

PROTOCOL

to protect agricultural workers
from COVID-19



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1. INTRODUCTION

In December 2019, China reported the emergence of the SARS-CoV2 coronavirus, which causes the disease known as **COVID-19**. This virus, which has spread worldwide, was later declared a global pandemic by the World Health Organization.

In this regard, in an effort to protect the health of the Mexican people, the Federal Government ordered a series of measures published in the Federal Official Daily Gazette.

1. On March 23rd 2020, the General Health Council declared the COVID 19, caused by the SARS-CoV2 virus, a serious disease and a priority for the country, and defined a series of preparedness and response activities to fight the epidemic.
2. On March 31st 2020, the government published an Agreement that establishes a series of extraordinary actions to address the health emergency created by the SARS-CoV2 virus.

Article 1 of the March 31st Agreement describes several actions to address the health emergency to be implemented by the public, social and private sectors:

- Section I orders the immediate suspension, from March 30 to April 30 2020, of non-essential activities to mitigate the spread of the SARS-CoV2 virus in the community and reduce the burden of the disease, its complications and COVID-19 deaths among the country's population.
- Section II, paragraph "c", states a series of essential activities, including "agricultural production", that should not be suspended.

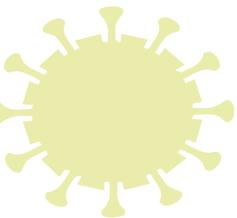


We are currently in what is known as *Community Spread Phase 2*, but **we are expecting to enter Phase 3 of the epidemic in a few days, which means the rate of infection will be exponential**, and the agriculture sector will definitely have COVID-19 positive cases among its workers.

We are fully aware of the importance of not stopping food production to maintain food security both for the country and the countries to which Mexican farmers export their products but, at the same time, we know there is a great deal of uncertainty around the actions to take when an agricultural worker contracts COVID-19. The high level of transmission of the virus and the characteristics of agricultural systems required pose significant challenges to addressing the health emergency.

For this reason, the purpose of this Protocol is to provide agricultural producers and companies with essential information, from the adoption of prevention actions to the identification and management of cases, and when to reintegrate workers who have tested positive for COVID-19. It is important to highlight the importance of staying informed at all times because, **depending on the evolution of the pandemic, the recommendations of health authorities may change.**

This document is not intended to replace guidelines or protocols established by federal, state or municipal authorities. It builds upon official guidelines issued by Mexican health and labor authorities, the **World Health Organization and the Pan American Health Organization**, so agricultural activities can continue in case an employee shows COVID-19 symptoms, has been potentially exposed to or tested positive for COVID-19.



2. OVERVIEW

2.1 Legal Framework

General Health Law

Article 181.- In case a severe epidemic, potential hazard of transmissible diseases, emergency situation or catastrophe affects the country, **the Ministry of Health shall immediately establish the essential measures to prevent and fight damages to human health**, subject to later approval by the President of the Republic.

Article 356.- Depending on the circumstances, health surveillance and isolation stations shall be set up in those locations determined by the Ministry of Health and, in case of a health emergency, the Ministry may convert other facilities for that purpose.

Federal Labor Law

Article 132.- Employers have the following obligations:

F_XIX bis. Comply with the requirements established by the competent authorities in case of a health emergency, and **provide their employees with the elements established by such authority** to prevent diseases in case a health emergency is declared.

Article 134.- Employees have the following obligations:

F_X. Undergo the medical examinations provided for in the internal regulations to this law and other rules in force in the company or facility, in order to confirm they do not have a disability or an occupational **infectious** or incurable **disease**;
F_XI. Notify their employers of any **infectious disease** they may have as soon as they learn about it.

Occupational Safety and Health Federal Regulations

Article 48. As regards the provision of Occupational Safety and Health Prevention Services, employers must:

F_III. Ensure such services are part of their Occupational Safety and Health Program

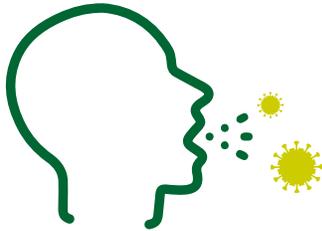
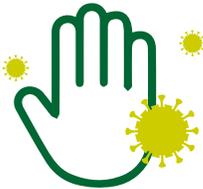
- c) Implement the actions to address health emergencies recommended or ordered by the competent authorities.

2.2 What is the Coronavirus?

- Coronaviruses are a virus family that causes different diseases (from common cold to more serious respiratory diseases) and circulates among humans and animals.
- In this case, the virus is SARS-CoV2. This virus, which was initially reported in China in December 2019, causes a disease called COVID-19, which has spread throughout the world and was later declared a global pandemic by the World Health Organization.

2.3 How is COVID-19 transmitted?

This section describes the mechanisms and mode of transmission in the population. It does not include information applicable to medical staff occupationally exposed.

Mode of transmission	Mechanism
Droplets 	Saliva droplets are ejected from the mouth or nose when kissing, talking, coughing or sneezing. <ul style="list-style-type: none">• These droplets can travel a distance of up to 1 meter when talking.• These droplets can travel a distance of up to 4 meters when coughing or sneezing. They may travel even further depending on the person's strength.
Contact 	<ul style="list-style-type: none">• Through direct contact with a COVID-19 patient.• Through indirect contact with a contaminated surface.

3. GENERAL RECOMMENDATIONS

3.1 Objective

The purpose of this Protocol is to provide agricultural companies with the elements they need to design and implement a plan to address the health emergency caused by the SARS-CoV2 virus (COVID-19), which should include the measures established by health and labor authorities, to prevent risks that may threaten the health or lives of workers.

3.2 Scope

This Protocol is mandatory for workers involved in all processes and operations of agricultural companies, including day care centers, housing areas or living quarters, medical services and schools for children of migrants operating in their worksites.

3.3 Dealing with the health emergency

The following measures must be adopted in response to the COVID-19 health emergency:

1. A specific **Action Plan** must be designed to implement the Protocol.
2. The Action Plan must be authorized by the company's **top management** and should be updated depending on the evolution of the epidemic and new orders from health and labor authorities.
3. The staff responsible for coordinating actions under the Protocol and Action Plan must be **professional and discrete** with regard to matters related to the health emergency within the company.
4. Only **staff authorized** by the top management should keep employees informed of actions to be carried out during the health emergency.

5. All the information and actions to be carried out must be duly authorized by the company's **top management**.
6. Only the company's **top management** and medical staff should be authorized to provide information to health authorities.
7. Only the company's **top management** must interact with the media.
8. In case of inspections from labor authorities, the company's **top management** must be immediately notified thereof so they can designate the persons in charge of dealing with that inspection.
9. To ensure timely and efficient actions, this Protocol must be disseminated in all company's worksites through the use of materials such as brochures, flyers, posters and audiovisual materials, in order to spread information about the different actions to be carried out. This should include official materials or information released by health and labor authorities.
10. All information shared with workers must be **truthful, clear and accurate** and should be based on official information, without causing panic among workers. However, that does not mean official measures should be ignored.

3.4 Measures to protect vulnerable populations

Due to the high levels of transmission of the COVID-19 virus, the company must pay particular attention to those groups health authorities consider at higher risk of experiencing life-threatening complications.

To this end, the company must do the following:

1. Identify all workers **above the age of 60, pregnant women and persons with chronic diseases** and a compromised immune system (*for example, blood or pulmonary hypertension, kidney failure, lupus, cancer, diabetes mellitus, obesity, liver or metabolic failure or heart diseases*).



2. **Inform these workers, in a professional manner, of the risks they are exposed to** if they continue to work, but without creating panic, considering that, due to their health condition, they may become upset.
3. Remove them from their job temporarily and ask them to **stay at home**.
4. The company must inform these workers of the measures implemented by the **IMSS to expedite procedures** for access to medicines and leaves of absence, without having to follow those procedures personally. This can be done through a relative, a friend or another person. (Annex 1)
5. The company's social work teams should **follow up on the condition of workers in a situation of vulnerability** to ensure they have food available, especially those who do not have relatives that can support them, while on lockdown.
6. Once approved by health and labor authorities, workers belonging to **higher-risk groups may return to work**.
7. **Keep records of employees** instructed to stay at home.

3.5 Agricultural worksite conditions

In order to implement **official recommendations applicable to agricultural worksites**, it is important to be aware of the worksite characteristics. To this end, we suggest the following:

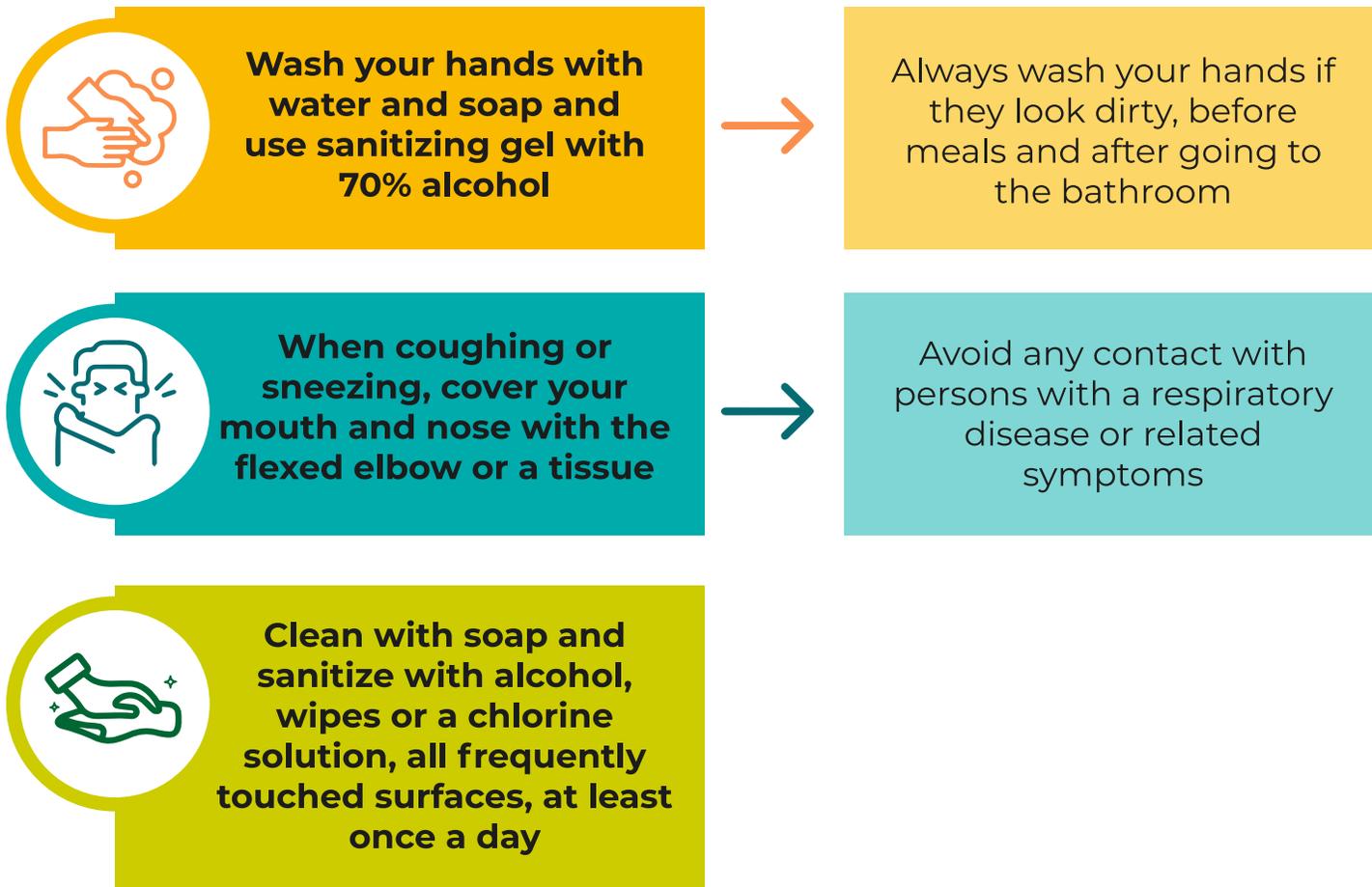
1. **Identify** the different **spaces** where activities take place at the worksite, including fields, orchards, greenhouses, cafeterias, housing areas, welfare areas and offices, **with the aim of assessing the potential risk of infection in each area**.
2. **Suspend all activities** that involve gatherings of more than 50 people in enclosed spaces (*meetings, training courses, ergonomic exercise, cafeterias*).

- 3. Temporary suspension of non-essential activities** in the agricultural worksite. A non-essential activity is one that **does not affect the company's core activity** or violate workers' rights, for example, certain administrative positions, legal services, graphic design, communications, etc.)

4. GENERAL CONTROL STRATEGIES

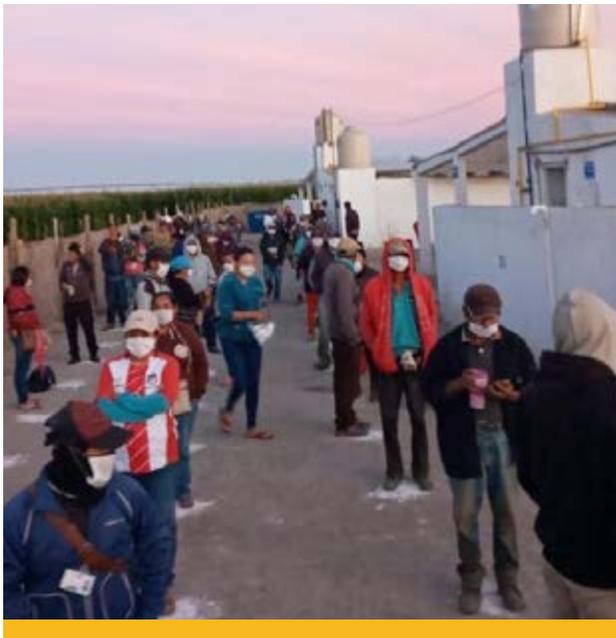
4.1 What preventive measures can I take?

These measures include guidance, training and organization of workers to prevent and control the spread of COVID-19 in the company's facilities and also at the community level.



4.2 Safe Distance

These measures include changing people's distancing habits **(1.5 to 2.0 meters)**, and reducing the frequency of face-to-face interactions between workers.



For those persons who are returning from an active transmission area or have been in contact with suspected COVID-19 cases, the recommendation is:

Stay at home for 14 days (after the last contact) even if you show no signs of a respiratory disease



**ALWAYS
SAFE DISTANCE**

(at the company, at home
or in any other place)

Keeping a safe distance reduces the likelihood of exposure and transmission between workers and, therefore, we recommend promoting the following among the company's workers:

1. Keep a distance of 1.5-2.0 m from others. This measure must be followed in offices, cafeterias, vehicles, waiting lines (for example, at entry points, upon following procedures or in offices and cafeterias), waiting areas, centers for children of migrant workers, housing areas and in all of the company's operations.

2. Use floor markers or caution tape on floors, bus seats and chairs or benches.

3. Schedule staggered hours of operation for the use of facilities.



4.3 Checkups at Entry Points

Check-up points must be set up at worksites to ensure workers, customers, visitors, contractors or any other person entering the facilities do not have respiratory disease symptoms and, thus, **reduce the risk of COVID-19 transmission.**

Staff in charge of check-up points must be trained and provided with **personal protection equipment** (disposable coveralls, face masks, gloves and goggles). They should also have access to hand-held thermometers and supplies for distribution to all persons entering the facilities (face masks, handwashing stations and sanitization products).



The employee in charge of the checkpoint should keep track of people entering the worksites. That means persons entering the facilities should not be asked to fill out forms or logs, as this can entail a risk of infection.

The checkup site must have the following:



Water, soap or antibacterial gel (at least 70% alcohol content) for people entering the facilities.



Chlorine solution to clean and sanitize the check-up site.



A table, which must be cleaned and sanitized at least once every hour during operating hours.



Tissues.



Trash can with a lid and a plastic garbage bag.



Digital or infrared thermometer or forehead thermometers.



Questionnaire for detection of signs and symptoms.



Employees responsible for entry check-up points must **administer a questionnaire** that should include the following questions:

- a. How old are you? *Persons age 60 and above must be asked to stay at home.*
- b. Are you pregnant or breastfeeding? *Pregnant or lactating women must be asked to stay at home.*
- c. Have you traveled to the US, China, Japan, Korea, Iran or Europe recently? *Persons who have traveled to a country with high risk of infection in the last 14 days must be asked to stay at home.*
- d. Have you been in contact with a person infected with COVID-19? *If the answer is yes, the person must be asked to stay at home.*
- e. Do you have a fever above 38°C?
- f. Do you have a headache?
- g. Do you have a cough? *Observe.*
- h. Do you have a sore throat or throat pain?
- i. Do you have difficulty breathing?
- j. Do you have muscle or joint pain?
- k. Do you have a runny nose? *Observe.*
- l. Are your eyes red? *Observe.*
- m. Do you have a condition that could complicate a potential infection (*diabetes, hypertension, cancer, obesity, etc.*)?

If the person answers "yes" to two or more questions indicated in items from **e to g**, and has any of the symptoms or conditions mentioned in items from **h to m**, he/she should not be allowed to access the facilities.

If the person showing signs or symptoms of a respiratory disease is a worker, he/she should be provided with a face mask and be referred for a **medical exam** in the company or to a health clinic under an agreement to provide health care for workers.



If the treating physician determines there is suspicion of COVID-19 and the worker does not show signs of respiratory failure or does not belong to a high-risk population, **he/she must be asked to stay at home**. In case the worker is a migrant person, he/she must be placed in the area of the company's living quarters designated by the producer to isolate persons with respiratory diseases and suspected of having COVID-19.

All physicians must observe the COVID-19 Epidemiologic Surveillance Operational Definition established by health authorities, as well as measures ordered by the General Health Council.

4.4 Personal Hygiene

- **FREQUENT HANDWASHING** (with water and soap) is essential, especially after coughing, sneezing, using tissues or touching potentially contaminated surfaces. (Annex 2)
- When coughing or sneezing, **cover your mouth and nose** with the flexed elbow or a tissue to contain respiratory secretions.
- **Discard used tissues immediately** in containers specifically designated to that end.
- Designate specific bins or containers to dispose of protection and sanitary waste materials, and **follow applicable measures** for their safe disposal.
- Hand hygiene includes **cleaning and trimming** fingernails.
- You should not wear **rings, necklaces, bracelets, wristwatches or other accessories** that may interfere with hand hygiene and personal protection.



- **Do not touch your eyes, nose or mouth**, as hands facilitate transmission.
- **Avoid any form of physical contact** with others, such as handshaking, hugging, kissing, cuddling, etc.
- Keep the maximum spatial distance possible **(1.5 to 2.0 meters)**.
- **Plan** all activities, tasks, processes and transportation to ensure a safe distance is kept.

5. PLAN FOR MANAGEMENT OF SUSPECTED COVID-19 SYMPTOMS AND PERSONNEL TESTING POSITIVE FOR COVID-19

5.1 Identification of suspected cases

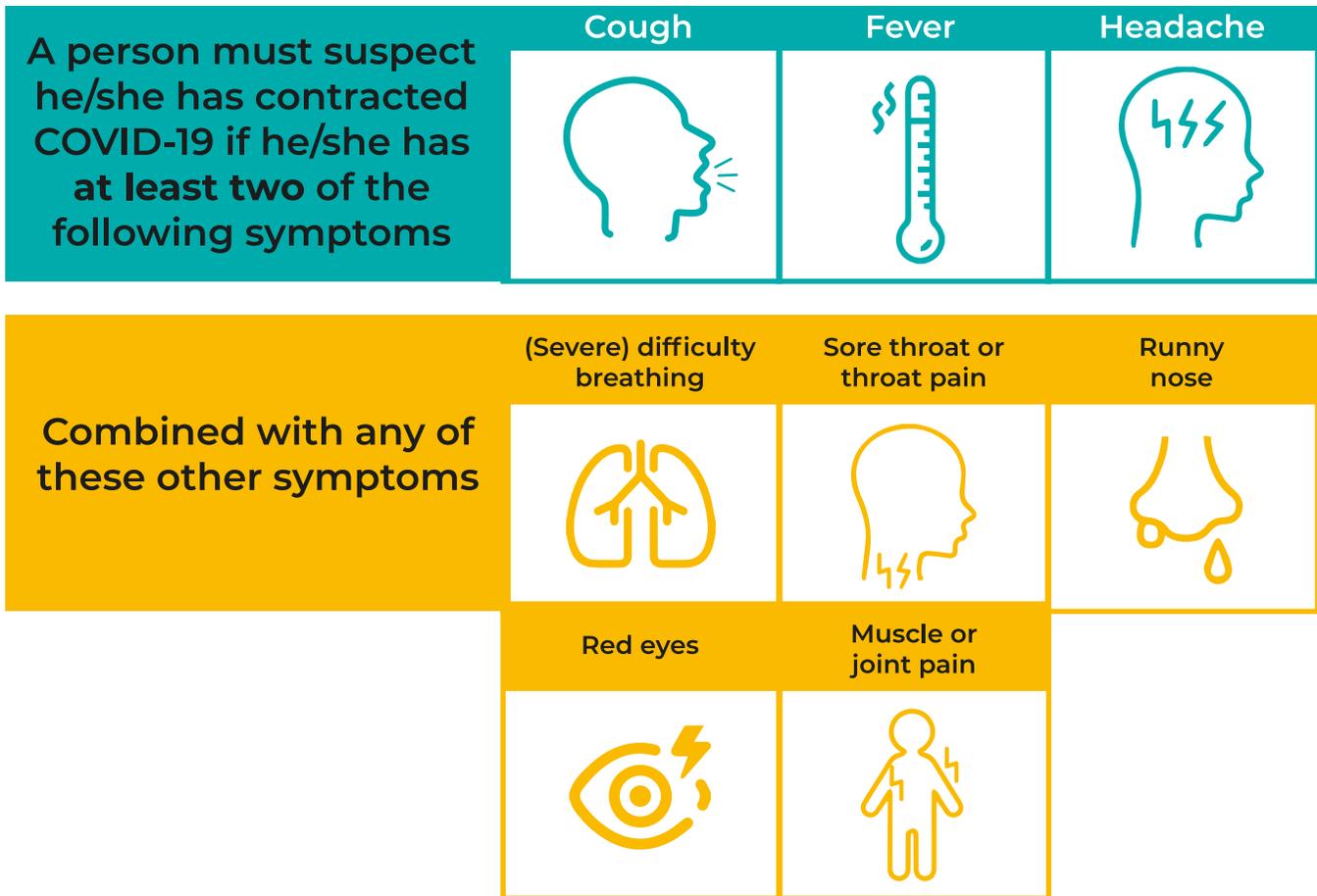
Checkups at entry points allow for the identification of persons with COVID-19 signs or symptoms, but the company's responsibility begins when the person detected is a worker. A worker may not show any symptoms upon arriving on the job, but may feel sick later in the workday.

If the company offers medical services onsite, the worker must be referred for care. If that is not the case, he/she must be **informed about the importance of staying at home** or receive support and transportation to the nearest IMSS or health clinic.

In addition to cases of workers showing signs or symptoms referred for medical care onsite, there may be workers who feel sick while at home, in which case the worker or a relative must inform the company of his/her health status.

According to the health authority guidelines, **persons must seek medical care** in the following cases:





These guidelines were issued because the country's health infrastructure is poor and insufficient, and the authorities want to prevent further spread of the disease.

Section 6 includes recommendations from the health sector to manage persons with a respiratory disease.

5.2 Confirmed cases

A person with a confirmed case of COVID-19 must have met the requirements of the suspected case operational definition established by the **National Committee for Epidemiologic Surveillance (CONAVE)** and have a diagnosis confirmed by the **National Network of Public Health Laboratories**, which has been certified by the National Institute of Epidemiological Diagnosis and Reference (INDRE).

Confirmed cases of COVID-19 may include respiratory disease symptoms with different levels of intensity, which will determine the patient's management:

- a. If the person does not have difficulty breathing**, that person must isolate himself/herself at home and should not go to work.
- b. If the person has difficulty breathing, he/she must be hospitalized.**

In case of doubt or emergency, you can call the **800 00 44 800 hotline** and/or contact the health sector Call Center in your state. (Annex 3)

The families of workers who have tested positive for COVID-19 must be monitored by health authorities. In the case of migrant workers, the company should give them the proper information to prevent them from returning to their communities of origin or traveling to other agricultural regions.

5.3 Isolation

Workers showing signs or symptoms of respiratory disease with a suspected or confirmed case of COVID-19 must be separated, and **their mobility must be restricted** to prevent them from infecting their coworkers or communities.

If the company employs migrant workers, **it must designate a specific area to manage and isolate suspected and confirmed cases of COVID-19**. That area should preferably consist of mobile units separated from housing areas to protect the rest of the workers and their families. It is important to ensure they have access to food, medicines and medical services.

Local workers must be isolated in their homes or the specific locations determined by the health authorities.



5.4 Worker disability leave procedure

The **Technical Board of the Mexican Social Security Institute** approved measures to expedite leave of absence procedures for IMSS beneficiaries showing COVID-19 symptoms. To obtain that permit, they can go to: <http://www.imss.gob.mx/prensa/archivo/202003/147>

Enter the *Permiso COVID-19* ("COVID-19 Leave") section, where you will be asked to fill out a questionnaire for the IMSS to approve the leave. This online procedure was approved in response to the COVID-19 health emergency. The **IMSS leave of absence procedure** is described in Annex 4.

Workers must provide an **e-mail address** to receive notices, in addition to their **CURP** (Unique Population Registry Code) and **bank account information** so they can receive the leave of absence subsidy. It is important to ensure workers have bank accounts to avoid any delays.

5.5 Return to work

Workers should go back to work once the IMSS leave of absence expires.

5.6 Records of suspected and confirmed cases

The company must design a form to keep track of workers suspected of having COVID-19 or who have tested positive for COVID-19.

The form **should include, as a minimum, the following information:**

1. Worker's full name
2. Social security number
3. Worker's address
4. Family contact person
5. Contact person telephone number

- 6. Worker's diagnosis
- 7. Date the case was identified
- 8. Return-to-work date

These records are recommended exclusively for work purposes and should not replace questionnaires by the company's medical staff.

6. MANAGEMENT OF WORKERS WITH RESPIRATORY DISEASES

Workers should be informed of the following:

6.1 Treatment for workers with COVID-19

As yet, there is no cure for COVID-19, only drugs to relieve its symptoms.

The COVID-19 virus is a novel virus, and there is no vaccine for it.

The disease is not severe in most cases, and the body can control it approximately within two weeks.

If you experience any symptoms compatible with COVID-19 and have difficulty breathing, or belong to a risk group, cover your mouth and nose with a face mask, a scarf or a handkerchief, and go to the nearest physician or clinic immediately.



6.2 Care for workers with respiratory diseases

If you experience any symptoms compatible with the coronavirus, but **DO NOT** have difficulty breathing, or you **DO NOT** belong to a risk group, stay at home and do the following:

- **Do not self-medicate.**
- Do not shake hands, kiss or hug others and keep a **safe distance** from those around you.
- Wash your hands frequently with water and soap for at least **20 seconds**, or disinfect them with hand sanitizer.
- **Eat healthy foods**, including fruits and vegetables, and drink at least eight glasses of water a day.
- **Wash** your dishes, glasses and cutlery with **water, soap and chlorine.**

6.3 What to do in response to COVID-19?



7. MEDICAL SERVICES OFFERED BY THE COMPANY

The following information is applicable to companies offering medical services in their own facilities:

7.1 Prevention measures applicable to health workers

- Wash your hands with **water and soap (using a sanitizing alcohol solution)** before and after attending to a patient.
- Dry your hands with a **paper towel or let them dry in the air by keeping them** in a vertical position.
- To the extent possible, avoid **touching your eyes, nose or mouth**. In case you do so, wash your hands afterwards.
- You should only **wear a face mask** if you attend to patients with respiratory infections, in which case the face mask should fully cover your mouth and nose. If possible, use goggles to protect your eyes.
- **Discard into an Infectious Biological Hazardous Waste - [IBHW](#), container** all disposable materials used with every patient (e.g. tongue depressors, cotton swabs, gauze, gloves).
- **Sterilize** all medical equipment. **Keep all work areas clean.**
- Keep all work areas **clean**.
- You must get the **influenza vaccine**.
- Health workers must **immediately contact** the infection control office of their health unit if they show any of the symptoms described in the COVID-19 suspected case definition.



7.2 Prevention measures applicable to health units



Verify the availability of medical supplies needed to attend to patients, including personal protection equipment.



Make sure all medical areas, waiting rooms, restrooms, multiple-use areas and other spaces are well-ventilated and also that they get sunlight.



Define a physical pathway for persons with respiratory symptoms by posting clear signs beginning at the entrance to the unit.



Make sure you have all the supplies needed to clean the facility (soap, chlorine, brooms, mops, squeegees, toilet paper, paper towels, etc.).



Put plastic bags inside all trash cans and tie them before disposal.



If possible, designate a separate room for patients with suspected cases of COVID-19. If that is not possible, you can resort to cohort isolation by separating persons at least 1 m from each other.



Avoid using reusable materials. If you use them, you must decontaminate and disinfect them per the manufacturer's IFU. Disposable materials must be discarded inside the patient's room following IBHW standards.



Use water, soap and chlorine to wash all washable surfaces, such as walls, floors, doors, door handles, handrails, faucets, toilets, telephones, sliding curtains, medical furniture and furniture in general.



Verify the implementation of measures recommended for application in medical care areas at least every 8 hours.

7.3 Recommendations for users of health units



Prior to leaving the health unit, clean your hands with water and soap and dry them with a paper towel or let them dry in the air by keeping them in a vertical position.



When you sneeze or cough, cover your nose and mouth with a tissue or your flexed elbow.



Avoid eating foods and beverages inside the unit.



Avoid going to the doctor with children unless they need medical care.



Do not spit on the floor.



Help to keep the health unit clean.

7.4 Information for medical staff

To get more information about epidemiologic surveillance procedures, diagnostic, detection and follow-up algorithms and other documents for adequate provision of health care at health units, go to: [Novel Coronavirus \(COVID-19\)](#).

On this website you will find the following documents:

- Novel coronavirus epidemiologic notice.
- Standardized guidelines for COVID-19 epidemiologic surveillance by laboratory.
- Case study.
- Diagnostic algorithms.
- Suspected case detection and follow-up algorithm.
- Initial care procedure at entry points for travelers with previous stay in Hubei, China.
- Procedure for identification of travelers with suspected novel coronavirus infections at entry points.



For additional information, visit the following COVID-19 websites:

- [Coronavirus online library - PAHO](#) (Spanish)
- [Self-study course](#) (Spanish)
- [Epidemiology General Directorate](#) (Spanish)
- [World Health Organization](#)
- [Pan American Health Organization](#)
- [COVID-19 CDC - United States](#)



8. TRANSPORTATION FOR AGRICULTURAL WORKERS

Agricultural companies use different forms of transportation for their workers, including:

- Transportation to worksites** (offices, farming areas, packaging areas, workshops, etc.) of workers living in communities or the living quarters provided by the company.
- Transportation of migrant workers **to and from their places of origin.**

8.1 Requirements for worker transportation vehicles

It is important to observe the following:

1. Vehicles transporting migrant workers within a state or between states must meet the requirements and abide by the rules established by the Ministry of Communications and Transport, as well as national road safety authorities.
2. The owners of vehicles used to transport workers locally must meet the requirements and abide by the rules established by road safety, transportation and traffic authorities in each state

Workers transported in private vehicles should have a company ID with them so they can prove to the authorities they work in an essential activity.

8.2 Prevention measures during transportation of agricultural workers

The following measures should be observed to reduce the risk of infection during transportation of agricultural workers:

1. Frequent cleaning and disinfection of vehicles (before workers get on and after they get off transportation vehicles).
2. All passengers must wash and sanitize their hands before getting on the bus, wear a face mask and follow all applicable recommendations.

3. **Only half the vehicle capacity should be allowed and passengers should follow alternate seating arrangements –one passenger next to the aisle and another next to the window on the same row, always keeping a safe distance.**

All personnel traveling in private vehicles should also follow the above-mentioned prevention measures to reduce the risk of disease infection and transmission.



9. MEASURES FOR COMPANIES HIRING MIGRANT WORKERS

For the fruit-and-vegetable sector to be able to maintain food production and ensure food security, having access to agricultural workers is crucial, but protecting their health and lives is also essential.

A significant percentage of people working in the agriculture industry are migrants, and that is why we have included this section.

9.1 Migrant workers hired in their places of origin

1. Measures to follow in places of origin and during migratory transit

- **Training for workers and contractors recruiting them** in their places of origin, so they can learn about prevention measures and follow them.
- The **Labor Mobility Subprogram** of the Ministry of Labor and Social Welfare (STPS) and/or the authorities in the community should support measures to keep track and records of migrants, including information on the addresses and identities of workers and their families.
- In the case of workers migrating on their own (that is, without their families) we recommend companies gather **reliable information about relatives** who can be notified in case they get COVID-19. The basic information on the contact relative should include: full name, family relationship, address, telephone booth or private telephone number, and cell phone numbers of the contact person and another relative.
- Medical teams from the health sector in their communities of origin should perform **medical examinations** of workers recruited before they board the vehicles
- The medical team performing those examinations should issue a **medical certificate or document** indicating the person does not show signs or symptoms of a respiratory disease and he/she is in good health.

- If a person with signs or symptoms of a respiratory disease is identified, he/she **should not be allowed to board the vehicle** and be referred for medical care. They should also receive the corresponding information and medical indications.
- It is important to ensure buses or vehicles transporting migrant workers follow **cleaning, disinfection and safe distance measures**.
- Workers and their families being transported should preferably wear **face masks and goggles**.
- Ensure **food and hydration** are available for workers and their families during the trip so they do not have to get off the bus. The bus should also have a **functioning toilet** and hygienic conditions.
- The first aid kit on the bus should **not include any medicines** to prevent workers and their families from self-medicating.
- **Locations with medical care available** should be identified beforehand in case a person feels sick.
- Contractors and workers should be informed about support hotlines they can call: **800 00 44 800 and/or the Health Sector Call Center** in the different Mexican states (Annex 3).
- The company must appoint **staff responsible for monitoring** the workers' trip (24 hours a day) and give them assistance if necessary.

2. Measures to follow prior to the arrival of workers

- **Fumigation, cleaning and deep disinfection** must be carried out in housing areas and service areas of living quarters prior to the arrival of workers.
- The company should have **medical and social work staff** available to welcome workers, and they should follow all prevention measures established by the health sector.



- **Specific areas should be designated to isolate** persons living temporarily in the company's living quarters who have COVID-19.
- **Protection equipment and materials** should be available for workers.
- **Education materials** to train workers should be designed.
- **You should prepare food** for workers arriving.

3. Measures to follow upon arrival in destination

- Contractors or drivers should be asked to provide **information about the persons traveling on their vehicles**, as well as a directory of their contact relatives.
- Welcome workers and **inform them of the protocol** to get off the bus and get settled in the housing areas.
- Passengers should **follow sanitary measures** before and during de-boarding.
- Perform a **medical examination** of all persons arriving to assess their health condition.
- **You should have prepared food available for them.**
- Once workers and their families get settled in the housing areas, they should be **provided with cleaning and disinfection materials** so they can keep their housing areas clear.
- **Reinforce training for workers and their families on prevention measures**, medical care and protocols to follow in the company's facilities.

4. Return of workers and their families

- Stress the importance of **prevention measures** among workers and their families.

- They should know the measures to follow **during their return trip and in their communities of origin.**
- **They should be advised not to have any physical contact with relatives and friends** and stay at home, isolated, for a minimum of 14 days.
- **Ensure** contractors and drivers fully understand these **prevention measures** so they can implement them.
- **Ensure** that buses transporting migrant workers follow the corresponding **cleaning, disinfection and safe distance measures.**
- **Workers and their families should get a medical examination** prior to their return, and nobody should travel if they show signs or symptoms of respiratory disease.
- Medical staff should issue **individual medical certificates** before people can travel. The certificate should include the company name, location and telephone number.
- Workers and their families should wear **protection during the trip, including face masks and goggles.**
- **Ensure food and hydration are available for workers and their families during the trip back to their communities** so they do not have to get off the bus. Also, the bus should have a functioning toilet and hygienic conditions.
- The first aid kit on the bus should **not include medicines** to prevent workers and their families from self-medicating.
- **Locations with medical care available** should be identified beforehand in case a person feels sick.
- Contractors and workers should be informed of the numbers of support hotlines they can call: **800 00 44 800 and/or the Health Sector Call Center** in the different Mexican states (Annex 3).
- The company must appoint **staff responsible for monitoring** the workers' trip (24 hours a day) and give them assistance if necessary.



9.2 Company welfare programs

Some living quarters or housing areas made available to migrant workers include daycare and education services for their children. For that reason, we have included a series of prevention measures to follow in those spaces:



1. Checkups at entry points and referral of persons with respiratory diseases

Staff working with children must do the following:

- **Apply antibacterial gel** to every child and adult entering the day care area (except for infants).
- **Take the temperature** of all children.
- Ask about **the health status of the child and his/her relatives** in the last 24 hours. The purpose of the questions to ask, which include the following aspects, is to identify suspected cases of COVID-19:
 - History of migratory transit from their places of origin.
 - Contact with confirmed cases of COVID-19.
 - Contact with a case under investigation.
 - Presence of one of the following signs or symptoms: fever (equal to or above 38°C), coughing, runny nose, sneezing, fatigue, muscle pain, headache and/or difficulty breathing.
- Children with a fever or signs of the disease **should not be allowed to enter the day care area**. Their parents should receive a medical assessment form so they can take their children to a doctor's office or an IMSS health clinic.

- If a child feels sick while in the daycare area, **his/her parents should be notified immediately** so they can get the medical care they need.
- Children and their parents **must be provided with face masks**.
- They **must be transported**, preferably in private vehicles or the company's ambulance, following all applicable safety measures, which also apply to the driver.

2. Handwashing with water and soap is required for personnel and children in day care centers:

- Prior to entering the daycare center.
- If their hands are visibly dirty.
- After coughing or sneezing.
- Before and after serving meals to children in the day care center.
- Before and after the staff eat their meals.
- Before and after children go to the bathroom.
- Before and after changing diapers.
- Before and after attending to a child, even if he/she is not sick.
- Before and after administering medicines.
- After using any form of public transport.
- Before and after cleaning a child's or your own nose.



3. Prevention measures

Prevention measures described in section 4, as well as those indicated below, must be followed in day care centers:

- Keep the day care center facilities well-ventilated.
- Frequent contact surfaces (telephones or cell phones, computers, light switches, tables, chairs, doorknobs, handrails, toys) **must be cleaned daily** with a chlorine solution.
- Ensure proper handling of human feces after diaper changes or handling potties.
- Avoid contact between bristles of children's toothbrushes stored.
- Trash cans should have plastic bags, their lids should be kept closed and they should be cleaned on a daily basis.
- Make parents aware of the importance of not bringing their children to the day care center if they have a fever of 38°C or above, sneezing, runny nose, fatigue, muscle pain, a headache or difficulty breathing. This recommendation also applies to the day care center staff.
- If a child has sick relatives, he/she should stay at home for a minimum of 7 days. To be admitted again, they should show a medical certificate for the sick relative.
- If a child or the day care center staff fail to show up, investigate the reason.
- Limit the number of children in each room, depending on its size and conditions.
- Implement basic vaccination schedules, with a coverage of 90% or more, for each child.
- Increase influenza vaccination coverage among children and workers to 95% or more.

- Do not allow self-medication for children or staff, who should see a doctor immediately in case they show COVID-19 signs or symptoms.

Measures applicable to day care centers also apply to schools for children of migrants



10. ROUTINE CLEANING AND SANITIZATION

Cleaning and disinfection programs should be implemented to limit employee exposure, with a particular focus on high-contact surfaces such as doorknobs, touchscreens, control panels, punch clocks, tables, rest areas, cafeterias, cafeteria tables, handrails, handwashing stations and restrooms. The frequency of cleaning should increase during the emergency.

Cleaning refers to the elimination of germs, filth and debris from surfaces. This process does not kill germs but, by reducing their number, it reduces the risk of spread of the infection.

Sanitization refers to the use of chemical products, such as EPA approved disinfectants, to kill germs on surfaces. This process does not necessarily clean dirty surfaces or kill germs but, by killing germs on surfaces cleaned, it can further reduce the risk of spreading the infection.

10.1 How to clean hard (non-porous) surfaces

- **Use disposable gloves upon cleaning and sanitizing surfaces.** Gloves must be disposed of after cleaning. Reusable gloves must only be used to clean and sanitize surfaces possibly contaminated with COVID-19, and should not be used for other purposes. Check the manufacturer's directions for cleaning and disinfection products used. Clean your hands immediately after removing the gloves.
- Dirty surfaces must be **cleaned with detergent or water and soap before sanitizing them.**
- Most **EPA approved common sanitation products for household use** should be effective for disinfecting tasks.
 - For a list of EPA approved products you can use to fight the COVID-19 virus, go to: <https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>. Follow the manufacturer's directions for the cleaning and disinfection products you use (concentration, form of use, contact time, etc.)
 - You can also use a mix of bleach and chlorine for household use diluted (at least 1,000 ppm of sodium hypochlorite) if applicable to the surface. Follow the label directions upon applying the product. Let it act for at least 1 minute and make sure the area is well-ventilated during and after application. Make sure the product has not expired. Never mix chlorine-based bleach with ammonia or other cleaning products. Chlorine-based bleach not expired will work against the coronavirus if diluted appropriately.
- **Chlorine-bleach solutions** should be prepared following the manufacturer's directions



10.2 How to clean electronic devices

- **For electronic devices such as cell phones, tablets, touchscreens, remote controls and keyboards, remove any visible contamination.**
 - Follow the label directions of the cleaning and sanitation products you use.
 - For electronic devices, consider the use of screen protectors that can be cleaned with a wipe or damp cloth.
 - If you do not have the product's label directions, consider using alcohol wipes or a spray sanitizer with at least 70% alcohol to sanitize touchscreens. Dry the surface thoroughly to prevent the accumulation of liquids.



10.3 General recommendations for routine cleaning and sanitization of housing areas or living quarters

Members of the community can routinely clean frequently touched surfaces, such as tables, door handles, light switches, doorknobs, desks, urinals, faucets, sinks and electronic devices.

To do so, they can use **household cleaners appropriate for each surface, always following the label directions**. The labels of cleaning product include directions for their safe and efficient use, as well as precautions to follow, such as using gloves and ventilating areas upon applying them.

When cleaning electronic devices, follow the label directions for the cleaning and sanitation products used. For electronic devices, consider the use of screen protectors that can be cleaned with a wipe or damp cloth. If you do not have the product's label directions, consider using alcohol wipes or a spray sanitizer with at least 70% alcohol to sanitize touchscreens. Dry the surface thoroughly to prevent the accumulation of liquids.

11. CLEANING AND SANITIZATION FOR SUSPECTED OR CONFIRMED CASES OF COVID-19

As soon as a worker with symptoms of COVID-19 or a confirmed case of COVID-19 is detected, cleaning and disinfecting the company's facilities is **essential**.



12. REFERENCE DOCUMENTS

- General Health Law and Federal Labor Law
- Federal Occupational Safety and Health Regulations
- Normas Oficiales Mexicanas de la Secretaría del Trabajo y Previsión Social
- Mexican Official Standards of the Ministry of Labor and Social Welfare, Health Safety Measures, issued by the General Health Council (*March 30 2020*)
- Agreement declaring the disease caused by the SARS-CoV2 virus (COVID-19) a health emergency by reason of force majeure, *dof_30032020*
- Action guide for worksites in response to COVID-19 (*April 1st 2020*)
- FAQs – Employment status as a result of COVID-19_STSP-SSA (*April 1st 2020*)
- Pan American Health Organization, communication and support materials used: <https://www.paho.org/es>; <https://www.paho.org/es/temas/coronavirus>; <https://www.paho.org/en/topics/coronavirus-infections/coronavirus-disease-covid-19/covid-19-communication-materials>
- World Health Organization, support materials used: <https://www.who.int/es>
- Mexican Government, official coronavirus and app download website: [COVID-19MX https://coronavirus.gob.mx/](https://coronavirus.gob.mx/)
- Mexican Social Security Institute: <http://www.imss.gob.mx/>
- Ministry of Labor and Social Welfare: <https://www.gob.mx/juntosporlstrabajo>
- Ministry of Health: <https://coronavirus.gob.mx/covid-19/>
- National System for Integral Family Development: https://coronavirus.gob.mx/wp-content/uploads/2020/04/Recomendaciones_Centros_De_Atencion_Infantil_COVID-19.pdf
- International Labor Organization: <https://www.ilo.org/global/lang-es/index.htm>



13. ANNEXES

Annex 1 Measures to expedite Social Security Institute (IMSS) procedures

Annex 2 Infographic - "Hotline - Call now"

Annex 3 Infographic - "Clean your hands with water and soap"

Annex 4 IMSS disability leave procedure

Annex 5 Infographic - "How to put on and remove personal protection equipment"

ANNEX 1. MEASURES TO EXPEDITE SOCIAL SECURITY INSTITUTE (IMSS) PROCEDURES

At a press conference held by health authorities on March 31st 2020, the head of the IMSS health care division informed that, to avoid exposing Social Security Institute beneficiaries to the pandemic, the following measures were implemented in response to the health emergency:

- **Prescription refills:** The purpose of this measure is to better serve patients with certain chronic diseases. These patients now have access to a medical consultation every three months, where they will receive prescriptions for refills, one per month. Refills can be picked up by a relative, acquaintance or friend, which means patients at risk will not have to do so personally.
- **Maternity leaves during the COVID-19 epidemic:** Pregnant patients receiving prenatal care at IMSS who need a maternity leave will only have to submit an application through a relative, friend or acquaintance, who should show an official ID and the patient's appointment card. The maternity leave, which will be valid for 84 days, will be issued at week 34 of pregnancy. For pregnant patients not receiving care at the IMSS, it will be necessary to submit a report from a private physician, in addition to lab test and physical exam results, duly signed. The report should also contain the physician's license information and be submitted together with the patient's appointment card indicating the clinical status of pregnancy. A relative, friend or acquaintance with an official ID can pick up the certificate.
- **COVID-19 telephone medical assistance:** To avoid large crowds at family medicine clinics and prevent the risk of coronavirus infections, a hotline (800 222 26 68) was launched to refer patients for appropriate medical care.



ANNEX 2. INFOGRAPHIC - "CLEAN YOUR HANDS WITH WATER AND SOAP"



⌚ Duración de este procedimiento: 40-60 segundos



0 Mójese las manos con agua.



1 Deposite en la palma de la mano una cantidad de jabón suficiente para cubrir todas las superficies de las manos.



2 Frótese las palmas de las manos entre sí.



3 Frótese la palma de la mano derecha contra el dorso de la mano izquierda entrelazando los dedos y viceversa.



4 Frótese las palmas de las manos entre sí, con los dedos entrelazados.



5 Frótese el dorso de los dedos de una mano con la palma de la mano opuesta, agarrándose los dedos.



6 Frótese con un movimiento de rotación el pulgar izquierdo, atrapándolo con la palma de la mano derecha y viceversa.



7 Frótese la punta de los dedos de la mano derecha contra la palma de la mano izquierda, haciendo un movimiento de rotación y viceversa.



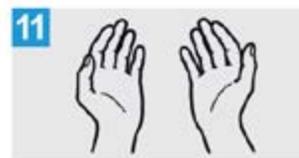
8 Enjuáguese las manos con agua.



9 Séquese con una toalla desechable.



10 Sirvase de la toalla para cerrar el grifo.



11 Sus manos son seguras.

Tener las manos limpias reduce la propagación de enfermedades como COVID-19

OPS



Organización
Panamericana
de la Salud



Organización
Mundial de la Salud

Conócelo. Prepárate. Actúa.

www.paho.org/coronavirus



Limpia tus manos

¿Cómo desinfectarse las manos?
CON UN GEL A BASE DE 60%-95% ALCOHOL.



¿Cómo lavarse las manos?
CON AGUA Y JABÓN



Tener las manos limpias reduce la propagación de enfermedades como COVID-19



Una vez secas, sus manos son seguras



Sus manos son seguras

OPS



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Limpia tus manos

¿Cuándo?



Antes de tocarte la cara



Después de toser o estornudar



Después de ir al baño



Antes y después de cambiar pañales



Antes de preparar y comer alimentos



Antes y después de visitar o atender a alguien enfermo



Después de tirar la basura



Después de tocar las manijas de las puertas



Después de estar en lugares públicos concurridos

Tener las manos limpias reduce la propagación de enfermedades como COVID-19

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ANNEX 3. INFOGRAPHIC - "HOTLINE - CALL NOW"

GOBIERNO DE MÉXICO

INICIO COVID-19 PREVENCIÓN PREGUNTAS FRECUENTES PERSONAL DE SALUD NOTICIAS MULTIMEDIA CONTACTO **FASE 2** Q

800 00 44 800
es el número de la
**UNIDAD DE INTELIGENCIA
EPIDEMIOLÓGICA Y SANITARIA.**

Ante el tema del **CORONAVIRUS (COVID-19)**,
llama si tú o alguien más tiene síntomas
de enfermedad respiratoria;
si estás en un grupo de riesgo o si necesitas
más información.

SI TE CUIDAS TÚ, NOS CUIDAMOS TODOS.

MATERIAL GRÁFICO ELABORADO VIERNES 26 DE FEBRERO DE 2020

GOBIERNO DE MÉXICO

Llama ahora

LÍNEA DIRECTA COVID-19

ESTADO	TELÉFONO ASESORÍA COVID 19
Agua Calientes	449 970 7900 Ext. 7133
Baja California	656 304 8048 664 108 2528 648 239 0955 646 947 5408
Baja California Sur	602 199 5386 624 228 6855
Campeche	911
Coahuila	911
Colima	800 337 2583 800 DE SALUD
Chiapas	800 772 2020 961 607 7674
Chihuahua	614 4293 300 Ext. 10004 911
Ciudad de México	555 658 1111 o envía un SMS con la palabra covid19 al 51515
Durango	618 137 7306 618 325 1575 618 134 7042
Guanajuato	800 627 2583 911
Guerrero	767 47 118 63
Hidalgo	771 719 4500
Jalisco	333 823 3220
Estado de México	800 900 3200
Michoacán	800 123 2890

ESTADO	TELÉFONO ASESORÍA COVID 19
Morelos	777 314 3336
Nayarit	311 217 0556 911
Nuevo León	818 361 0058 070 911
Oaxaca	951 516 1220 951 516 6242
Puebla	800 420 5782 911
Querétaro	492 101 5205
Quintana Roo	800 832 9198
San Luis Potosí	800 123 8888
Sinaloa	667 703 0063
Sonora	662 216 2759
Tabasco	800 624 7774
Tamaulipas	834 318 6320 834 318 6321
Tlaxcala	911
Veracruz	800 123 456
Yucatán	999 9303 050 Ext. 48042 911
Zacatecas	800 VO SALUD
Pemex	551 944 2500 Ext. 891 29 401 551 944 2500 Ext. 891 29 408



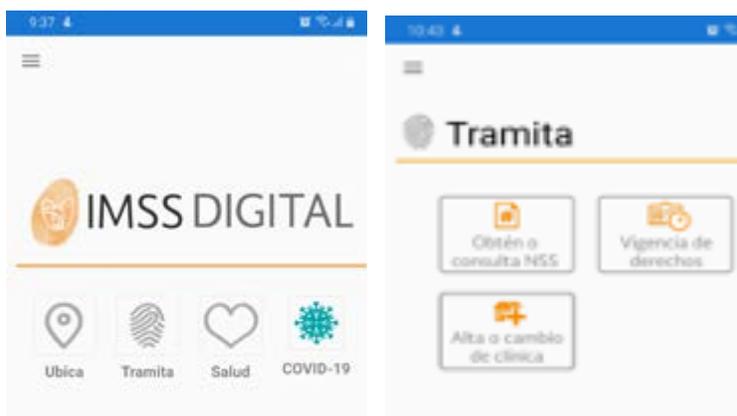
ANNEX 4. IMSS DISABILITY LEAVE PROCEDURE

1 Download the app



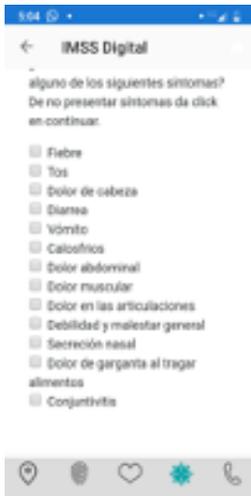
The *Digital IMSS* app can be downloaded from Play Store. Once installed on your mobile device, you will be asked to provide your personal information.

2 Access the *Digital IMSS* app



Access the *Digital IMSS* app and tap on the *Tramita* ("Procedures") icon, and then on the *Obtén o Consulta NSS* ("Get your NSS") icon. Enter your CURP number and your e mail address.

3 Tap on the COVID-19 icon



Follow the steps shown and enter your information carefully.

Answer the questionnaire and select the symptom(s) you have. Click on the *Continuar* ("Continue") button.

4 Tap on the COVID-19 icon

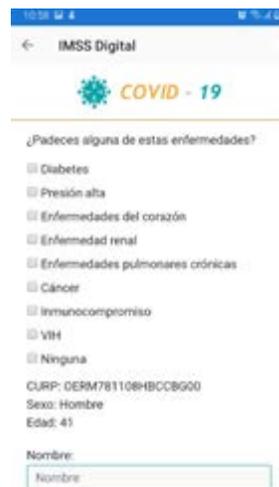
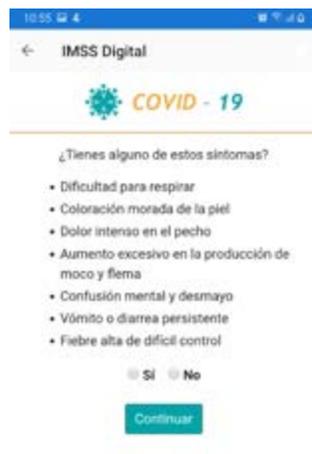
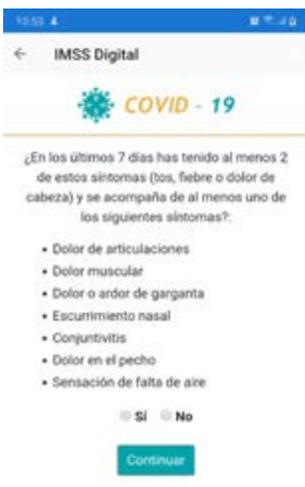


To continue, you must enter your CURP and your zip code.

Answer the questionnaire.

You will receive an e-mail with recommendations and a notice of your disability leave approval, if applicable.

5 Questionnaire

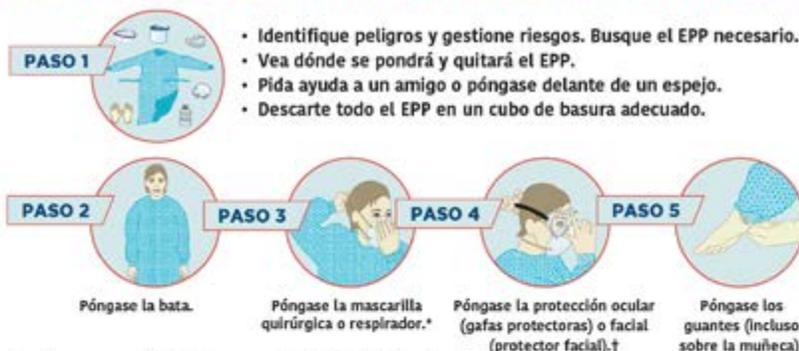


ANNEX 5. INFOGRAPHIC - "HOW TO PUT ON AND REMOVE PERSONAL PROTECTION EQUIPMENT"

COVID-19

Enfermedad por coronavirus 2019

CÓMO PONERSE EL EQUIPO DE PROTECCIÓN PERSONAL (EPP)



*Puede ser una mascarilla quirúrgica o un respirador (N95 o similar), según el nivel de atención. En el procedimiento generador de aerosoles (PGA), use un respirador (N95 o similar).
 †Por ejemplo, visor, careta o gafas protectoras (considere la posibilidad de usar gafas antiempañante o un líquido antiempañante).

CÓMO QUITARSE EL EPP

- Evite la contaminación para usted mismo, los demás y el entorno.
- Quítese primero los elementos más contaminados.



Nivel de atención	Higiene de las manos	Bata	Mascarilla quirúrgica	Respirador (N95 o similar)	Gafas protectoras (protección ocular) o protección de cara (protección facial)	Guantes
Triaje						
Recogida de muestras para diagnóstico de laboratorio						
Caso sospechoso o confirmado de COVID-19 que requiere ser admitido en el establecimiento de salud, pero no requiere ningún procedimiento generador de aerosoles						
Caso sospechoso o confirmado de COVID-19 que requiere ser admitido en el establecimiento de salud y que requiere algún procedimiento generador de aerosoles‡						

‡Los procedimientos que generan aerosoles comprenden la ventilación con presión positiva (sistema de bipresión positiva o sistema de presión positiva continua), intubación endotraqueal, aspiración de las vías respiratorias, ventilación oscilatoria de alta frecuencia, traqueotomía, fisioterapia torácica, tratamiento con nebulizador, inducción del espujo, broncoscopia y necropsias.

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[AHIFORES Oficial](https://www.youtube.com/AHIFORES)



[Ahifores](https://twitter.com/Ahifores)



Contact:



info@ahifores.com