



# SLOVENSKI STANDARD

## oSIST ISO/DIS 45006:2023

01-junij-2023

---

**Sistem vodenja varnosti in zdravja pri delu - Smernice organizacijam za preprečevanje in obvladovanje nalezljivih bolezni**

Occupational health and safety management - Guidelines for organizations on preventing and managing infectious diseases

iTeh STANDARD PREVIEW  
(standards.iteh.ai)

Management de la santé et de la sécurité au travail — Lignes directrices sur la prévention et la prise en charge des maladies infectieuses destinées aux organismes

<https://standards.iteh.ai/catalog/standards/sist/9b993eee-de6f-4079-91db-610847316f62/osist-iso-dis-45006-2023>

**Ta slovenski standard je istoveten z: ISO/DIS 45006**

---

**ICS:**

13.100	Varnost pri delu. Industrijska higiena	Occupational safety. Industrial hygiene
--------	--	---

**oSIST ISO/DIS 45006:2023**

**en**



# DRAFT INTERNATIONAL STANDARD

## ISO/DIS 45006

ISO/TC 283

Secretariat: BSI

Voting begins on:  
2022-10-25Voting terminates on:  
2023-01-17

---

---

## Occupational health and safety management — Guidelines for organizations on preventing and managing infectious diseases

ICS: ISO ics

iTeh STANDARD PREVIEW  
(standards.iteh.ai)

[oSIST ISO/DIS 45006:2023](https://standards.iteh.ai/catalog/standards/sist/9b993cee-de6f-4079-91db-849984781605/osist-iso-dis-45006-2023)

<https://standards.iteh.ai/catalog/standards/sist/9b993cee-de6f-4079-91db-849984781605/osist-iso-dis-45006-2023>

THIS DOCUMENT IS A DRAFT CIRCULATED FOR COMMENT AND APPROVAL. IT IS THEREFORE SUBJECT TO CHANGE AND MAY NOT BE REFERRED TO AS AN INTERNATIONAL STANDARD UNTIL PUBLISHED AS SUCH.

IN ADDITION TO THEIR EVALUATION AS BEING ACCEPTABLE FOR INDUSTRIAL, TECHNOLOGICAL, COMMERCIAL AND USER PURPOSES, DRAFT INTERNATIONAL STANDARDS MAY ON OCCASION HAVE TO BE CONSIDERED IN THE LIGHT OF THEIR POTENTIAL TO BECOME STANDARDS TO WHICH REFERENCE MAY BE MADE IN NATIONAL REGULATIONS.

RECIPIENTS OF THIS DRAFT ARE INVITED TO SUBMIT, WITH THEIR COMMENTS, NOTIFICATION OF ANY RELEVANT PATENT RIGHTS OF WHICH THEY ARE AWARE AND TO PROVIDE SUPPORTING DOCUMENTATION.

This document is circulated as received from the committee secretariat.



Reference number  
ISO/DIS 45006:2022(E)

© ISO 2022

# iTeh STANDARD PREVIEW (standards.iteh.ai)

oSIST ISO/DIS 45006:2023

<https://standards.iteh.ai/catalog/standards/sist/9b993cee-de6f-4079-91db-849984781605/osist-iso-dis-45006-2023>



## **COPYRIGHT PROTECTED DOCUMENT**

© ISO 2022

All rights reserved. Unless otherwise specified, or required in the context of its implementation, no part of this publication may be reproduced or utilized otherwise in any form or by any means, electronic or mechanical, including photocopying, or posting on the internet or an intranet, without prior written permission. Permission can be requested from either ISO at the address below or ISO's member body in the country of the requester.

ISO copyright office  
CP 401 • Ch. de Blandonnet 8  
CH-1214 Vernier, Geneva  
Phone: +41 22 749 01 11  
Email: [copyright@iso.org](mailto:copyright@iso.org)  
Website: [www.iso.org](http://www.iso.org)

Published in Switzerland

# Contents

Page

<b>Foreword</b>	<b>v</b>
<b>Introduction</b>	<b>vi</b>
<b>1 Scope</b>	<b>1</b>
<b>2 Normative references</b>	<b>1</b>
<b>3 Terms and definitions</b>	<b>1</b>
<b>4 Understanding the context of the organization</b>	<b>4</b>
4.1 General	4
4.2 External issues	4
4.3 Internal issues	5
4.3.1 General	5
4.3.2 Diversity of workers and other relevant interested parties	5
<b>5 Characteristics of infectious diseases</b>	<b>6</b>
<b>6 Leadership and worker participation</b>	<b>6</b>
6.1 Leadership	6
6.2 Consultation and participation of workers	7
6.3 Roles, responsibilities and competence	8
<b>7 Communication</b>	<b>8</b>
7.1 General	8
7.2 Processes for communication	9
7.3 Communication with and reporting to external interested parties	9
<b>8 Hazards, risks and controls</b>	<b>9</b>
8.1 Identification of hazards	9
8.2 Assessment of risks	10
8.3 Determining controls	10
8.3.1 Selection of controls	10
8.3.2 Hierarchy of controls	11
8.3.3 Additional considerations for controls	12
8.4 Planning for changes to controls	12
<b>9 Psychological health and well-being</b>	<b>12</b>
9.1 Psychosocial hazards and risks	12
9.2 Controls to manage psychosocial risks	13
<b>10 Resources</b>	<b>14</b>
<b>11 Implementation of controls</b>	<b>15</b>
11.1 General	15
11.2 Personal hygiene	15
11.3 Work-related travel	15
<b>12 Implementation of controls for contagious diseases</b>	<b>16</b>
12.1 General	16
12.2 Workplaces under the control of the organization	17
12.2.1 General workplace infection controls	17
12.2.2 Use of common areas	18
12.2.3 Meetings and visits to workplaces	19
12.2.4 Deliveries	19
12.3 Working from home	20
12.4 Working in other people's homes	20
12.5 Working in multiple locations	21
12.6 Working with the public	21
<b>13 Implementation of controls for non-contagious infectious diseases</b>	<b>22</b>

## ISO/DIS 45006:2022(E)

<b>14</b>	<b>Implementation of controls for endemic diseases</b>	<b>23</b>
<b>15</b>	<b>Use of personal protective equipment and face coverings</b>	<b>23</b>
15.1	General	23
15.2	Selection of appropriate protection	24
15.2.1	General	24
15.2.2	Protective gloves	24
15.2.3	Face and respiratory protection	25
<b>16</b>	<b>Emergency preparedness and response</b>	<b>26</b>
<b>17</b>	<b>Managing suspected or confirmed cases of a relevant infectious disease</b>	<b>27</b>
17.1	General	27
17.2	Managing illness in a workplace	27
17.2.1	General	27
17.2.2	Occurrence of contagious disease	28
17.3	Screening, testing, contact tracing, quarantine and vaccination	28
<b>18</b>	<b>Performance evaluation</b>	<b>29</b>
18.1	General	29
18.2	Monitoring and measurement	29
18.3	Analysis and evaluation	29
18.4	Management review	30
<b>19</b>	<b>Improvement</b>	<b>30</b>
<b>Annex A</b>	<b>Examples of risk tables</b>	<b>32</b>
<b>Bibliography</b>		<b>34</b>

STANDARD PREVIEW  
(standards.iteh.ai)

oSIST ISO/DIS 45006:2023

<https://standards.iteh.ai/catalog/standards/sist/9b993cee-de6f-4079-91db-849984781605/osist-iso-dis-45006-2023>

## Foreword

ISO (the International Organization for Standardization) is a worldwide federation of national standards bodies (ISO member bodies). The work of preparing International Standards is normally carried out through ISO technical committees. Each member body interested in a subject for which a technical committee has been established has the right to be represented on that committee. International organizations, governmental and non-governmental, in liaison with ISO, also take part in the work. ISO collaborates closely with the International Electrotechnical Commission (IEC) on all matters of electrotechnical standardization.

The procedures used to develop this document and those intended for its further maintenance are described in the ISO/IEC Directives, Part 1. In particular, the different approval criteria needed for the different types of ISO documents should be noted. This document was drafted in accordance with the editorial rules of the ISO/IEC Directives, Part 2 (see [www.iso.org/directives](http://www.iso.org/directives)).

Attention is drawn to the possibility that some of the elements of this document may be the subject of patent rights. ISO shall not be held responsible for identifying any or all such patent rights. Details of any patent rights identified during the development of the document will be in the Introduction and/or on the ISO list of patent declarations received (see [www.iso.org/patents](http://www.iso.org/patents)).

Any trade name used in this document is information given for the convenience of users and does not constitute an endorsement.

For an explanation of the voluntary nature of standards, the meaning of ISO specific terms and expressions related to conformity assessment, as well as information about ISO's adherence to the World Trade Organization (WTO) principles in the Technical Barriers to Trade (TBT), see [www.iso.org/iso/foreword.html](http://www.iso.org/iso/foreword.html).

This document was prepared by Technical Committee ISO/TC 283 *Occupational health and safety management*.

This is the first edition of this document.

Any feedback or questions on this document should be directed to the user's national standards body. A complete listing of these bodies can be found at [www.iso.org/members.html](http://www.iso.org/members.html).

## Introduction

Infectious diseases are increasingly recognized as major challenges to health, safety and well-being. Decisions and activities relating to the prevention and management of infectious diseases affect workers within the organization and other people who visit a workplace, come into contact with workers, or can be affected by the organization's activities. This document is a response to the risks that infectious diseases present to workers and other relevant interested parties (e.g. customers, the public, suppliers, workers from other organizations, family members and other personal contacts).

There is a broad range of infectious diseases with potential impacts on health, safety and well-being, which can vary from very mild to very serious depending on the nature of the infectious disease. Key characteristics of infectious diseases (see [Clause 5](#)) are a major factor in the risk posed to workers and other relevant interested parties.

Examples of infectious diseases include influenza, COVID-19, *legionellosis*, smallpox, hepatitis, malaria, *salmonellosis*, tuberculosis, ebola and HIV/AIDS. Some infectious diseases are non-contagious and infect only the individual who contracts the disease, whilst others are contagious and have the potential to rapidly spread from a single individual to infect others, up to and including a pandemic spread of the disease.

The impact in terms of severity of infectious diseases can vary from person to person depending on underlying health conditions (e.g. asthma, diabetes, obesity, strength of immune system) and factors such as age, and socio-economic situation. Impacts can be more severe where one or more such circumstances exist.

This document provides guidelines to prevent or reduce exposure to, and transmission of, infectious agents and to manage risks to workers and other relevant interested parties from infectious diseases. It supports the principle that workers should not be required to work in settings without implementation of appropriate prevention and control measures.

The guidance is generic and applicable to organizations regardless of the nature of business, service provision, size or complexity. It recognizes that many smaller organizations do not have dedicated departments for functions such as occupational health and safety (OH&S), facilities management, human resources or infectious disease specialists. More detailed information for specific functions is available from professional bodies and a wide range of national and international standards.

Organizations using ISO 45001 Occupational health and safety management systems can use this document to improve their OH&S management system by relating the relevant clauses to the PDCA cycle, as outlined below. Taking a systems approach facilitates the coordination of resources and efforts and will enable organizations to better manage the risk from infectious diseases, by ensuring they are included in to existing OH&S processes.

**Plan:** plan what needs to be done for the organization to work safely.

**Do:** do what the organization has planned to do.

**Check:** see how well it is working.

**Act:** take actions to improve or change controls that are not effective.

This document is not intended to be a single step-by-step set of recommendations. It provides guidelines to enable ongoing continual improvement and ensure the organization responds to incidents of infectious diseases, including epidemics and pandemics.



# Occupational health and safety management — Guidelines for organizations on preventing and managing infectious diseases

## 1 Scope

This document gives guidelines for organizations on how to prevent or control exposure to infectious agents and manage the risks associated with infectious diseases that:

- present a risk of severe ill health or death and can impact the health, safety and wellbeing of workers and relevant interested parties;
- present a lower risk to health yet have a significant impact on the organization, its workers and relevant interested parties.

This document is applicable to organizations of all sizes and sectors.

**Note** This document does not provide comprehensive guidance to those parts of an organizations that implement mandated infection controls such as hospitals and medical or biological laboratories because there is an inherent potential for exposure to infectious diseases. Applicable legislation and guidance is provided by government, regulators and health authorities for specific infection controls for the protection of workers in such settings and for work activities on or with pathogenic microorganisms.

## 2 Normative references

There are no normative references in this document.

## 3 Terms and definitions

For the purposes of this document, the terms and definitions given in ISO 45001:2018 and the following apply.

ISO and IEC maintain terminological databases for use in standardization at the following addresses:

- ISO Online browsing platform: available at <https://www.iso.org/obp>
- IEC Electropedia: available at <https://www.electropedia.org/>

### 3.1

**workplace**

place where a person needs to be or to go for work purposes

**Note 1 to entry:** The organization's responsibilities for the workplace depend on the degree of control over the workplace.

**Note 2 to entry:** Workplaces can be inside or outside and include the worker's own home, other people's homes, personal vehicles, vehicles provided by the organization, other organizations' facilities and public spaces.

[SOURCE: ISO 45001:2018, 3.1, modified: 'under the control of the organization' removed from definition; 'under the OH&S management system' removed from Note 1 to entry; Note 2 to entry added]

## ISO/DIS 45006:2022(E)

## 3.2

**legal requirements and other requirements**

legal requirements that an organization has to comply with and other requirements that an organization has to or chooses to comply with

[SOURCE: ISO 45001:2018, modified. Note 1,2, 3 to entry removed]

## 3.3

**top management**

person or group of people who directs and controls an organization at the highest level

[SOURCE: ISO 45001:2018, modified. Note 1,2, 3 to entry removed]

## 3.4

**incident**

occurrence arising out of, or in the course of, work that could or does result in injury and ill health

Note 1 to entry: In this document "injury and ill health" refers to contracting an infectious disease or any identifiable, adverse physical or psychological condition arising from or associated with an infectious disease

[SOURCE: ISO 45001:2018, modified. Note 1,2, 3 to entry removed. New note 1 to entry]

## 3.5

**personal protective equipment****PPE**

device or appliance designed to be worn by an individual for their protection against one or more health and safety hazards

Note 1 to entry: PPE includes, but is not limited to, gowns, gloves, respirators, safety glasses, helmets and goggles.

Note 2 to entry: While generally not considered PPE, masks, and other face coverings can provide a level of protection for the user in addition to their primary purpose as a public health measure to control the spread of transmission and infection.

Note 3 to entry: In many countries PPE is required to conform to national regulations.

[SOURCE: ISO 15384:2020, 3.12, modified, the words "or held" have been removed from the definition, the word 'their' has been added, and the notes to entry have been added]

## 3.6

**face covering**

facepiece that covers the mouth, nose and chin

Note 1 to entry: Face coverings are also known as 'community masks', 'hygiene masks', 'barrier masks', 'comfort masks' and other local terms

Note 2 to entry: Face coverings in the context of this document are not considered to be personal protective equipment (PPE) or a medical device.

[SOURCE: CWA 17553:2020, 2.3, modified, the word "community" has been deleted from the term, the words "fitted with the head harness which can be head or ears attachment" has been deleted from the definition, and the notes to entry have been added]

## 3.7

**well-being**

fulfilment of the physical, mental and cognitive needs and expectations of a worker related to their work

Note 1 to entry: Well-being can also contribute to the quality of life outside of work.

Note 2 to entry: Well-being relates to all aspects of working life, including work organization, social factors at work, work environment, equipment and hazardous tasks.

[SOURCE: ISO PAS 45003:2020, 3.10 modified by removal of 'at work' from term]

### 3.8

#### **common areas**

spaces and amenities provided for the use of more than one person

Note 1 to entry: Examples of common areas include canteens, lifts/elevators, stairs, reception areas, meeting rooms, areas of worship, toilets, gardens, fire escapes, kitchens, fitness facilities, storerooms and laundry facilities.

Note 2 to entry: Common areas can include spaces and amenities used by more than one organization

Note 3 to entry: Common areas can include spaces and amenities where people are working.

[SOURCE: ISO/PAS 45005:2020, 3.11, modified – notes 2 and 3 have been added]

### 3.9

#### **infectious disease**

condition caused by agents such as bacteria, viruses, parasites or fungi that can spread, directly or indirectly and that can result in ill-health

Note 1 to entry: In this document infectious disease refers to those diseases described in the Scope of this document (see [Clause 1](#)).

### 3.10

#### **contagious disease**

*infectious disease* ([3.9](#)) that can be transmitted from person to person

Note 1 to entry: Examples of contagious diseases include influenza, ebola, hepatitis.

### 3.11

#### **outbreak**

increase in cases of an *infectious disease* ([3.9](#)) in excess of what is normally expected in a particular location, community or geographical region in a specified time period;

Note 1 to entry: An outbreak can affect a small and localized group or multiple groups and places and can result in an epidemic or pandemic.

Note 2 to entry: Two linked cases of an infectious disease can be sufficient to constitute an outbreak.

### 3.12

#### **epidemic**

large number of cases of a particular *infectious disease* ([3.9](#)), occurring at the same time in a community or geographic region

[SOURCE: ISO 28901:2011, 3.6 modified – infectious disease replaces “disease, usually infectious”, “particular” removed from community and “or geographic region” added]

### 3.13

#### **pandemic**

worldwide spread of an *infectious disease* ([3.9](#))

[SOURCE: ISO PAS 45005:2020, 3.5, modified – ‘infectious’ added]

### 3.14

#### **endemic infectious disease**

*infectious disease* ([3.9](#)) constantly present and/or usually prevalent in a particular community or geographic region

## 4 Understanding the context of the organization

### 4.1 General

The organization should acquire and maintain awareness of known and emerging infectious diseases that can, or are likely to, significantly affect the organization or its activities.

The organization should determine external and internal issues and consider:

- a) the specific hazards and related risks from infectious diseases to workers and other interested parties who can be affected by the organization's activities (e.g. visitors, customers, clients, service users, the public);
- b) if changes should be made to its operations to address the risks;
- c) how workers can be supported to work safely.

NOTE 1 Infectious diseases can vary in occurrence, impact and severity depending on country or region.

NOTE 2 Appropriate controls can vary depending on country or region.

### 4.2 External issues

When determining external issues the organization should consider:

- a) emergence and/or prevalence of infectious disease within the local community (including in other organizations and other workplaces);
- b) local, regional, national and international circumstances and related legal requirements and other requirements, and guidance (e.g. likelihood of infectious diseases being transmitted through people, products or services moving from one place to another);
- c) availability of clinical services, testing, treatments and vaccines;
- d) availability of health, safety and other supplies (e.g. PPE, face coverings, hand sanitizers, thermometers, cleaning and disinfection materials);
- e) potential changes or problems in the supply chain;
- f) the modes of transport workers use to travel to and from work (e.g. public transport, car, bicycle, walking, shared transport);
- g) workers travelling into regions with an endemic infectious disease or an outbreak of an infectious disease;
- h) workers' access to childcare and schooling for their children;
- i) suitability of worker's home for remote working;
- j) workers' domestic situations (e.g. living with someone who is at higher risk of contracting or getting severely ill from infectious diseases);
- k) continuity of essential services (e.g. food provision, domestic infrastructure, utilities);
- l) changes in the needs and expectations, or behaviours, of relevant interested parties;
- m) local culture and cultural behaviours (e.g. kissing, hugging, shaking hands);
- n) increased or decreased demand for the organization's products/services).

### 4.3 Internal issues

#### 4.3.1 General

When determining internal issues the organization should consider:

- a) prevalence or likelihood of an infectious disease in the organization;
- b) sources of infectious agents in the workplace that can result in an infectious disease (e.g. foodborne illness from food provided by the organization);
- c) ability of the organization to gain up-to-date knowledge about infectious diseases;
- d) type of organization and related activities (e.g. manufacturing, services, retail, social care, training or other education, delivery or distribution);
- e) number, locations and types of workplaces potentially affected (e.g. offices, factories, workshops, warehouses, water treatment plants, vehicles, retail outlets, workers' own homes or other people's homes);
- f) how work is organized (e.g. changed work demands, pace of work, time pressure, shift work, travel requirements) and how this impacts workers' health, safety and well-being;
- g) resource availability (e.g. operational, health and safety, hygiene);
- h) cultural values within the organization that can affect risk control measures;
- i) the relationship between workers and the organization (e.g. employed, contractors, volunteers, freelance, part-time, shift workers, remote workers);
- j) specific needs of workers considered to be at higher risk for contracting or getting severely ill from an infectious disease (e.g. workers with underlying health conditions);
- k) specific needs of diverse workers (see 4.3.2);
- l) language barriers and communication issues;
- m) the extent to which it is possible to implement specific infection control measures in a workplace or in relation to work activities or ways of working (e.g. limited space, limited handwashing facilities);
- n) increased worker absence (e.g. due to illness, self-isolation or quarantine requirements, bereavement).

#### 4.3.2 Diversity of workers and other relevant interested parties

The organization should take into account the full diversity of its workers and other relevant interested parties when determining internal issues (see 4.3.1) relating to preventing and managing infectious diseases. The organization should consider that individual workers and other relevant interested parties have different needs, based on their characteristics and personal circumstances, such as:

- a) gender-specific needs, including those of women;
- b) pregnancy;
- c) being new parents;
- d) age, taking into account both older and younger workers;
- e) disabilities;
- f) ethnicity, culture and faith;
- g) those with underlying health conditions.