a surface and then touch your nose, mouth or eyes without washing your hands, you may infect yourself. Therefore, it is important to not touch your face, and to wash your hands thoroughly for 20 seconds with soap and water after you have been in a public place or if you have been around someone who is sick.

Since COVID-19 can be spread by people who have no symptoms and newer variants spread more easily than the original SARS CoV-2 strain, it is important to wear a mask whenever you are in close contact, crowded conditions, even if you are vaccinated.

The best protection against any transmission of SARS CoV-2 is getting vaccinated when possible, proper distancing of at least 2 meters/6 feet from others who are not part of your household, wearing a mask or face covering when leaving home, and following these guidelines:

- Avoid the "3 Cs": crowded places, close contact settings, confined and enclosed spaces such as bars, restaurants, places of worship, gyms, waiting rooms, etc.
- Outdoors is better than indoors.
- Fresh air/open windows are safer than recirculated air.
- Proper filtration in ventilation systems is important.
- In indoor environments, spacing, number of people, time spent indoors, and type of activities can affect the risk level (i.e. gyms where people are breathing heavily are riskier than an office where proper distancing is maintained).

**What are the symptoms?**

- Fever (38.0 C/100.4 F or higher)
- Cough
- Difficulty breathing
- Fatigue
- Chills
- Repeated shaking with chills
- Muscle pain
• Headache
• Sore throat
• New loss of taste or smell

Other symptoms such as diarrhea or nasal congestion may also be present. Symptoms may be mild to severe and can appear from 1 to 14 days after exposure. If you or anyone you know experiences any of the following signs or symptoms while infected with COVID-19, seek emergency medical care right away: trouble breathing, persistent chest pressure or pain, new confusion, inability to stay awake, bluish lips or face.

How do I prevent myself and others from becoming infected?

• Get vaccinated against COVID-19 when you have the opportunity.
• Maintain physical distance of at least 2 meters/6 feet from all individuals who are not part of your household.
• Wear a mask or face covering outside of your home when you may encounter other non-household members (outdoors and indoors). A mask should be worn in any indoor setting where there are others around, EVEN IF maintaining a 2 meter/6-foot distance.
• Avoid crowded areas, close contact settings, and confined or enclosed spaces with poor air circulation. Do not host or participate in any large gatherings.
• Wash your hands frequently with soap and water for 20 seconds, especially when returning from any public setting, before eating, and before touching your mouth, nose, or eyes. If no soap is available use an alcohol-based hand sanitizer.
• When coughing and sneezing, do NOT remove your mask (if you are outside of your home).
• If you are exposed to someone known or suspected to have COVID-19, and are not fully vaccinated, you should self-quarantine for 14 days after the last known contact and monitor your health for symptoms of COVID-19. This self-quarantine period should include limiting contact with other household members (sleeping in a separate bedroom, if possible, and wearing a mask around others in your household). According to the U.S. CDC, If you are fully vaccinated, you do not need to quarantine unless you have symptoms.
• If you were in a situation with high risk of COVID-19 transmission (such as a large gathering), monitor yourself for 14 days to see if you develop symptoms and follow distancing and masking precautions. If the gathering you attended has confirmed COVID-19 cases, discuss with your doctor whether you were exposed and whether you need to quarantine for 14 days and be tested.

Practice prudent social distancing measures:

• Avoid visiting elderly or vulnerable people if you and they are not vaccinated.
• Have your children practice social distancing if they are too young to be vaccinated or if they are not vaccinated. They should maintain at least 2 meters/6 feet from other unvaccinated children, especially in indoor settings, and wear a mask if indoors or in outdoor areas where they cannot maintain a distance from others. Cases in children can be asymptomatic, and you may not know if your child or someone else’s child has COVID-19.

• If restaurants are open, do not dine indoors if you are not vaccinated.

• Do not attend or host gatherings among unvaccinated individuals.

• Go shopping only for essential items. Visit the grocery store at off-peak periods or when it is quieter.

• Minimize use of public transportation if you can for those who are unvaccinated and where crowding is present. If you need to use public transportation, use during off-peak times. Avoid being in cars/buses with lots of people. If you are able, use a private car.

What if I have a chronic medical condition and may be at a higher risk for illness from COVID-19?

Certain individuals are at higher risk of severe illness from COVID-19. Those who are at higher risk should get vaccinated against COVID-19 as soon as they are able. That includes older adults (risk increases with age) and those with certain medical conditions:

• Cancer;
• Chronic kidney disease;
• Chronic obstructive pulmonary disease (COPD);
• Serious heart conditions (such as heart failure, coronary artery disease, or cardiomyopathies);
• People who are immunocompromised from blood, bone marrow or solid organ transplants; immunodeficiencies; HIV with a low CD4 count (an indicator of immune function in patients living with HIV) or not on HIV treatment; prolonged use of corticosteroids; or use of other immune weakening medicines;
• Overweight (defined as a body mass index (BMI) of > 25kg/m2 but < 30kg/m2), obesity (BMI ≥30 kg/m2 but < 40 kg/m2), or severe obesity (BMI of ≥40kg/m2), with the risk of severe COVID-19 illness increasing sharply with elevated BMI;
• Pregnancy;
• Sickle cell disease;
• Smoking;
• Type 2 diabetes.
There are certain other medical conditions that may increase the risk of severe illness, but data are still limited. These conditions include asthma, high blood pressure, chronic liver disease, type 1 diabetes, and other conditions. See the full list here.

For those who are at higher risk, ensure that you have enough of any prescription medications you take, and strictly follow social distancing and masking guidelines. Stay in touch with your doctor to ensure that your underlying medical condition is closely monitored. If you get sick, do not delay in seeking medical care.

Is it safe to gather with my family or community for celebrations or other events?

The U.S. CDC advises that individuals who are fully vaccinated may resume activities that they did prior to the pandemic, but should wear a mask indoors in areas with substantial or high transmission (substantial transmission is defined by 50 new cases per 100,000 people in the last 7 days and high transmission is 100 new cases per 100,000 in the last 7 days).

When in a situation where there will be a mixed group of vaccinated and unvaccinated individuals, those who are unvaccinated should continue to maintain distance and wear a mask, and even vaccinated individuals may want to do so depending on the size and location (outdoors or indoors) of the gathering. Also keep in mind the need to protect children who are still too young to be vaccinated and who should continue masking and distancing. Because it is not yet clear to what degree vaccination prevents someone from spreading COVID-19 to others if infected, vaccinated parents of young unvaccinated children should consider carefully in what situations they may want to use a mask.

If you or any of the participants in a gathering become ill with symptoms of COVID-19 (fever, cough, shortness of breath, tiredness, aches and pains, nasal congestion, runny nose, sore throat or diarrhea) after the gathering, any unvaccinated individual who was in contact with or around that person in the 2 days before symptoms started needs to self-quarantine for a period of 14 days from their last contact with that person. Those who are vaccinated and were exposed should get tested 3 to 5 days after exposure and wear a mask in public indoor setting for 14 days or until they receive a negative test, and monitor themselves for symptoms. If they become symptomatic, they should quarantine.

Travel

Are there specific testing requirements before traveling?

Many countries require a negative COVID-19 test for entry. The U.S. requires that all passengers traveling from overseas show a negative viral test taken no more than 3 days before their flight. For those recently ill with COVID-19 (within the last 90 days), they must show documentation of recovery: a copy of previous positive viral test results and a letter from their healthcare provider or a public health official that states they have been cleared for travel or cleared to end isolation.

You should check the testing requirements before travel with the health authorities of the destination country or location. Here is one location where you can find international travel restrictions: IATA Travel Regulations Map.
WBG Building Access and Screening

Are there office occupancy restrictions in World Bank Group buildings?

Yes. The WBG has established clear building occupancy levels in its Office Reopening Framework taking into account considerations for returning to work issued by the Center for Disease Control (CDC), including practicing everyday preventive actions like minimizing interaction with people and social distance in shared spaces when physical presence is required. Contractors must work with their WBG Contract Manager to determine staffing needs and access to WBG premises.

Is advance clearance required to access WBG buildings?

Yes. Access to buildings by contractor employees must be cleared by the WBG prior to the intended access date. Contractors must work with their WBG Contract Manager to determine access needs for WBG premises.

Are contractors required to provide their employees with Personal Protective Equipment (PPE) to access and perform services on WBG premises?

Yes. All people must use face coverings (cloth or disposable) while in WBG buildings. These should cover the nose and mouth and fit well without gaps. All PPE, including the provision of masks, is the responsibility of the contractor to provide to their employees. Access will not be granted if masks are not used.

Contractors must work with their WBG Contract Manager to determine if additional PPE is required for specific tasks (e.g., gloves, safety goggles).

Will health screenings be performed prior to entry?

Yes. All people who need to enter any WBG building must first go to a screening location to conduct a two-step health screening: completion of a self-assessment questionnaire on health and travel (internationally and domestically) by the individual followed by a non-touch temperature screening.

This health screening will be required to gain access to any WBG building at any time. Upon successful completion of the health screening, a colored wristband will be provided and needs to be worn by the person to be allowed access to WBG buildings.

Where are the health screening locations?

The following are the designated screening locations and hours of operation in HQ:

- MC Main entrance 1818 H St, NW (M-F) 5am to 7pm – [6am to 10am on Saturdays]
- MC Parking garage G St NW garage entrance (M-F) 5am to 5pm
- C Lobby entrance 1225 Connecticut Ave, NW (M-F) 6am to 6pm
- F Building lobby 2121 Pennsylvania Ave, NW (M-F) 6am to 6pm
• F Building garage 21St St NW entrance (M-F) 5am to 12 noon

For after-hours access, individuals should proceed to the building's entrance security checkpoint for screening. Times and locations of screening are subject to change.

**Will personal information be collected as part of the health screening?**

The WBG will be collecting personal data (name and employee ID number) only in situations where the temperature screening is failed. The information will be collected in a paper form that is placed into a confidential sealed envelope by the screener. The individual's information is flagged in WBG systems as a result of the temperature screening result. Paper forms are securely destroyed after systems are updated and internal notifications are in place. Personal data on paper forms will be retained by the WBG for no more than 24 hours and in WBG systems for at least 14 days.

**What will happen if a risk is identified in an individual's health screening questionnaire?**

If a risk is identified in the health screening questionnaire, that person will be denied entry into WBG buildings. Contractor employees should notify their employer of the denied access to the premises. The contractor will also be given a document with recommended next steps.

If the contractor employee has failed the questionnaire due to travel, contact or other restrictions, they are advised to wait the appropriate period before attempting re-entry. (e.g., if they traveled out of state 10 days prior, then they would need to wait for 4 days to meet the 14-day requirement regarding travel.)

Contractors must work with their WBG Contract Manager to determine if the provision of a substitute resource is required.

**What will happen if the individual fails the temperature (fever) screening test?**

Any person who fails the temperature screening due to an elevated temperature (more than 100.4°F or 38°C) will be denied entry to the building for a period of 14 days and should notify the employer of the denied access into WBG premises.

The building access denial will be in effect for 14 days starting from the date the health screening was failed, unless a medical clearance is provided through the contractor.

Contractors are encouraged to consult a healthcare provider if they are experiencing symptoms or are concerned about being infected with COVID-19.

Contractors must work with their WBG Contract Manager to determine if the provision of a substitute resource is required.

**What happens if a contractor tests positive to COVID-19?**

Should a contractor that has been inside a WBG building test positive for COVID-19, the WBG requests that the person informs their employer. The Contract Manager will work with the Health & Safety Directorate (HSD) to determine the appropriate course of action. The
contractor will need a doctor’s note providing medical clearance prior to returning to work on WBG premises.

**What happens if a contractor comes in contact with someone who is suspected of or who has been diagnosed with COVID-19?**

Should a contractor become aware that they have been in contact with someone who is suspected of or who has been diagnosed with COVID-19, they would fail the entry screening questionnaire and will be denied entry into WBG buildings. Contractor employees should notify their employer of the denied access to the premises.

Contractors must work with their WBG Contract Manager to determine if the provision of a substitute resource is required.

**Working Arrangements**

**What protocols should contractors follow while on WBG premises?**

Contractors must follow standard protocols of distance and hygiene, including maintaining social distancing (6-foot or 2-meter distance) at all times and frequently washing hands with soap and water. This requirement will be reinforced by office signage detailing symptoms and the importance of staying home if unwell.

Contractors must use face coverings (cloth or disposable) while in WBG buildings. These should cover the nose and mouth and fit well without gaps.

Contractors that will be working in occupied spaces will need to be prepared with hand and equipment sanitizing materials. For contractors that utilize carts to transport their equipment, tools and supplies, it is recommended that they include a sanitizing station on the cart.

Contractors must work with their WBG Contract Manager to understand any specific protocols their employees are to follow while on WBG premises, such as rotating teams, staggering lunch breaks, etc.

**What happens in a contractor feels sick with symptoms of fever and/or respiratory illness while on WBG premises?**

Should a contractor feel sick with symptoms of fever and/or respiratory illness while inside WBG premises, they should notify their employer immediately, prepare their belongings to go home avoiding contact with others and initiate self-isolation. They should also be encouraged to contact their healthcare provider for advice.

The Contract Manager will work with the Health & Safety Directorate (HSD) to determine the need for the contractor to undertake a risk assessment.